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THE IRENE E. & GEORGE A.
Davis Foundation

The Irene E. & George A. Davis Foundation
Grant Application

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Resume Later

In order to be able to resume this form later, please enter your email and choose a password.

Your Email:

A Password:

Confirm Password:

Password must contain the following:

- 12 Characters
- 1 Uppercase letter
- 1 Lowercase letter
- 1 Number
- 1 Special character

Save

Application Instructions:

Please complete all applicable fields in the form. Required fields are marked with an asterisk (*).

Please note the following file attachment limits:

- **Maximum files**: Up to 15 files total
- **Maximum size**: 30 MB combined across all uploads

ORGANIZATION AND CONTACT INFORMATION

Organization Information

Applicant Organization (Legal Name) *

Federal Tax ID *

Copy of IRS Determination Letter *

Choose File *No file chosen*

Organization Contact Information

Address Line 1 *

Address Line 2

City *

State *

Postal Code *

Phone * *(###-###-####)*

Website Address *

Requestor Contact Information

Prefix *

First Name *

Last Name *

Suffix *

Title *

Phone * *(###-###-####)*

Email *

Executive Director Contact Information

☐ I am the Executive Director

First Name *

Last Name *

Email *

Phone *(###-###-####)*

Description of the Organization and its Mission

Please provide a brief description of the organization, population served, and mission. *

Organization Leadership

Please provide a list of your senior staff leadership team including name, title, and tenure. *

Choose File *No file chosen*

Please provide a list of your current Board of Directors including name, affiliation, and tenure. *

Choose File *No file chosen*

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FUNDING REQUEST INFORMATION

Funding Request Details

Funding Request Name * *(Please enter max 80 characters.)*

Amount Requested * *(Please enter a whole number with two decimals max, no dollar signs or separating commas, e.g. 1000.55)*

The Irene E. & George A. Davis Foundation awards funding in the following areas:

Priority Impact Issue Areas

- Early Childhood
- Youth Literacy
- Innovation & Excellence in Education
- Youth Development
- Economic Development & Mobility

Community Support

In addition to focusing on the funding priorities mentioned above, the Foundation also considers requests from organizations for projects/programs that may not fall into one of the above categories, but that still offer a vital service to or enriches the lives of Hampden County residents. These grants are typically $25,000 or less.

Based on the categories listed above and your request, please select the funding area below that you feel best aligns with the work that your organization does and/or the program/project for which you are seeking funding. If there is alignment with more than one funding area, please select a single funding area that best aligns.

Please note which funding area your funding request falls under: *

- ○ Early Childhood
- ○ Youth Literacy
- ○ Innovation & Excellence in Education
- ○ Youth Development
- ○ Economic Development & Mobility
- ○ Community Support

Does your project serve or impact residents of Hampden County? *

Please select...

Please indicate which cities/towns your project impacts. Please check all that apply. *

- *Please select...*
- Agawam
- Blandford
- Brimfield
- Chester
- Chicopee
- East Longmeadow
- Granville
- Hampden
- Holland
- Holyoke
- Longmeadow
- Ludlow
- Monson
- Montgomery
- Palmer
- Russell
- Southwick
- Springfield
- Tolland
- Wales
- West Springfield
- Westfield
- Wilbraham

To select more than one value, hold down the ctrl key and highlight the desirable values.

Funding Request Description

Please provide a brief description/summary of the project or program for which you are requesting funding. If you are a returning applicant and requesting funding for the same program, please also share: (1) How the program went in the most recent grant period, (2) Who you served, and (3) Key outcomes or lessons learned. *

Please provide a description of the population you aim to serve or reach through this proposed project/program, including the number of individuals you intend to serve: *

What is the total cost for this specific program/project? *(Please enter a whole number with two decimals max, no dollar signs or separating commas, e.g. 1000.55)*

Please provide a budget specific to the proposed work for which you are requesting funding.

Choose File *No file chosen*

Up to 1 file only.

Are there any organizations that you are partnering with to deliver this program or to do this work? If so, please indicate the names of these organizations and provide a brief explanation of how are you working together:

Please provide detail with respect to program goals and desired impact:

What are your primary goals and/or what do you hope to achieve? *

How do you intend to measure your progress or success? *

If available, please share any data that you have that provides evidence of the impact of your program. (Examples might include data, evaluation results, participant feedback, testimonials, or other indicators of impact)

If available, please share any data that you have that provides evidence of the impact of your program.

Choose File *No file chosen*

Up to 3 files only.

Additional Funders

Please list other funders from whom you have requested funding for this project. *Sharing this is not a requirement but does help us understand how you intend/hope to fully fund this program/project.*

*Click **Add another response** for each entry (up to 5).*

Funder Name

Amount of Funding *(Please enter a whole number with two decimals max, no dollar signs or separating commas, e.g. 1000.55)*

Funding Status

Please select...

Organization Financials

Organization Total Budget * *(Please enter a whole number with two decimals max, no dollar signs or separating commas, e.g. 1000.55)*

Organization's most recent 990 *

Choose File *No file chosen*

The most recent 3 years of audited or reviewed financial statements. *

Choose File *No file chosen*

Up to 5 files only.

Current fiscal year budget. *

Choose File *No file chosen*

Please provide a list of your organization's top five funding sources (foundations, government grants/contracts, individuals, etc.), with annual contribution amounts, for past three years. *

Choose File *No file chosen*

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CERTIFICATION

Please initial below to indicate that this grant application is being submitted with the full knowledge of your organization's Executive Director *

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Submission exceeding these parameters will result in error.

Please utilize the "Save my progress and resume later" feature if needed.

Submit

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