

Letter of Inquiry: Social Equity – Required Information for 2020

This document is provided for reference only. Please do not attempt to use this as an application or Letter of Inquiry, which must be submitted online at <http://morganfamilyfdn.egrant.net>.

The following information is required for submission of a Letter of Inquiry (LOI). [Bracketed items] are not required, but are requested/optional and may not be applicable for a particular request.

Organization Information

- Applicant organization's employer identification number (EIN)
- Legal name of organization
- [Other name, if different (DBA/Doing Business As or project name if applicant is serving as a fiscal sponsor)]
- Address Line 1
- [Address Line 2]
- City, State, Zip+4 (there is a look-up for +4 code within our online application system)
- Phone number
- [Fax number]
- [Web site]
- Name of top (paid) staff person
- Title
- Phone
- E-mail
- Is this organization an IRS 501(c)(3) public charity? Yes/No
- If not a 501(c)(3), is this organization a public agency/unit of government? Yes/No/Not Applicable
- Please give a 2-3 sentence summary of the organization's purpose

Proposal Information

- Grant/Project Title
- Name of contact person regarding this application
- Title
- Phone
- E-mail
- Please give a 2-3 sentence summary of the grant purpose
- Geographic area served classification (check all that apply): St. Cloud and/or MN Yellow Springs and/or OH Portland and/or OR Other (list) _____
- Briefly elaborate about the geographic area served
- Funds are being requested for (check all that apply): General operating support Start-up costs Capital Project/program support Technical assistance Advocacy Other (list) _____
- Request/project start date (MM/DD/YYYY)
- Request/project end date (MM/DD/YYYY)

Budget

- Dollar amount requested
- Total annual organization budget
- [For requests other than general operating support, what is the total project budget?]

Proposal Summary (narrative responses required)

- Please summarize the need/issue and inequity your project addresses.
- Briefly describe what your proposal will do to address the need/issue and reduce the inequity.
- Describe the people who will be impacted. Who are the target population? Approximately how many people will be served annually? What are the demographic characteristics related to the disparity, inequity, or marginalization that the project addresses?
- Briefly describe how the need and disparities for this marginalized population will be impacted if the project is successful.
- Who will be involved in development, implementation and evaluation of this project?
- Summarize the implementation plan for the project.
- Please provide more detail about when the project will begin and end if you receive this grant.
- Use and amount of funds requested, i.e., staff costs, consultant fees, materials, etc. Please list below and/or upload an expense budget with detail.
- Please provide three specific measurable outcomes for your proposal. Identify which outcomes connect specifically to the inequity your proposal addresses.
- Authorized by: By typing my name, title and date below, I certify that I am duly authorized to submit this letter of inquiry on behalf of the organization, and to the best of my knowledge the information contained herein is true, accurate and complete.
 - Name of top paid staff or board chair
 - Title
 - Date