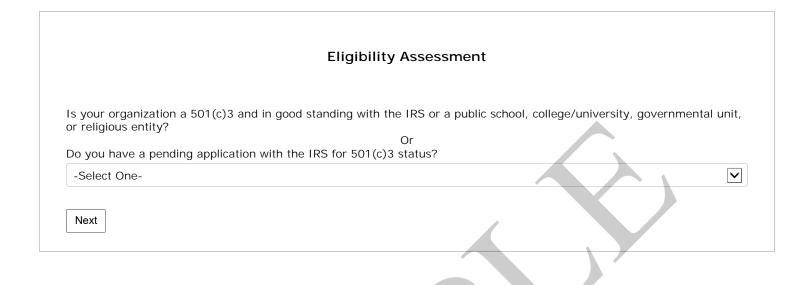
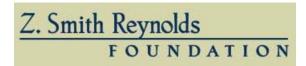
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#### **Eligibility Assessment**

#### COMMUNITY PROGRESS FUND

ZSR's Community Based Strategy includes two approaches—a Collaborative Problem-Solving (CPS) approach and a Community Progress Fund (Progress Fund). The Progress Fund is designed to provide an infusion of short-term funding at a pivotal moment and is intended to build on existing momentum to help move an issue, an idea or an organization forward. The range for Progress Fund grant awards is \$20,000-\$30,000 per year for one to two years.

ZSR asks that proposals demonstrate existing momentum within the community, and how, with an infusion of funds, an issue or an organization will move forward to test an idea or achieve greater impact. ZSR hopes that engaging with community members through the Progress Fund grant cycle will allow the Foundation to support communities and to better understand how different communities experience change, opportunity, and challenges in unique ways. Thus, the parameters for this approach are intentionally broad. In addition, ZSR desires to be accessible to areas of the state that have relatively higher needs and fewer resources, and to support and learn from those communities as described above. Consequently, preference will be given to those areas of the state. Our goal is to award a significant portion of grants to organizations that are run by and primarily serve people of color, therefore ZSR strongly encourages proposals from these organizations.

Selection criteria for the Progress Fund can be found here.

Please note that submitting a Letter of Intent (LOI) is the preliminary step in introducing a proposal to ZSR. Therefore, it is not necessary to contact a ZSR staff member prior to submitting an LOI. ZSR will review LOIs and approximately 40 to 50 applicants will continue through the application process, where ZSR staff will travel to applicants' communities and dedicate time to engaging with applicants and learning about their communities and the work they hope to accomplish with a Progress Fund grant.

I have read the above information.



Next

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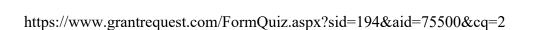
#### **Eligibility Assessment**

The deadline for the online Community Progress Fund Letter of Intent is December 3, 2019 at 12:00 pm (noon).

I agree to the submission deadline.

-Select One-

Next





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#### Eligibility Assessment

#### IMPORTANT INFORMATION BEFORE SUBMITTING YOUR LETTER OF INTENT

- Once you have submitted your Letter of Intent, you will receive an email confirmation from gloriap@zsr.org or mail@grantapplication.com indicating your Letter of Intent form was submitted.
  - a. When your online account is created for your organization, make sure that the email address is a valid email address without spam blockers or bulk mail or clutter filters. All Letter of Intent communications will be emailed to the email address that was used when the online account was created.
  - If your organization has an existing ZSR account and the original email address has changed or if you are unsure about the email address used, contact the Foundation at the number provided below.
  - c. If you do not receive an email confirmation of submission, check your clutter folder, spam mail or junk mail. If the email is not there, you may not have selected the Submit button. Log back into your account and look in the pending applications. If the Letter of Intent form has not been submitted, open and resubmit it.
  - Add gloriap@zsr.org or mail@grantapplication.com to your email contacts.
- The online system is not compatible with the following Browsers: <u>Google Chrome or Microsoft Edge.</u> If used, problems may arise with submission.
- Save your work frequently by clicking the Save and Finish Later button
  found at the bottom of each page. Please note that saving your Letter of
  Intent form will also trigger an automated email reminder that will
  include the steps to access the saved form. You may need to close your
  internet browser completely before logging back into your account. If
  you don't close, you may be directed to begin a new form.
- Please do not use the back button on your browser; click the tabs across
  the top of the page of the form to return to a particular section.
- Upon reviewing your Letter of Intent form, if red errors display, please correct the information, then click on the Update button at the bottom of the page. When all errors are resolved, and the Update button has been selected; you can submit your Letter of Intent form. All questions and required information must be completed and uploaded. If you would like to provide any additional information other than what is required in the form, contact the Foundation.
- Please do not use bullet points, tabs, or other symbols or special characters (e.g., #, (), ", >, <, \*). Our online system does not recognize them. Also, bold and underlined text formatting options will not be displayed within your answers.
- Anywhere the blue info-bubble is displayed; there is help text. Please take time to read the information that pertains to that question or selection
- <u>Do not submit any information to documents@zsr.org (unless directed by Foundation staff).</u>
- IMPORTANT: For uploading documents as attachments within the Letter of Intent form – The recommended format for documents is PDF. However, we will accept Excel and Word documents.

