



FUNDING PROCESS LETTER OF INTENT

The United Way of Siouxland Funding Process is a competitive grant process for non-profit organizations within the Siouxland community. United Way of Siouxland provides resources for programs of organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code of 1986, as amended (or corresponding section of any future federal tax code), or to organizations defined as charitable under Section 170(b)(1) of the Internal Revenue Code of 1986 and its Regulations as presently existing or as hereafter amended.

United Way of Siouxland is committed to investing time, expertise, and resources into program, services, and partnerships focused on Education and Healthy Behaviors.

Collaborative strategies are encouraged.

All applicants must align with at least one goal area. Applicants are strongly encouraged to apply if they offer programming in the priorities outlined, and those applicants will receive a scoring preference.

Programs the applicant feels align with an identified goal but lie outside of the priorities outlined are still encouraged to apply but should describe a specific priority they feel their program addresses and why it is relevant to the goal.

Entities who partner with United Way of Siouxland will be expected to measure how their work leads to one or more of the following goals:

1. Individuals access mental health and addiction resources.

PRIORITIES

- Improve access to affordable treatment and recovery resources through expanded hours and/or delivery methods, thereby increasing participation.
- Increase access and participation in prevention programming.

2. Adult learners become more employable and independent in their community.

PRIORITIES

- Increase adult literacy instruction and participation.
- Increase household income through career development opportunities and job training.

3. Individuals engage in behaviors that improve their health or safety.

PRIORITIES

- Promote healthy habits for adults and children to reduce obesity.
- Increase access to violence and trauma treatment and support services.

4. Families access quality childcare and early learning opportunities.

PRIORITIES

- Children are assessed ready for kindergarten.
- Increase safe, affordable, quality childcare slots. (Priority given to infant care and extended hours)

5. Youth demonstrate grade-appropriate school readiness academically, socially, and emotionally.

PRIORITIES

- Help students maintain or improve grade-level reading and math skills.
- Decrease barriers for children to participate in before and after school activities.
- Increase school attendance rates.

Under the Funding Process, a non-profit organization must submit a Letter of Intent (LOI) for the program in which they would be seeking grant dollars. The LOI would be the first step a non-profit organization must complete during the grant process. A completed LOI does not guarantee a program would advance further in the grant process.

A non-profit organization may apply for more than one program, but each program would require its own separate LOI. Each program must address at least one of the five (5) goals. A program may address multiple goals.

It is recommended United Way funding does not exceed 30% of the program budget. (Not Overall Organization Budget)

Anyone with questions regarding the Letter of Intent and the Funding Process may call United Way of Siouxland at (712) 255-3551.

DETERMINING PROGRAM ELGIBILITY FOR FUNDING PROCESS

(Non-Profit Organizations not meeting these criteria should not apply)

- Non-profit organizations must be located in and provide services to the residents of United Way of Siouxland service area, defined as a 40-mile radius around Sioux City, Iowa.
- Non-profit organizations must be well-established non-profit organizations that have been declared tax exempt by the Internal Revenue Service and have a 501(c)(3) or 170(b)(1) status and had that status affirmed within the past two years.
- Non-profit organizations must be in existence for at least three years.
- Must have identified outcomes and indicators to measure program success and be able to share the process used to collect information and monitor program impact that demonstrates dedication to continuous improvement.
- Non-profit organizations must have a volunteer board of directors composed of at least five (5) people, must have established bylaws, meet at least quarterly, and maintain minutes of all board meetings.
- Non-profit organizations must have an annual operating budget; demonstrate financial controls, including a financial control policy, and should be current on all IRS filings and payment of payroll taxes.
- Organizations must have an annual audit conducted by an independent certified public accountant. For organizations with less than \$500,000 in revenue, financial statements must be annually reviewed by an independent public accountant.
- Establish and maintain a counterterrorism policy. United Way of Siouxland and United Way Worldwide complies with the U.S. Patriot Act and all other counter terrorism laws. Affirmative action is taken to prevent technical, in-kind, or other resources from inadvertently being used for illegal acts and terrorist activities.
- Programs will self-select goal(s) they would like to address based on their ability to align with priorities outlined for each goal.
- Programs should be based on data and serve our community through evidence based programming that has clearly defined sources and curriculums.
- Non-profit organizations must be able to ensure the fidelity of their program.

THE FOLLOWING ARE NOT ELIGIBLE FOR FUNDING

1. Non-profit organizations for which previous grant compliance issues have not been addressed.
2. Applications requesting less than \$10,000.
3. Applications for programs requiring religious participation.
4. Applications for endowment, debt reduction, and event sponsorships.
5. Applications for funds to directly benefit a specific individual or family.
6. Projects that were completed prior to the grant application.
7. Private organizations whose sole purpose is to provide lobbying, environmental, religious, or fundraising activities.
8. Organizations not supportive of Diversity, Equity and Inclusion.
9. Non-profit organizations that do not comply with all applicable federal, state and local laws, rules and regulations; meet applicable state and local standards for licensing and certification within its specific discipline.
10. Non-profit organizations with programs or activities which are contrary to the goals, aspirations, and policies of United Way of Siouxland or which are incompatible with the mission of United Way of Siouxland, as determined by its Board of Directors.

