Organization:       Date:

Contact Name:       Contact Title:

Address:       City:       State:    Zip Code:

Phone: (     )       Email:       Website:

Amount of Grant Request: $

Please complete all questions listed below. Answers should be provided in the space allotted. Cover letters are not part of the application, which should speak for itself. Please refer to the [Guidelines](https://fdnweb.org/dolier/guidelines/) to be sure your application is complete and complies with deadlines.

Conciseness is appreciated and will reflect positively on your application. Wherever possible use a maximum of 1/2 page per question, except as noted. When the answer to one question is included in another, please do not repeat the answer, but reference the other numbered question. Applications that are incomplete or that do not follow guidelines will not be considered*.*

1. Brief summary of the purpose for which funds are requested (maximum of two lines). You will be given space to elaborate later.
2. What is your organization’s mission?
3. How does your organization serve the Quaker values of Simplicity, Peace, Integrity, Community, Equality and/or Stewardship? What are your current connections to the community of Moorestown, if any?
4. Does your organization have a Conflict of Interest policy? Yes [ ]  No [ ]
5. Does your organization have an anti-racism policy? Yes [ ]  No [ ]
6. What are the demographic characteristics of the population(s) your organization serves? Include what portion, if any, of the recipients of your services are residents of the Township of Moorestown.
7. Where are your facilities located? If multi-site, please list all locations. If no facilities, please list where your organizational activities occur.
8. How does your organization plan to use Foundation grant funds? Please be specific and include a projected budget and planned expenditure timeline for the funds.

If your organization received funds from the D’Olier Foundation in the previous year, and plans to use the funds towards the same purpose as your prior year grant, use this answer to indicate why your organization needs ongoing funds for the previously funded purpose. Please explain if funds will be used to sustain, expand, or transition the previously funded project.

*Maximum of two pages for narrative, budget and timeline.*

1. What is the expected scope of the impact of the project/efforts for which Foundation grant funds will be used? If not covered previously, this information could include: What demographic groups will be impacted? Projected outcomes for this project.

*Specific data and measurable outcomes are helpful.*

1. What internal controls does your organization use to assure Foundation grant funds are used for the intended purpose?
2. If your organization or its umbrella organization does not have audited financial statements, does your organizations conduct internal audits? How often? What, if any, relationship do the auditor(s) have to the people handling money and accounts?
3. What other sources of funding have you obtained or are you pursuing in order to support this project/effort? If you are asking the D’Olier Foundation to provide more than 50% of the support for this project/effort, what are you doing to increase other fund sources?
4. What is the potential need for ongoing or additional Foundation grants to sustain your project/effort?
5. Does your organization provide in-kind compensation (other than de minimus) to any employees or board members? If so, please list the types of in-kind compensation provided. Examples include but are not limited to housing, vehicles, discounts on services, tuition, etc.

If anything is above, how often do you research outside information to evaluate such compensation?

1. Do any employees of your organization receive more than $200,000 in annual salary plus benefits? If so, how many? Names and titles of positions need not be included.
2. Please list the names of the members of your governing body.