

Jewish Women's Foundation of NJ (JWF-NJ) Large Grant - FY26

Jewish Community Foundation of Greater MetroWest New Jersey, Inc.

ACKNOWLEDGMENT OF JWF-NJ GRANT PARAMETERS

Reusing entries from LOI*

This grant application is open by invitation only. Many of the questions are the same ones that you answered in the LOI and the responses will appear automatically in Foundant. *Feel free to leave as written if there have been no changes to your project and JWF-NJ has not asked you to clarify any of your prior responses.* New questions begin with the word "(NEW)" written in green font.

Choices

I acknowledge this information.

Visit*

(NEW) An in-person site visit or a virtual visit is required for all organizations advancing to the final round of consideration and will be arranged at a mutually convenient time. This will last about an hour and a quarter and involve a small group (8-10) of Trustees.

Choices

I acknowledge this information.

ORGANIZATION and PROJECT INFORMATION

PROJECT NAME*

Character Limit: 250

FULL NAME OF ORGANIZATION*

Character Limit: 150

Name of Executive Director/CEO*

Character Limit: 100

ED/CEO contact phone*

Character Limit: 20

ED/CEO email address*

Character Limit: 100

Name of project contact person*

Character Limit: 100

Professional title of project contact*

Character Limit: 100

Project contact phone*

Character Limit: 20

Project contact email address*

Character Limit: 100

ABOUT THE ORGANIZATION

WEBSITE*

Character Limit: 2000

MISSION*

(NEW) Please provide the official mission statement of your organization.

Character Limit: 500

DESCRIPTION OF ORGANIZATION*

Briefly describe the work of your organization. What core services does it provide? Whom does it serve? In which geographic area does it operate?

Note: This response may be used in an executive summary so it should be carefully worded.

Character Limit: 500

DESCRIPTION OF ORGANIZATION - HISTORY*

(NEW) Provide a brief history of your organization.

Character Limit: 750

PROGRAMS FOR WOMEN AND GIRLS*

Briefly describe any programming your organization provides to benefit women, girls and/or women with their children. Please highlight relevant achievements related to work with women and/or girls.

Character Limit: 750

FINANCES*

Organization's Annual Budget

Character Limit: 20

ORGANIZATION'S FUNDING SOURCE 1*

(NEW) Percentage federal funding

Character Limit: 20

ORGANIZATION'S FUNDING SOURCE 2*

(NEW) Percentage state/local funding

Character Limit: 20

ORGANIZATION'S FUNDING SOURCE 3*

(NEW) Percentage private funding

Character Limit: 20

ORGANIZATION'S FUNDING SOURCE 4*

(NEW) Percentage derived from fees

Character Limit: 20

COMMENTS ON FUNDING SOURCES

(NEW) If you anticipate that *government* funding for your organization may change significantly in the near future, please elaborate here.

Character Limit: 750

PRIOR GRANT*

Has your organization received funding from JWF-NJ in the past five years?

Choices

Yes

No

PRIOR GRANT (cont.)

If you answered "Yes" above, please note the project name/s and grant amount received.

Character Limit: 500

AUDITED FINANCIAL STATEMENT*

Does your organization produce an audited financial statement?

Choices

Yes

No

WOMEN IN LEADERSHIP*

Total Number of Board Members (Note: Board members must serve in a volunteer capacity.)

Character Limit: 20

WOMEN IN LEADERSHIP (cont.)*

Total Number of Women on Board of Directors

Character Limit: 20

PROJECT DETAILS

PROJECT BACKGROUND*

Is this a new or existing project?

Choices

New

Existing

STATEMENT OF NEED*

Describe the problem or opportunity that the project will address. You may include relevant national or local data if readily available.

Note: This response may be used in an executive summary so it should be carefully worded.

Character Limit: 750

PROJECT SUMMARY*

Provide a capsule summary of the project. Indicate how the project will serve women, girls and/or women with their children exclusively.

Note: This response may be used in an executive summary so it should be carefully worded.

Character Limit: 1000

NUMBER SERVED*

Number of women, girls or women with their children you anticipate will be served by this project.

Character Limit: 200

PARTICIPANTS*

If relevant to the project, how do you plan to identify and enroll participants?

Character Limit: 750

ANTICIPATED START DATE (must be after July 1)*

Character Limit: 10

ANTICIPATED END DATE (must be before June 30, except for summer-only project)*

NOTE that JWF-NJ's fiscal year runs from July 1 - June 30.

Character Limit: 10

VISION FOR SUCCESS*

What is the potential impact of your project? Share how the lives of those you serve will improve.

Note: This response may be used in an executive summary so it should be carefully worded.

Character Limit: 500

PROVIDE 2-3 MEASURABLE OBJECTIVES. Note that JWF-NJ does not fund internal evaluations of projects.*

Define *measurable* OBJECTIVE #1. Please include statistical or percentage data (e.g., increase in number of clients in attendance by #, X% improvement on assessment scale for # clients, etc.)

Character Limit: 250

OBJECTIVE #1 continued (part 2)*

What are 2-3 key strategies for reaching OBJECTIVE #1? As appropriate, please include specific data on projected number of clients to be served at activities, number of services/activities planned, etc.

