



# Community Enrichment Grants 2024

## Open year-round

Online Application Portal Opens first week  
of April at [westmarinfund.org](http://westmarinfund.org)

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The present document outlines the questions that will be contained on the online form so interested organizations can start thinking about their answers and determine if they would like to develop a proposal.

The proposal has two sections: SECTION I: Your proposed activity or event, and SECTION II: About your group or organization (and Fiscal Sponsor if using one)

### SECTION I: Your proposed activity or event

- **Activity Title\*** Please assign a name to the activity or event proposed.
- **Activity Description\*** Please describe the activity or event you are requesting funding for. Please include as many details as you have in terms of place, date, participants, volunteer contributions, etc.
- **Date of Activity or Event\*** Please describe when the activity or event will be carried out. Please explain if there is flexibility or any constraints around the date.
- **Places to benefit\*** Please select the places where you will carry out your event or that will directly benefit from the proposed activities. Select all that apply.
- **Communities to benefit\*** Please tell us more about the communities or population groups your activity or event intends to benefit. What shared geography, shared identity and/or shared priorities define them? Use data if available and please differentiate if they live, work, or visit in West Marin.
- **Outcomes/Impact\*** Please describe up to two outcomes expected as a result of this activity or event. What will be different? How would the community benefit?
- **Diversity, Equity, Inclusion and Justice\*** Please set up a specific goal to advance Diversity, Equity, Inclusion and Justice in your proposed activity or event. Please describe how you plan to achieve it.
- **Primary Issue Area\*** Please select the category that most closely relates to the topic or issue area that would be strengthened by your activity or event (*options for this question are under development*).

- **Secondary Issue Area (Optional)** Please select a secondary category that most closely relates to the topic or issue area that would be strengthened by your activity or event (*options for this question are under development*).
- **Optional Documents** You can upload up to two documents that support your proposal (optional). This could be a flier for an event, a request from the community, for example.
- **Amount Requested\*** Please enter the amount your organization is requesting from West Marin Fund (Minimum amount: \$2,000; Maximum amount: \$4,000).
- **Overall Cost\*** Please enter the overall cost of your organization's proposed activities (this may be the same as or more than the amount your organization is requesting from West Marin Fund.)
- **Budget Worksheet\*** When completing your online application, you will be able to download a simplified Excel worksheet and fill in your budget details.
- **Main Contact\*** Who is the main contact for this proposal? Include full name, phone number, email, and role at organization.

## SECTION II: About your organization

- **Track Record\*** Briefly describe the history of your group or organization. How did you come together and how has your organization contributed to the improvement of the communities you work with?
- **Mission Statement\*** Briefly describe your group's mission or overall purpose.
- **Nonprofit Status\*** 501c3 / 501c4 / Using Fiscal Sponsor
- **Last Fiscal Year's Income\*** What was your group or organization's total income for your last completed fiscal year?
- **This Year's Projected Income\*** What is your group or organization's total projected income for your current fiscal year?
- **Percentage raised\*** What % of this fiscal year's budgeted income has been raised?
- **Organizational Budget\*** Please upload your organizational budget for the current fiscal year, including anticipated revenue and expenses.

### *If using Fiscal Sponsor:*

Please provide the following information about the Fiscal Sponsor for this proposal.

- **Name of Fiscal Sponsor (FS)\*** Please provide the full name of your fiscal sponsor and their acronym if they typically use one.
- **FS EIN\*** Please provide your fiscal sponsor's Employer Identification Number (EIN).
- **FS Letter of Agreement\*** Please upload a copy of your Letter of Agreement or Memorandum of Understanding with the fiscal sponsor.
- **FS Main Contact\*** Include full name, phone number, email, and role of the main contact for this proposal at the fiscal sponsor organization.