

Elsie Skvir Ganister Foundation Fund Grant Guidelines

The Elsie Skvir Ganister Foundation Fund is a donor-advised component fund of the First Community Foundation Partnership of Pennsylvania. The fund was founded in 2001 to preserve and perpetuate the teaching, mission, and ministry of the Orthodox Church in America or its canonical successors and its correlative institutions, organizations, agencies, and ministries.

Grants are made to qualifying 501(c)(3) organizations or charities described under IRS Section 509(a)(1), which includes qualified religious organizations, on an annual basis. Completed applications are **due by June 30.**

General Criteria for Reviewing Requests: The Foundation favors proposals that:

- Address priority needs of the Orthodox Church in America and/or opportunities in catalytic ways that enhance its mission;
- Show evidence of qualified leadership to complete project and responsibly administer grant funds;
- Clearly articulate a need/opportunity, demonstrate an effective focusing of human & financial resources, and hold potential for successfully impacting the identified need/opportunity;
- Combine clear goals with a plan for evaluating progress & measuring the outcomes to be achieved;
- Demonstrate a stable funding base from other sources and/or the ability to achieve long-term self-sustainability, especially when seeking start-up or seed funding;
- Use volunteers and in-kind support to reduce and complement financial support;
- Demonstrate potential for Foundation funds to leverage funding from other sources and/or propose use of a Foundation grant to attract matching funds;
- Does not duplicate other programs or projects serving the church;
- Is consistent with the teachings and ministry of the Orthodox Church in America.

Limitations: Generally **no grants** will be provided for:

- Annual campaigns and event sponsorships
- Endowments (unless created within the Foundation)
- Ongoing operational support (except for seed funding or in special situations as identified by the fund's advisory board)
- Debt reduction
- Direct grants to individuals
- Research grants of a highly technical or specialized nature

Grant Size: Foundation grants are typically up to \$1,000

Funding Request Process:

- Applicants must be qualified to receive tax-exempt contributions, including religious organizations defined under Section 509(a)(1) and public charities as defined by IRS Section 501(c)(3)
- All applicants must complete a Foundation Grant Application and include all materials listed on the checklist on page two of the application
- All applicants must submit either an electronic copy to BettyG@fcpartnership.org or **one copy if mailing**
- Awards will be announced in September

Mail applications to:

First Community Foundation Partnership of PA
Attn: Program Office
201 West Fourth Street
Williamsport, PA 17701

Contact Information:

Betty Gilmour, Director of Grantmaking
Phone: 570.321.1500
Fax: 570.321.6434
Email: BettyG@fcpartnership.org



2019 Elsie Skvir Ganister Foundation Fund Grant
Application Email to BettyG@fcfpartnership.org or submit one
copy if mailing

Organization Name

Tax ID#

Grant Writer Name

Title

Name of Organization Leader

Title

Organization Address

City

State

Zip

Office Phone

Alternate Phone

Office Fax

Email Address

Website Address

Organization's Purpose and History:

Program/Project name/title:

Amount Requested: \$

Request Type (select one):

Capital Equipment & Technology New Program Program Enhancement Special Event

Program/Project description:

What is the community need being addressed?

How did you determine need?

How does this relate to the mission of the organization?

If similar programs related to this need exist, how does your program differ?

List of key individuals and collaborating agencies involved in this program/project.

Description or method of how the program/project will be announced/offered to the community.

Description of how the Elsie Skvir Ganister Foundation Fund and the Community Foundation's support will be recognized.

Approximate number/percentage of residents impacted by this request:

If this is a recurring program what number/percentage of residents were served in the past year?

Program/Project Budget Sheet

Annual Operating Budget of Organization: \$

Total Program/Project Budget for this request: \$

| Expense Items | Amount | Amount requested for funding from the Foundation |
|---|---------------|---|
| List expenses for this request. On a separate page, provide a brief description of any items that are not self-explanatory. | | |
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| Total Expenses | \$ | \$ |

| Funding Sources | Amount Pending | Amount Committed |
|--|-----------------------|-------------------------|
| List each pending and/or committed source of funding | | |
| Community Foundation Grant | \$ | |
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| Total of Funding Sources | \$ | |

Percentage of Program Budget request with funding from the Foundation: %

[Foundation Amount Requested divided by Total Program/Project Budget equals Percentage of Foundation Request]

Status of Pending Funds:

Evaluation Plan

Program Start Date: / /

Program End Date: / /

What are the measurable goals of this project?

What data will you use to determine if these goals have been met?

How will you collect this data (pre/post test, survey, journals, personal interviews, etc.)?

What are the desired long-term outcomes on the community at-large?

Is this program sustainable? If so, how to you plan to sustain the program going forward?

Any additional information you feel should be considered while reviewing this request?

How did you hear about the Elsie Skvir Ganister Foundation Fund grant opportunity?

Website Press Release Word of Mouth Other

Required Attachments

The additional items listed are required in order for your request to be considered.

If you are unable to provide any of these items, please contact the Program Office for further instruction.

1. Completed application
2. Copy of most recent IRS determination letter regarding your organization's or your Fiscal Sponsor's tax-exempt status – **this letter MUST be included with your application**
3. Most recent applicable tax forms and other financial statements (If using Fiscal Sponsor, submit these materials for both Fiscal Sponsor & applicant as appropriate)
4. Current itemized annual budget
5. List of Board of Directors (and Fiscal Sponsor's list, if applicable)

Applicant certification: *To the best of my knowledge, statements in this application and all attachments are true and correct; the document has been duly authorized by the governing body of the applicant; the applicant agrees to report to the Community Foundation on the use of any grant funds received and on the progress of the project to be funded; and the applicant will comply with applicable laws, regulations, terms, and conditions in effect at the time of a grant award. I further understand that the First Community Foundation Partnership of Pennsylvania, in evaluating this grant application, may review any information submitted as part of this request with advisors of the Community Foundation's choosing and will treat information submitted by applicant in a confidential manner.*

Applicant Name (*printed or typed*)

Title

Applicant Signature

Date

Supervising Clergy Signature

To Be Completed by Fiscal Sponsor:

A Fiscal Sponsor is required if applicant is not a 501(c)(3) organization or other agency qualified to receive tax deductible contributions as recognized by the Internal Revenue Service.

Fiscal Sponsor

Tax ID #

Contact Name

Phone

Address

City

State

Zip

Mission of Agency/Organization

Relationship to Applicant

Disclose fee being taken, if any or N/A

My agency/organization is qualified to receive tax-deductible contributions and has agreed to assume responsibility and accountability as Fiscal Sponsor for the above named applicant.

Name (*printed or typed*)

Title

Signature

Date