

Organizational Effectiveness Grants 2024

Submit a Proposal by April 30!

Online Application Portal Opens first week of April at westmarinfund.org

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 three sections: SECTION I: Summary, SECTION II: About your Organization, and SECTION III: Your Proposal.

SECTION I: Summary

- **Proposal Title*** Please assign a name to your proposal.
- **Proposal Summary*** Please summarize the purpose of your proposal and why this is needed.
- **Amount Requested*** Please enter the amount your organization is requesting from West Marin Fund (Minimum amount: \$5,000; Maximum amount: \$10,000).
- **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.)
- **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

a. Mission and Track Record

- Mission Statement* Briefly describe your organization's mission or overall purpose.
- Communities Served* Please describe the communities or population groups your organization serves. 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.

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- Track Record Serving Communities* Describe the challenge(s) affecting your community that your organization seeks to address, and how, in the face of the challenge(s), your organization has contributed to the improvement in well-being for individuals and/or families in your community.
- **Confirmation of Approach*** What gives you confidence that you are making progress or benefiting the communities you serve? Present information and examples that demonstrate your organization's track record benefiting the community.
- **Year Founded*** When did the organization start its activities?
- **Places Served*** Please select the places that your organization currently serves. Select all that apply.
- Primary Issue Area* Please select the category that most closely relates to your organization's main activities: (options for this question are under development).
- **Secondary Issue Area (Optional)** Please select the secondary category that most closely relates to your organization's main activities: *(options are under development).*

b. Your Team

- **Full-time Staff*** How many full-time staff does your organization currently have?
- **Part-time Staff*** How many part-time staff does your organization currently have?
- Full-time equivalent (FTE) Staff* How many Full-time equivalent (FTE) staff does your organization currently have (using a 40-hour work week)? Select one from the list: No paid staff / 1-5 FTE staff / 6-10 FTE / 10-20 FTE / Over 20 FTE / We do not calculate FTE staff
- **Consultants*** How many consultants did your organization contract in the past 12 months? If your organization did not contract any consultants, please enter 0.
- **Volunteers*** How many volunteers did your organization have in the past 12 months? If your organization does not have volunteers, please enter 0.
- **Volunteer hours*** How many hours did volunteers contribute to the organization in the past 12 months? If this does not apply, please enter 0.
- Organizational Leadership* Does your organization's leadership (e.g., staff leadership team, executive decision-making body) reflect the communities you serve in any of the following respects? Select all that apply:
 Age group/ Disability / Gender or Sexuality / Geography / Lived Experience / Race or Ethnicity / Socioeconomic Status / Other. Please describe: [TEXTBOX: 10 words] / I don't know / We do not collect this information / Not Applicable / None of these apply
- **Community Leadership*** Please expand upon the ways in which your organization's leadership (staff leadership team, executive decision-making body) reflects and represents the experiences and perspectives of the communities you serve.
- Changes in Leadership* Have there been any changes in board members or lead staff in the last six months? Yes / No
- **Changes in Leadership Details** If you answered yes to the question above, please briefly describe the changes.

c. Administrative information

All applicants must complete this section, including groups using a fiscal sponsor.

- Nonprofit Status* 501c3 / 501c4 / Using Fiscal Sponsor
- **Fiscal Year*** Please select the month your organization's fiscal year begins and ends.
- Last Fiscal Year's Income* What was your organization's total income for your last completed fiscal year?
- Last Fiscal Year's Expenses* What were your organization's total actual expenses for your last completed fiscal year?
- This Year's Projected Income* What is your organization's total projected income for your current fiscal year?
- **Percentage raised*** What % of this fiscal year's budgeted income has been raised?
- Additional Financial Info Is there additional information about your organization's financials that you would like to share? (optional)
- **Strategic Plan*** Does your organization have a written strategic plan? No / Yes, we developed it less than 5 years ago / Yes, we developed it more than 5 years ago
- **Fundraising Plan*** Does your organization have a written fundraising plan? No / Yes, we developed it less than 2 years ago / Yes, we developed it more than 2 years ago
- **Governance*** Please upload the List of current Board of Directors (or Officers/Steering Committee as appropriate) for your organization.
- **Organizational Budget*** Please upload your organizational budget for the current fiscal year, including anticipated revenue and expenses.
- **Additional Documents** You can upload up to three additional documents that support your proposal (optional).

d. Fiscal Sponsor (FS) Information

Only for organizations using a fiscal sponsor.

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

SECTION III: Your proposal

a. Goals and Activities

• **Organizational Challenges*** Briefly describe the challenges the organization is facing to better respond to the evolving priorities of the communities it serves.

- **Organizational Effectiveness Proposal*** Please describe the activities you propose to implement to increase your organization's ability to respond to those priorities.
- **Volunteer Contribution*** Will volunteers help realize your organization's proposed activities? If yes, what role will they play and approximately how many total hours will they contribute? If your organization does not plan to use volunteers, enter N/A.
- Areas to Improve* Please select the organizational areas that could be strengthened
 by this project. Select up to two:
 Leadership and Governance / Financial planning and management / Programmatic Planning and Service
 Delivery / Evaluation and Learning / Fundraising / Marketing and Communications / Human Resources
 and Operations / Diversity, Equity, and Inclusion
- **Outcomes*** Please describe up to three organizational outcomes expected as a result of this project. What will be different after the completion of activities?
- Potential Impact* How would the outcomes achieved translate into better serving the communities you work with? How would they benefit?
- **Diversity, Equity, Inclusion and Justice*** Please set up a specific goal to advance Diversity, Equity, Inclusion and Justice in your proposed activities. Please describe how you plan to achieve it.
- **Proposed Activities Lead*** Who will manage and lead your organization's proposed activities? Please provide names and responsibilities.
- **2024 Theme*** This year's theme for Organizational Effectiveness Grants is "ESTABLISHING A SOLID BASIS FOR EFFECTIVE COLLABORATION." Does your proposal seek to strengthen your organization's capacity around this theme? (not required to be considered for funding, but priority is given to those that do). Yes / No -> Please explain why.

b. Collaboration and Learning

- **Landscape*** How does your organization's work fit into broader efforts and add value to other organizations that are serving the same communities as your organization? Describe the role that your organization plays in this larger landscape.
- **Collaboration*** Will your organization actively collaborate with one or more organizations to realize the proposed goals and activities? Yes / No. If yes, please name the partners, briefly explain their roles and the contributions they will make.
- **Evaluation and Learning*** Please describe how your organization will gather information to assess the results and potential impact of your proposed activities.

c. Budget

Proposal Budget Worksheet* When completing your online application, you will
be able to download an Excel worksheet and fill in your budget details.