



PDF Overview of Listen for Good 2017 Grant Proposal

Please use the online portal to submit a grant proposal.

This PDF is simply an easy way to see the key proposal components and questions.

APPLICATION COMPONENTS

TASK	DEADLINE	STATUS	ACTIONS
Proposal Form		INCOMPLETE	▶ Start
Project Budget (use template provided)		INCOMPLETE	▶ Start
<p>Please click on this task to access the project budget template, download from the righthand side of the page and complete it as appropriate for your proposed Listen for Good implementation plan, and then upload the final document here (also as an Excel file).</p>			
Upload Audited Financials for Your Most Recent Fiscal Year		INCOMPLETE	▶ Start
<p>Please upload your organization's audited financials for your most recent fiscal year. If you don't have audited financials, then please upload un-audited financials for your most recent fiscal year.</p>			
Upload Organizational Budget for Last Fiscal Year		INCOMPLETE	▶ Start
<p>Please upload the budget for your most recent full fiscal year (e.g. if your fiscal year ends 12/31 then please upload your FY 2016 budget here). If possible, please reflect the planned and actual budget.</p>			
Upload Organizational Budget for Current Fiscal Year		INCOMPLETE	▶ Start
<p>Please upload the budget for your current fiscal year.</p>			
Upload Your Organization's IRS Determination Letter		INCOMPLETE	▶ Start
Upload Your Organization's Logo		INCOMPLETE	▶ Start
<p>We will only use logos of organizations accepted to Listen for Good. This is a convenient way to collect them and save a step down the road.</p>			

**OPTIONAL Demographic Data for
Your Organization's Staff and Board**

INCOMPLETE

▶ Start

Completing this demographic data form for your organization's staff and board is optional. Choosing not to complete the data form will not result in any adverse action against your proposal or organization. Please click into this task for more details and to access the form.

OPTIONAL Upload Strategic Plan

INCOMPLETE

▶ Start

If you have a strategic plan that you're willing to share with us, please upload it here. This task is optional, but helps us get to know your organization and work better.

**OPTIONAL Upload a Photo that
Represents Your Work**

INCOMPLETE

▶ Start

Please upload a photo that we have your permission to use publicly (with attribution) to share the work of Listen for Good. Note: We will only use photos from accepted applicants -- but this is a simple and efficient way for you and for us to gather photos now.

Submit your application

Proposal Form

1. Organization Information

Applicant Organization's Legal Name	<input type="text"/>
Publicly Used Name (Doing Business As) if Different than Above	<input type="text"/>
EIN #	<input type="text"/>
Street Address 1	<input type="text"/>
Street Address 2 (if needed)	<input type="text"/>
City	<input type="text"/>
State (please write out full state name)	<input type="text"/>
Zip Code	<input type="text"/>
Website URL	<input type="text"/>
Total number of full time staff that work in your organization	<input type="text"/>
Total number of part time staff that work in your organization	<input type="text"/>
Total number of volunteers annually	<input type="text"/>

2. Head of the Organization

Name	<input type="text"/>
Title	<input type="text"/>
Phone Number	<input type="text"/>
Email Address	<input type="text"/>
Brief Bio	<input type="text"/>

3. Primary Contact for this Grant Proposal

Name

Title

Phone Number

Email Address

Brief Bio

4. Primary Contact for Listen for Good Implementation

If you are selected to participate in Listen for Good, please share information for the person who will serve as the primary contact/project manager for implementation

Name

Title

Phone Number

Email Address

Brief Bio

If you don't know yet who will serve as the primary contact/project manager, please use this space to describe more about why not (yet) and when/how you would identify this person.

5. Additional People Involved with Listen for Good

In addition to the project manager, please share a little more information on any other staff you think will be working on the Listen for Good project. **Leave blank if not applicable.**

Name, Title and Brief Bio - Person 1

Name, Title and Brief Bio - Person 2

Name, Title and Brief Bio - Person 3

6. Financial Information

Annual Organization Budget for your Current Fiscal Year (please enter a number without commas)

\$

Fiscal Year End Date for your Organization (mm/dd)

7. Nominating Funder

Nominating Funder for this Proposal

Name of the Contact Person at your Nominating Foundation

Title of the Contact Person at your Nominating Foundation

Email Address of the Contact Person at your Nominating Foundation

Phone Number of the Contact Person at your Nominating Foundation

8. How did you first hear about Listen for Good?

9. Please confirm that we may share this proposal with all of the core funders and staff of Fund for Shared Insight, and everyone selected for the proposal review team.

Yes

No

10. Please list the program for which you are applying to Listen for Good.

You do not need to apply for more than one program, but you may apply to start in up to three programs (and you can expand to more after that, we just recommend starting with a manageable number). Please use a different set of fields for each program. (Note: You do not need to list other (all) programs here.)