By checking this box, I have read and agree to the guidelines for determining program eligibility under the United Way of Siouxland process

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Contact Information

2

Non-Profit Organization Background

3

Program

4

Agreement

5

Complete

Non-Profit Organization Contact Information*

Non-Profit Organization Name*

Physical Address*

Address*

City/Town*

State/Province*

- Select - 

ZIP/Postal Code*

Mailing Address*

Address*

City/Town*

State/Province*

- Select - 

ZIP/Postal Code*

Primary Contact*

Name*

Email*

Phone*

Executive Director*

Name*

Email*

Phone*

Board President*

Name*

Company*

Email*

Phone*

Address*

City/Town*

State/Province*

- Select - 

ZIP/Postal Code*

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Non-Profit Organization Information*

Non-Profit Organization's Website Address (If applicable)*

Number of years non-profit organization has been operating locally in Siouxland*

Mission Statement for Non-profit Organization*

Beginning Fiscal Reporting Period*

Ending Fiscal Reporting Period*

Number of full-time employees at non-profit organization for proposed funding year*

Number of part-time employees at non-profit organization for proposed funding year*

Designation Letter (501c3 or 170b)*

 No file chosen

[Upload requirements](#)

Proof organization is in good standing*

 No file chosen

If you are unsure of your organization's standing, contact your tax preparer for documentation.

[Upload requirements](#)

Organization Statement of Diversity, Equity and Inclusion*

 No file chosen

[Upload requirements](#)

Organization Profit/Loss Statement*

 4.86 KB

[Upload requirements](#)

Program Information*

(Note: United Way of Siouxland funds programs not overall organizations. All remaining questions pertain to specific program funding request, not overall organization.)

Program Name*

Number of years program has been operating*

Number of proposed clients to be served through program annually*

Age range of clients served through program*

Percent of clients served in the Siouxland area (Woodbury County, Plymouth County, Dakota County, NE, Union County, SD)* %

What United Way of Siouxland focus area does your program closely align? (Select One)*

Education

Healthy Behaviors

Which United Way of Siouxland's Goal(s) would the program address [?](#) *

- Individuals have access to mental health and addiction resources
- Adult learners become more employable and independent in the community
- Individuals engage in behaviors that improve their health or safety
- Families have access to quality childcare and early learning opportunities
- Youth demonstrate grade-appropriate school readiness academically, socially and emotionally

Priority(s) for Individuals have access to mental health and addiction resources

- Improve access to affordable treatment and recovery resources through expanded hours and/or delivery methods, thereby increasing participation
- Increase access and participation in prevention programming
- Other...

Enter other...

50 word(s) remaining

Priority(s) for Adult learners become more employable and independent in their community

- Increase adult literacy instruction and participation
- Increase household income through career development opportunities and job training
- Other...

Priority(s) for Individuals engage in behaviors that improve their health or safety

- Promote healthy habits for adults and children to reduce obesity
- Increase access to violence and trauma treatment and support services
- Other...

Priority(s) for Families have access to quality childcare and early learning opportunities

- Children are assessed ready for kindergarten
- Increase safe, affordable, quality childcare slots. (Priority given to infant care and extended hours)
- Other...

Priority(s) for Youth demonstrate grade-appropriate school readiness academically, socially, and emotionally

- Help students maintain or improve grade-level reading and math skills
- Decrease barriers for children to participate in before and after school activities
- Increase school attendance rates
- Other...

Provide a brief description of the program including primary activities/services that will be provided; connect description to goal(s) aligned*

50 word(s) remaining

Describe the need for the program based on local data; make sure connects to goals(s)*

200 word(s) remaining

Programs funded through United Way of Siouxland should be evidence based. Cite the source/curriculum for your program, and explain how your organization will ensure the fidelity of the program/curriculum. *

What tool will you use to measure this impact? How will you implement it? In what way does it determine that the impact has been achieved?*

400 word(s) remaining

Please provide us with past data that demonstrates the impact of your program. *

400 word(s) remaining

Describe your criteria and/or eligibility guidelines for individuals to take part in your program*

300 word(s) remaining

Proposed Total Program Budget for One Year* \$

PLEASE NOTE: This dollar figure is your PROPOSED TOTAL PROGRAM BUDGET. THIS IS NOT YOUR OVERALL ORGANIZATION BUDGET.

Dollar amount requested from United Way of Siouxland for Program* \$

Percent of program budget funded through United Way of Siouxland; It is recommended United Way funding does not exceed 30% of program budget*

 %

Describe how funds from United Way of Siouxland will be used to increase the success of the program*

350 word(s) remaining

If not fully funded will the program be implemented or continued?*

Terms of Agreement*

As the person completing the Letter of Intent (LOI) for my organization, I agree that the information provided in this LOI to United Way of Siouxland is accurate.

Name*

Signature*

Position*