Women’s Giving Circle Request for Assistance

The Women's Giving Circle of the Yampa Valley Community Foundation is seeking proposals on a rolling basis for their year-round granting. This group of donors wishes to have an immediate impact toward improving the situation of women, children or the elderly in the Yampa Valley. They are requesting proposals from organizations, schools and churches who may know of community members who could use a little boost from anonymous "angels" among us. If, in your work, you are familiar with a family or individual (especially children) who needs some help, we invite you to submit a proposal.

Guidelines for requesting assistance:

- Proposal must provide immediate help to an individual or family in Routt or Moffat County. The request should be a one-time, finite expense that addresses an urgent but not chronic need.
- Proposals will be accepted and reviewed on a rolling basis, year-round.
- Proposals must be submitted by a representative of an agency, school or church this is currently assisting the client (grant funds will be disbursed to the sponsoring agency).
- All proposals should include a specific dollar amount no more than $3000.
- All proposals for housing assistance must complete the supplemental housing application and meet the following criteria:
  - A client can only apply for housing assistance once
  - Assistance is available up to $1,500 and cannot exceed one month’s rent
  - Must present extenuating circumstance indicating need for emergency assistance (not ongoing need)
  - Your nonprofit must offer housing assistance as part of your regular programming.
- Organizational general support or client medical bill assistance is not of interest to the Giving Circle. The types of proposals that have been funded in the past include: a handicap access ramp for a home, a new furnace, bicycle repairs and electric meter compliance.
- Please submit the request for assistance (below) in a .pdf format to greg@yvcf.org (please do not include client names). YVCF encourages all agencies to call YVCF to discuss the individual circumstances of the family or individual needs before submitting a proposal: Greg Hamilton 970-879-8632.
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*YVCF encourages all agencies to call YVCF to discuss the individual circumstances of the family or individual before submitting a request for assistance: Greg Hamilton 970-879-8632.*

Agency Name: _____________________________________________________________

Phone: _____________________________  Email: _______________________________

Please describe the immediate needs your client faces and what impact the support of the giving circle would provide in reducing the toxic stress they face daily (*please do not use the client names*):

Amount requested (up to $3,000): _____________

Please provide a detailed description of how the funding will be spent:

If this request is partially funded, will you be able to assist the client or is full funding necessary? Please explain if full funding is requested.

Please explain other funding sources that have been pursued or exhausted for this request:

Signature: ________________________  Date: ____________

Proposals should be no longer than 2 pages (PDF) and submitted to greg@yvcf.org.
Does your nonprofit offer housing assistance as part of your normal programming? ______

Has the client received housing assistance in the past from other resources in the community?: _______________________________________________________________

If yes, from what organization(s)_________________________________________________

When will the client be evicted if the rent is not paid in full?  _________________________

Nonprofits, please provide confirmation that you have verified the above details with the landlord directly verbally or in the form of an eviction notice.

Has the client explored other more affordable housing options? Please explain why or why not:
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Amount requested (up to $1,500 and cannot exceed one month’s rent): ______________

How long has client leased at this address? What is term of current lease?
______________________________________________________________________________

Is client in good standing with the landlord other than the non-payment of a portion of the rent?_________________________________________