Grossmont Healthcare District

FY 24-25 Full Grant Application: PREVIEW

A full grant application is required of organizations requesting an amount of more than $25,000. The application portal will open on July 1, 2024. An overview of the required information is provided below.

Organization Information
- Legal Name of Organization
- Address
- Organization Website
- Organization Introduction: Please provide a brief (100 words) introduction to the organization, and its primary purpose(s).

Applicant Information
- Name (application point of contact)
- Applicant Title
- Applicant Phone

Agency Director (if different than applicant)
- Name
- Phone
- Email

Uploads
- Please upload a list of of your current Board of Directors, with affiliations. A .pdf of a webpage is sufficient, if your organization does not maintain a formal document.
- Please upload the most recently-updated version of your nonprofit bylaws.
- An organizational pamphlet or flyer may be attached (optional). If provided, please limit promotional materials to 1-2 pages of information.

Previous Funding
- Has the organization received grant or sponsorship funding from the Grossmont Healthcare District within the past five years? If yes, provide amounts awarded in any applicable year since FY 2019/2020.

Grant Information
- Proposed Project Title
- Project Highlights: Please provide below a concise (100 words) description of the proposed project.
- Amount of Funds Requested
- Number of Unduplicated GHD Residents to be Served: Please indicate the number of unique individuals who reside within the GHD boundaries that you anticipate will be served through this project during the grant year.
- Ages of Population to be Served (select all that apply)
  - Early childhood (up to 5 years)
  - Middle childhood (6-11 years)
  - Adolescent (12-17 years)
  - Adult (18-65)
  - Seniors (65+)
- Which of GHD's strategic priorities best aligns with your project? (select one)
  - Aging
  - Behavioral Health
  - Chronic Conditions
    - Which chronic condition?
      - Heart
      - Stroke
      - Cancer
      - Other: If selected, please describe
  - Other Priority Area:
    - Care Navigation
    - Community Safety
    - Food Insecurity
    - Intellectual and Developmental Disability
    - Workforce Development
    - Another priority not listed here: If selected, please describe

Areas of Impact

Which zone(s) of the Grossmont Healthcare District will your project impact? (select all that apply)
- Zone 1: Santee
- Zone 2: Spring Valley, Lemon Grove, Mountain Empire communities (Tecate, Potrero, Campo)
- Zone 3: La Mesa
- Zone 4: Lakeside, Harbison-Crest, Alpine, Pine Valley, Tribal communities (Barona and Viejas Reservations)
- Zone 5: El Cajon, Jamul

Project Narrative
- Part 1 - Problem Statement (250 words)
  - Please provide a summary description of the issue(s) or challenge(s) that the proposed project seeks to address, and the need for these proposed service(s) within the Grossmont Healthcare District.
- Part 2 - About Your Organization (500 words)
  - Please share the most important information about your organization, and its capabilities to address the problem(s) described above. Relevant information could include some of the following:
    - How will your organization's history and experience make this project successful?
    - Current programs and recent accomplishments or achievements
    - Recent major changes to financial and/or organizational circumstances
- Part 3 - About the Community Served (500 words)
  - Please share information about the community that will be served through this project. Relevant information could include some of the following:
    - The primary community opportunity, challenge, issue or need that your organization works to address
    - Information about the people you serve such as socioeconomic status, race, ethnicity, gender, sexual orientation, age, physical ability, and language
    - Details about how you work with other organizations, coalitions, or networks that serve the same community, or provide similar services
    - Details about how you listen to/involve constituents, community members, and/or volunteers
- Part 4 - About Your Project (750 words)
  - Please explain the project. It is not necessary to restate information answered above. Relevant information could include some of the following:
    - What you plan to do (activities) and anticipated timeframe
    - Why you plan to do it (opportunity, challenge, issue or need)
    - Who will be impacted (target population, including age, gender, ethnicity, other relevant characteristics)
    - Whether the proposed project is a new service or an established service or program that will be expanded to GHD residents
- Part 5 - About Your Impact
  - Measurable Project Goals: In addition to the number of unduplicated GHD residents to be served, please briefly describe below 2-3 measurable goals that the project aims to achieve.
  - In a brief (250 words) narrative, please explain what success looks like for the project overall, and for any goals stated above. How do you track impact and how do you know you're moving toward it? Relevant information could include some of the following:
    - What kind of data will be measured, and how will it be collected?
    - How will the organization generate referrals, or market the services?
    - How would the proposed project specifically fulfill the elements of the Grossmont Healthcare District's mission?

Project Budget and Organization Funding Sources

- Project Budget: The project's total budget, including requested GHD funding as well as other funding that is available to support the project (an electronic form will be provided)
- All Budget Sources: The organization's total budget for the current fiscal year and all major sources of revenue (an electronic form will be provided)

Organization Financials

- Please provide the most recent set of financial statements:
    - Statement of Financial Position
    - Statement of Activities (or Statement of Income and Expenses)
    - Statement of Cash Flows
- Financial Overview: Please enter the following figures, from the most recent set of financial statements (provided above):
    - Total Assets (from Statement of Financial Position):
    - Current Assets (from Statement of Financial Position):
    - Total Liabilities (from Statement of Financial Position):
    - Current Liabilities (from Statement of Financial Position):
    - Total Revenue (from Statement of Activities):
    - Cash Flow From Operations (from Statement of Cash Flows):