

COVID-19 Prevention & Response Fund
Nonprofit Application for organizations with budgets less than \$2.5 million

Please answer the following questions below to determine if you are eligible to apply:

1. Do you serve one or more of the following communities? [Click here](#) for a complete list by zip code, neighborhood and county.

2. All applicants must serve one or more of the communities listed above. Your program must address one or more of these priority areas:
 - Education on COVID-19 prevention, vaccine effectiveness, hesitancy and resistance
 - Supporting those with barriers gaining access to vaccinations
 - Providing resources, services, and vaccine information to those communities experiencing financial, physical and mental health challenges due to or made worse by COVID-19
 - COVID-19 related outreach, educational, and event promotion campaigns that better inform and activate the community

3. Your program must serve one or more of the following populations:

Asian, Asian Americans and/or Pacific Islanders	Other People of Color
Black/ African American	People currently incarcerated
Elderly	People in other congregate living situations
Homeless	People struggling with addiction and/or with mental illness
Immigrant and refugees	People with disabilities
Hispanic/Latinx/Latino/Latina	People reentering the community
Low-income	Youth and young adults
Native/First Nation	

4. You must have a track record of community engagement and trust.

5. You must be willing to work with Philly Counts who will provide access to educational materials and trainings

Tip: Scroll over the small question mark (?) at the end of some questions to find out more information.

If you have questions about this application, please reach out to Shira Hodges at shira@philanthropynetwork.org. Thank you for applying!

Please upload a 501c3 for your organization

Please tell us your organization's operating budget for 2021

Organization Information

Legal name of business or nonprofit

Publicly used name if different from legal name

Street Address

City, State, Zip code

Phone number

Website/Instagram/Facebook/Twitter/TikTok (if you have any of these)

Please tell us your operating budget for 2021

This is the amount you have budgeted to spend during 2021

Please enter your nine-digit EIN

Please upload your 501c3.

Contact and Staff Information

Please share contact information for the individual who will be the primary contact for the project.

Primary Contact First Name

Last Name

Email Address

Phone number

Primary contact relationship to organization

- Staff
- Volunteer
- Board Member
- Leadership
- Other, please specify

Have you ever applied for a grant before?

This will not be used in our evaluation of our application.

How many staff do you have?

How many staff are people of color?

How many staff live in the communities where you serve?

Please tell us how your organizational leader identifies. Please check all that apply.

This is only for our internal learning. This will not be used in our evaluation of the grant

- Black/African American
- Caribbean
- Native/First Nation
- Middle Eastern
- Hispanic/Latinx/Latino/Latina
- Asian, Asian American and/or Pacific Islander
- White
- Prefer not to answer
- Other (please specify)

Proposed Project Information

Which funding priority most closely matches what you would like to do? (Check all that apply)

- Education on COVID-19 prevention, vaccine safety and effectiveness, hesitancy and resistance
- Supporting those with barriers gaining access to vaccinations
- Providing resources, services, and vaccine information to those communities experiencing financial, physical and mental health challenges due to or made worse by COVID-19
- COVID-19 related outreach, educational, and event promotion campaigns to better inform and activate the community

Funding amount requested. Grant can range from \$3,000 - \$25,000

Project start and end dates:

Please enter a start and end date, example May 1, 2021 – June 30, 2021

How many people do you expect to serve?

Please tell us the communities and counties you plan to serve with this grant. Please choose all that apply.

<u>Chester County</u> Coatesville Honey Brook Kennett Square Oxford	<u>Philadelphia County</u> Bustleton Carroll Park Cobbs Creek/Haddington East Falls East Oak Lane Eastwick East Kensington Elmwood East/West Poplar Frankford Germantown Grays Ferry Holmesburg Hunting Park Lawndale Logan Lower Pennypack	<u>(Philadelphia County continued)</u> Point Breeze Powelton/Mantua Mount Airy East Moyamensing/Stadium District North Central Normandy Village Olney Oxford Circle Kingsessing West Kensington West Parkside/Wynnefield Yorktown/Norris Square Rhawnhurst Richmond Somerton Strawberry Mansion Tacony
<u>Delaware County</u> Chester Darby Sharon Hill Upper Darby		
<u>Montgomery County</u> Norristown Pottstown Willow Grove Telford		

Other, please specify

Tell us briefly what you intend to do with the requested funding?

Please try and keep this to 500 words or less

What do you hope to achieve?

What do you hope would be the results of your efforts?

Who do you plan to serve with this grant? Please tell us a little about them.

We have three final asks of you:

1. When your grant project is completed (or prior to a future request for funding), we will supply you with a simple report form so you can briefly tell us what you accomplished with the grant.
2. We may also contact you to briefly talk about how it went, who was served, what you learned and anything else you wish to share.
3. Finally, we ask that you send us (either digital or print copies or both) sample photographs from your activities/events, materials created/distributed (printed and social media), and any press coverage your work generates, if applicable. This can be done on an ongoing basis or at the end of your work.

These three requests are to help all of us learn and grow together and we appreciate your support with this.