For informational purposes, print these instructions for reference. If other questions arise while working on this form, visit our website at www.zsr.org. If you cannot find the answer to your questions, call us at (800) 443-8319 or (336) 725-7541.

I have read and understand the above information.

-Select One-

Submit

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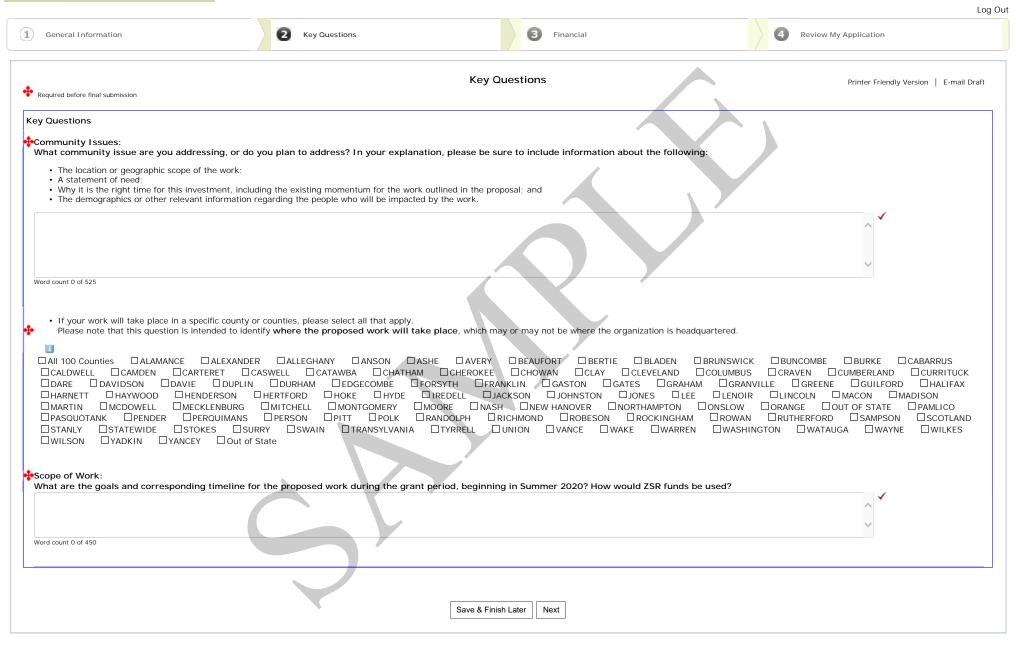
General Information Key Questions Financial Review My Application **General Information** Printer Friendly Version | E-mail Draft Required before final submission General - Organizational Information Name of Organization Exactly as it appears on your federal tax-exemption certification under Section 501(c)(3) of the IRS Code. Federal Tax ID Number State Listed on IRS Letter Format: 99-999999 Select One -Organization's Office Mailing Address City Zip Code Select One - 🗸 County in which your organization's primary headquarters is located. (If your primary headquarters is not located in North Carolina, select "Outside North Carolina").  $\checkmark$ - Select One -Telephone Fax Website Format: 999-999-9999 Format: 999-999-9999 Please upload your organization's 501(c)(3) IRS designation letter (Tax Exempt Certification). Tax Exempt Certification Browse.. Upload Is the 501(c)(3) organization completing this application acting as a fiscal sponsor for another organization that is not classified as a 501(c)(3) public charity? ♣YES/NO None 🗸 1. If you answered No above, no further action is needed. 2. If you answered Yes above: a) Please upload (in the box provided below) the written fiscal agreement between the Applicant Organization and the Sponsored Organization. b) Read the Fiscal Sponsor Letter. After reviewing the document, please acknowledge that you have reviewed the letter by selecting from the drop-down list. Fiscal Sponsorship Agreement