	Program(s)	Annual Program Budget (please enter a number without commas)	Number of beneficiaries served in the program annually (please enter a number without commas)
1	<input type="text"/>	\$ <input type="text"/>	<input type="text"/>
2	<input type="text"/>	\$ <input type="text"/>	<input type="text"/>
3	<input type="text"/>	\$ <input type="text"/>	<input type="text"/>

11. Please provide an overview of your organization with a focus on the program(s) for which you are applying to Listen for Good. What is the goal of the program(s)? What outcomes do you seek in the program(s) and how do you measure progress? (500 words or less please)

12. Please tell us more about the ecosystem in which you work. Are there similar providers to yours? How does that affect (or not affect) your work? (500 words or less please)

Note: There is no right answer here; we want to better understand the context in which you operate.

13. Who are the beneficiaries served in the program(s) for which you are applying to Listen for Good? What do you know about who they are? (500 words or less please)

14. Why are you interested in participating in Listen for Good and implementing high quality feedback loops with the people you seek to help? What makes this a particularly opportune time for you to pursue this work? (500 words or less please)

15. How would you describe your organizational capacity to collect, analyze, and respond to feedback (from any audience – donors, volunteers, staff, beneficiaries, others)? If this is a lower capacity area, that is ok -- we want to hear about it! (500 words or less please)

16. Have you ever collected feedback from the people you seek to help before? Will Listen for Good be building on a system you already have for feedback collection, or will it be a new project (ok if it's new, we just want to learn more)? (500 words or less please)

17. If this is new for you, why do you think your organization hasn't collected feedback before (and remember it's absolutely ok if you haven't done this before)? If this builds on existing work, tell us about what you did (what you collected, how, when, and at what intervals), what you learned, and what you did with that data. Did the data collected lead to any programmatic changes? Did you share what you learned back with those from whom you collected feedback? (500 words or less please)

18. What do you think are going to be the biggest hurdles for you in systematically collecting and using beneficiary feedback? How might your organization manage those challenges should they arise? (500 words or less please)

19. FEEDBACK DESIGN AND IMPLEMENTATION PLAN

Please use this chart to lay out a rough draft design and implementation plan for your Listen for Good data collection efforts. Use one column for each program in which you plan to implement. There is no word limit here but aim for quality over quantity please.

If your organization is selected to participate in Listen for Good, we will work with you to refine and finalize this plan before you begin implementation. We want to reiterate and underscore that we understand and expect that the plan below will change between the proposal and implementation. There is a lot that we will all learn together as we continue to learn from this work and there are a lot of unknowns at the outset too.

	YOUR DRAFT PLAN - Program 1	YOUR DRAFT PLAN - Program 2	YOUR DRAFT PLAN - Program 3
1 - Pending September grant announcements, when in 2017 (or early 2018) do you want to begin collecting feedback as part of Listen for Good?			
2 - On what kind of cycle/interval, might you regularly collect feedback? Why? How does this dovetail with your program cycles?			
3 - How many beneficiaries will you request feedback from in each cycle (approximately)? How many beneficiaries do you anticipate requesting feedback from overall in the first year?			
4 - What do you think will be the most effective method(s) for administering surveys to your beneficiaries (e.g. web, phone, tablets, paper etc.)?			
5 - In what language(s) do you plan to collect feedback? Please share any other language- or literacy -related details here.			
6 - When you receive feedback data, how will you share it within your organization? Do you anticipate that both staff and volunteers will be involved in this process and, if so, how?			
7 - How will you close the loop with the people who gave feedback?			

LISTEN FOR GOOD Budget Template

INSTRUCTIONS:

Please complete all fields shaded in gray.
Everywhere else, the formulas in the spreadsheet will auto-fill.
The two totals in green (both will auto-fill) should match.

Organization Name _____
Project/Program Name _____

Total grant amount requested from Fund for Shared Insight: (1)	45,000	over two years, \$30,000 in Year 1 and \$15,000 in Year 2
Project/Program funding expected from other sources:	0	We assume you won't have other funders for this -- though if you have a larger budget for it and want to note that here, you certainly may.
Total Project/Program amount	45,000	

Proposed Project Budget - complete the categories as applicable	DETAILS ON COSTS INCLUDED IN EACH CATEGORY	Start:	Start:	Total
		End:	End:	
		Year 1	Year 2 (2)	
Salaries				0
Payroll Taxes & Employee Benefits				0
Supplies to implement the program				0
Other ongoing costs to implement the program -				0
Other - please note what you are including Overhead (1)				0
Total Project/Program Budget (totals in the two green boxes should match)		0	0	0

NOTES

- (1) Overhead typically includes occupancy (rent, utilities, etc.), information technology, and wireless / telecommunications costs. It can also represent overhead allocations of common costs.
- (2) We know that this budget is your best assessment right now of how you'll spend the grant funds and that your actual expenses may be different than what you list here. That is ok. And we're especially aware that you really don't know yet exactly how you will spend the year 2 funds, so just share your current best thinking here please.