Character Limit: 500

OBJECTIVE #1 continued (part 3)*

How will you measure success for OBJECTIVE #1?

Character Limit: 500

OBJECTIVE #2 (part 1)*

Define measurable OBJECTIVE #2.

Character Limit: 250

OBJECTIVE #2 (part 2)*

What are 2-3 key strategies for reaching OBJECTIVE #2?

Character Limit: 500

OBJECTIVE #2 (part 3)*

How will you measure success for OBJECTIVE #2?

Character Limit: 500

(OPTIONAL) OBJECTIVE #3 (part 1)

(Optional) Define measurable OBJECTIVE #3.

Character Limit: 250

(OPTIONAL) OBJECTIVE #3 (part 2)

(Optional) What are 2-3 key strategies for reaching OBJECTIVE #3?

Character Limit: 500

(OPTIONAL) OBJECTIVE #3 (part 3)

(Optional) How will you measure success for OBJECTIVE #3?

Character Limit: 500

ALIGNMENT WITH JWF-NJ*

Articulate how the project's goals align with JWF-NJ's priorities.

Character Limit: 500

PARTNERS

If you intend to collaborate with partner organizations, please tell us more.

Character Limit: 750

TIMELINE*

(NEW) Provide a complete timeline for your project with key milestones. Feel free to use bullet points rather than a narrative. NOTE that JWF-NJ's fiscal year runs from July 1 - June 30.

Character Limit: 2500

STAFF*

(NEW) Please list and briefly describe the roles and relevant background of key staff members who will be involved in this project.

Character Limit: 1500

(REQUIRED) BUDGET - EXPENSE TABLE

(NEW) THIS IS A REQUIRED SECTION. Please delineate the project expenses in this table. Use the last column to define the line item or break down the expense in fewer than 100 characters (e.g., P/T coordinator - 1/2 FTE @ \$50,000 = \$25,000, 10 iPads @ \$500 each = \$5,000, etc.). NOTE: JWF-NJ does NOT cover evaluation costs or participant stipends.

CATEGORY	TOTAL PROJECT COSTS	AMOUNTS REQUESTED FROM JWF-NJ	BRIEF DESCRIPTION (100 CHARACTERS MAXIMUM)
Salaries & fringe benefits			
Consultants			
Travel			
Supplies / Equipment			

Marketing			
Evaluation			
Participant stipends			
Other #1			
Other #2			
TOTAL			

(REQUIRED) BUDGET - REVENUE TABLE

(NEW) THIS IS A REQUIRED SECTION. Please delineate the project revenue in this table. Use the second-to-last column only as needed to define the line item or provide details (in fewer than 100 characters).

CATEGORY	AMOUNT	BRIEF DESCRIPTION (100 CHARACTERS MAXIMUM)	STATUS (Secured or Anticipated)
Other grant			
Other grant			
Other grant			
Other grant			

Reimbursement for program services			
Organization resources / In-kind support			
Other			
Other			
JWF-NJ grant request			
TOTAL REVENUE (including JWF-NJ grant)			

SUSTAINABILITY

(NEW) If this is a new project, what is your vision for the future? How might you secure funding to continue the project?

Character Limit: 750

PUBLICITY*

Please describe your plans to publicize the progress of your project within your communities and, if appropriate, within the related field of practice.

Character Limit: 500

SOCIAL MEDIA

If you have a presence on social media, please tell us more.

Character Limit: 250

ATTACHMENTS

Eligibility requirements signature form*

Please [click here](#) to download a signatures form.

File Size Limit: 2 MB

Directors*

(NEW) Please attach a **list of your board of directors** or a copy of your letterhead containing this information.

File Size Limit: 2 MB

Letter of support*

(NEW) Provide a **letter of support** from an organization that is a partner, advisor or collaborator with your organization.

File Size Limit: 2 MB

Additional letter of support (OPTIONAL)

(NEW, OPTIONAL) Provide an additional **letter of support** from an organization that is a partner, advisor or collaborator with your organization.

File Size Limit: 2 MB

Resume (as needed)

(NEW) If funding is being used to pay for a key staff position or consultant, please attach a **resume** for that individual.

File Size Limit: 2 MB

Supplementary item (OPTIONAL)

(NEW, OPTIONAL) Upload one **supplementary item** to tell us more about your organization, e.g., annual report.

File Size Limit: 11 MB

FINANCIAL REPORTING

Recent financial reports*

(NEW) Please send the following document/s to the JWF-NJ Director as pdfs:

The organization's most recent **Audited Financial Statement**

OR

The organization's **Financial Reports of the PAST TWO YEARS**

(NEW) I acknowledge that I have sent these documents via email to pgreenwood@jfedgmw.org

Choices

Yes

SIGNATURE

Signature*

By entering data into the next 3 fields calling for insertion of your Name, Title, and Date, you are: (1) representing that you are an officer or other agent for the applicant organization, duly authorized to enter into legally binding submissions and agreements on behalf of the applicant organization, (2) agreeing to submit this grant application in an electronic form on behalf of the applicant organization which shall be bound by its contents as an electronic transaction, and (3) agreeing that your insertion of data into these following fields constitutes an electronic signature.

Name

Character Limit: 100

Title*

Character Limit: 100

Date*

Character Limit: 10