Browse	
Upload	
Lacknowledge Lhave reviewed the Fired Spancarchia Letter	
I acknowledge I have reviewed the Fiscal Sponsorship Letter.	
None 🗹	
♣Project Title	
Please enter a brief project title for your Letter of Intent.	
^ <b>✓</b>	
×	
Word count 0 of 25	
General Information - Organization's Primary Contact	
Provide information for the chief executive of the organization (aka executive director).	
**If you are applying on behalf of a <u>college or university</u> , please provide the following as the Organization LIST THE CFO, PRESIDENT, OR CHANCELLOR OF THE SCHOOL.)	Primary Contact: "Leader or Head" of the Center/Department/Institute requesting funds. (DO NOT
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Prefix First Name Middle Name	Last Name Suffix
THEIR MINIOR NAME	Sumx
Title []	
	ate Zip Code
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V	
Office Phone Extension Cell Phone Office Fax E-mail Format: 999-999-9999 Format: 999-999-9999	
Format: 999-999-9999 Format: 999-999-9999 Format: 999-999-9999	
Ethnicity Gender	
- Select One Select One -	
General Information - Letter of Intent Contact	
PRIMARY CONTACT FOR THIS REQUEST: Please provide the following information for the person to whom	all communication regarding this letter of intent should be directed.
**If you are submitting on behalf of a <u>college or university</u> , as the request's primary contact, please provided of providing the provided of the providing that the providing the providing that the providing the providing that the providing the providing that the providing the providing that the providing that the providing the providing that the providing the providing the providing the providing that the providing the providing the providing the providing the providing that the providing	te the person who is most knowledgeable about the letter of intent. (DO NOT LIST THE DEVELOPMENT
Prefix First Name Middle Name	Last Name Suffix
Title	
Primary Contact's Office Mailing Address	

$\hat{\downarrow}$
City State Zip Code  - Select One -
Office Phone Cell Phone Format: 999-999-9999 Format: 999-999-9999 Format: 999-999-9999
General Information - Staff Composition
For each of the boxes below, please enter a whole number between 0 and 9,999. Do not use decimals. Put 0 if not applicable.
Part time staff  Full time staff  Total Full and Part Time Staff  0.00   0.00
Gender
Males on Staff  Females on Staff  Other  Total Staff Gender  O
Race/Ethnicity
**White/Caucasian (Non Latinx/Hispanic) **Black/African American (Non Latinx/Hispanic) **Latinx/Hispanic **American Indian or Alaska Native **Asian/Asian American **Multi-Racial
Staff Other Total Staff Ethnicity  0
If your organization has executive-level staff (with decision-making authority), including and in addition to the executive director, please indicate the demographic information of that team below, if applicable.
Number of staff on Executive-Leadership team (including executive director):
Full Time Executive Leadership Staff  Part Time Executive Leadership Staff  Total Executive Leadership Staff  O   ##Part Time Executive Leadership Staff
Race/Ethnicity - What is the race/ethnicity make up of the Executive-Leadership team?
*White/Caucasian Executive Leadership (Non Latinx/Hispanic)  *Delta Latinx/Hispanic Executive Leadership (Non Latinx/Hispanic)  *Delta Latinx/Hispanic Executive Leadership (Non Latinx/Hispanic)
American Executive Leadership  American Indian or Alaska Native Executive Leadership  Multi-Racial Executive Leadership
*Other Executive Leadership  Total Race/Ethnicity Executive Leadership  0
Gender - What is the gender make up of the Executive-Leadership team?

Males on Executive-Level Staff  Females on Executive-Level Staff  Otal Gender-Executive-Leadership Staff  U  I o i i i i i i i i i i i i i i i i i i	
eneral Information - Board Composition	
For each of the boxes below, please enter a <u>whole number</u> between 0 and 9,999. Do not use decimals. Put 0 if not applicable.	
Gender - What is the gender make up of your board?	
Males on Board  Females on Board  Other  Total Board Gender  0	
Race/Ethnicity - What is the race/ethnicity make up of your board?	
White/Caucasian (Non Latinx/Hispanic)	<b>∳</b> Multi-Racial
*Other	
Total Board Ethnicity	
What is the demographic composition of the geographic area in which the work for which you seek funds will be performed? (If the work is happening in more than one city numbers.) (Note: As a source, ZSR recommends U.S. Census Quickfacts).  Please enter the percentage as a numerical value (Whole numbers only between 0 to 100) of each race or ethnic group listed below so that the total equals 100 percent. Mannot use decimals. Put 0 if not applicable.	
White/Caucasian (Non Latinx/Hispanic) **Black/African American (Non Latinx/Hispanic) **American Indian or Alaska Native **Asian/Asian American	<b>∳</b> Multi-Racial
Other Race/Ethnicity  Total:  Must total to 100 0%	
eneral Information - Mission Statement and Brief Description	
What is the mission statement of your organization?	
Word count 0 of 100	
Please provide a brief description of the project.	<b>■</b>
	^ ~
Word count 0 of 125	
Save & Finish Later Next	





Log Out

