# **Logo, company name Description automatically generatedCOMMUNITY PARTNER**

2025 MINI GRANT APPLICATION CYCLE 1

United Way of Lee County (UWLC) Mini-Grants are available to 501c3 organizations in Lee County to promote wider impacts that increase our capacity to care for one another. The grants are based around prevalent pillars of need in our community and are as follows:

* *Healthy Community* – Improving the well-being for all and equitable health access through a broader array of interventions, including nutrition, food security, mental health support and more. Associated initiative examples may include:
* Healthcare access
* Maternal and child health
* Nutrition and food security
* Healthy spaces and physical activity
* Chronic and infectious disease awareness and prevention
* Mental health support
* Substance misuse recovery and prevention
* *Youth Opportunity* – Helping to prepare young people to realize their potential from cradle to career. Associated initiatives may include:
  + Family support
  + Early intervention
  + Youth mental health support
  + Career counseling
  + Youth enrichment
  + Skill development
  + Curriculums and resources
* *Financial Security* – supporting programs focused not only on income (which may not be a livable wage) or financial stability, but on creating pathways to a stronger, more sustainable financial future. Associated initiatives may include:
  + Adult education, job training, and career pathways
  + Financial education and coaching
  + Homelessness prevention, affordable housing, and homeownership
  + Small business support
  + Public benefits access and removing barriers
* *Community Resilience* – addressing urgent community needs while contributing to long-term, systemic community strengthening. Associated initiatives may include:
  + Crisis hotline and support
  + Emergency preparedness
  + Disaster relief and recovery
  + Environmental stewardship and sustainability

Grants are available in lump sum amounts between $5,000 and $10,000 per nonprofit or program. Grant applications will be reviewed by a committee of local business professionals. The number of grants available and the amounts offered are determined each year by our United Way Campaign and Allocation cycles. United Way of Lee County reserves the right to withhold grants if funds are insufficient for the amounts requested, if programs do not meet United Way guidelines and pillars, or if applications are incomplete.

All Mini-Grants are intended for use ONLY in Lee County. If a program is not based in Lee County but serves individuals in Lee County, Mini-Grants can ONLY be used to serve Lee County residents. Additionally, applicants must have an IRS 501(c)3 status that is at least two years old or more. Funds awarded from Mini-Grants are not eligible for sales tax exemption, and grant recipients are not to be considered United Way agencies.

Applicants can only receive ONE grant per cycle. Previous grant recipients are required to submit an impact report by **February 3rd, 2026**. Failure to submit an impact report will disqualify that organization from future consideration. Organizations are eligible to receive grants up to three times for the same program.

Applications open at 8 AM on **February 3rd, 2025,** and are due by 4 PM on **March 14th, 2025**. Applications and required documents can be emailed to Brynne McCormick at *impact@unitedwayofleecounty.com*

What can be funded:

* Existing or new programs
* Operating costs
* Salaries

What cannot be funded:

* Match funds
* Lobbying
* Reimbursements
* Training costs

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| **Grant Timeline:** | |
| February 3, 2025 | Applications Opens |
| March 14, 2025 | Applications Close |
| March 28, 2025 | Recipients Announced |
| April 1, 2025 | Signed Contracts Due |
| April 4, 2025 | Distribution of Funds |
| February 3, 2026 | Grantee Impact Report Due |

Application Checklist:

* Application
* Proof of IRS 501c3 Status
* List of Board of Directors and affiliation
* Proposed Program budget
* PREVIOUS GRANTEES: Impact Reports are required for previous recipients before you can be eligible again

[Please Check All Boxes]

* I have read and understand the guidelines for eligibility for a UWLC mini grant.
* I am confirming that my organization is a 501c3 organization.
* I understand that I can only receive a grant up to three times with the same program.
* I understand that the decision for funding is up to the Committee/UWLC Board, and I will not hold UWLC responsible for decisions made.
* I understand that I can only receive one grant per cycle, and that should my organization be chosen, the funds will only be used for the proposed programs.
* I understand that submitting a partial application (missing required documents, organization information as applicable) may result in the elimination of my organization for current consideration. Questions regarding the application must be addressed prior to submission of the application.
* I understand that failure to be truthful in any of my responses will result in the elimination of my organization for current and future consideration.
* I understand that my organization will need to sign a nondiscrimination policy if awarded the grant, and that receiving the grant is a commitment to the adherence of these policies.

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2025 MINI GRANT APPLICATION CYCLE 1

### COMPLETED FUNDING APPLICATIONS AND ALL ATTACHMENTS REQUIRED MUST BE RETURNED TO THE UNITED WAY OFFICE ON OR BEFORE **March 14th, 2025**, IN ORDER TO BE CONSIDERED FOR FUNDING.

**Note: ALL data and information reported in this application must encompass ONLY services provided to Lee County. If your agency serves more than one county, please do not include any statistics in this application about services provided to other counties.**

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| **Organization Information** | |
| Organization Name |  |
| EIN# |  |
| Hours of Operation |  |
| Primary Contact- Name and Email |  |
| Financial Contact- Name and Email |  |
| Impact Pillar (circle one only) | Healthy Community Youth Opportunity Financial Security Community Resilience |

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| **2025 Request Amount: $** | | |  | |
| **Mission Statement: Please Give Your Organization’s Mission Statement and a Brief Description of Your Organization’s Purpose.** | | | | |
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| **Services: Please List the Services and Programs Provided by Your Organization.** | | | | |
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| **Target Population(s)** | | | | |
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| **Total Number of Unduplicated Lee County Clients** | | | | |
| # Clients 2024 (Actual + Projected) | | # Clients 2025 (Anticipated) | | |
| **Outputs & Outcomes Measured by Each Program or Service (2024)**  ***(Outputs: Ex. 1 hour of counseling, 15-hour parenting course, pounds of food, etc.)***  ***(Outcomes: 75% of children reached all age-appropriate milestones, 25 people achieved permanent housing, etc.)*** | | | | |
| **Program/Service** | **Number/Type of Outputs Provided** | | | **Outcomes Anticipated** |
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| **Anticipated Outputs & Outcomes for Each Program or Service (2025)**  ***(Outputs: Ex. 1 hour of counseling, 15-hour parenting course, pounds of food, etc.)***  ***(Outcomes: 75% of children reached all age-appropriate milestones, 25 people achieved permanent housing, etc.)*** | | | | |
| **Program/Service** | **Number/Type of Outputs Anticipated** | | | **Outcomes Anticipated** |
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| **Describe the Community Need for the Services/Programs Provided by Your Agency. Include Local Statistics When Possible.** | | | | |
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| **In as Many Details as Possible, Provide a Description of How the Funding will be Used.** | | | | |
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| **How would the Reception of this Grant Expand Your Organization’s Ability to Serve?** | | | | |
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| **What Other Organizations in Lee County Provide the Same or Similar Services to the Community? What Sets Your Organization Apart?** | | | | |
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| **How Do You Measure Outcomes?**  ***(Ex. ABC Assessment, client surveys, etc.)*** | | | | |
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| **It is Possible that UWLC Won’t be Able to Fund the Full Amount of Every Request. Could This Program Still Move Forward with Partial Funding? Please Explain Your Answer.** | | | | |
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| **Is There Anything Else You Would Like Us to Know About Your Organization? (Optional, 200 Word Limit)** | | | | |
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### Primary Contact Signature:

Secondary Contact Signature:

**Note: Signatures indicate that the documents were reviewed and approved by the Board of Directors who is solely responsible for the content and accuracy of all information submitted both on and with this application.**