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| hthh_Logo_FINAL_color | High-Tech High Heels  Grant Application |

# Fall grant cycle: Application due by October 1 Awards announced by November 30

# Winter grant cycle: Application due by December 15 Awards announced by February 28

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# For inquiries or to submit applications, please email [grants@hightechhighheels.org](mailto:grants@hightechhighheels.org)

## Grant Request Summary

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| Program/Project Title: | Click here to enter text. | Amount requested: | $ Click here to enter text. |
| Organization Name: | Click here to enter text. | Total Program/Project Budget: | $ Click here to enter text. |
| How long has your organization been delivering this program/project? | Click here to enter text. | Submission Date: | Click here to enter a date. |

## Organization Information

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Address: | Click here to enter text. | | | | | | | |
| City: | Click here to enter text. | | | State: | Click here to enter text. | Zip Code: | | Click here to enter text. |
| Telephone: | Click here to enter text. | | | Fax: | Click here to enter text. | | | |
| Executive Director: | Click here to enter text. | | | Telephone: | Click here to enter text. | Email: | Click here to enter text. | |
| Name and Title of Contact Person: | Click here to enter text. | | | Telephone: | Click here to enter text. | Email: | Click here to enter text. | |
| Total organization budget for current fiscal year: | | | | $ Click here to enter text. | | | | |
| Date of incorporation: | | | | Click here to enter text. | | | | |
| Organization’s Employer Identification Number (EIN) | | | | Click here to enter text. | | | | |
| Staff composition in numbers: | | Paid full-time | | Click here to enter text. | | | | |
|  | | | Paid part-time | Click here to enter text. | | | | |
|  | | Volunteers | | Click here to enter text. | | | | |
|  | | Interns | | Click here to enter text. | | | | |
|  | | Consultants/contractors | | Click here to enter text. | | | | |
|  | | Total | | Click here to enter text. | | | | |

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| Summarize the organization’s mission: | Click here to enter text. |
| Describe current programs and activities run by the organization (please emphasize major achievements of the past two years): | Click here to enter text. |
| Geographic area served by the organization: | Click here to enter text. |

## Program/Project Overview

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| Summarize the purpose of this grant request: | Click here to enter text. |
| How does this program or project prepare girls for college study in STEM (Science, Technology, Engineering, Math) majors? | Click here to enter text. |
| Describe how the funding requested from High-Tech High Heels will be used. If applicable, please include implementation timeline with major events, activities and when they will take place (Bullet point and chronological order): | Click here to enter text. |
| What is the geographic area to be served by this grant? | Click here to enter text. |
| Are you partnering with any other organizations to impact the same population? Are any of the partners also requesting funds from HTHH? Describe any other partnerships. | Click here to enter text. |

Type of Funding (check all that apply):

Seed/Pilot funding: start-up funding/creating a new program

Project/Program support: a specific existing project/program within your organization

Capacity Building: creating more, higher quality and/or more sustainable services (expansion, resource development, etc.)

Capital: small capital (equipment, re-usable supplies, technology, etc.)

General Operating support: day-to-day costs of running your organization (office space, staff salaries, marketing materials, etc.)

Other: Click here to enter text.

## Budget

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| --- | --- |
| Include or attach program/project budget with general categories broken out: ([See Appendix A for example](#_Appendix_A_-)) | Click here to enter text. |
| Time frame when funds will be used: | Click here to enter text. |
| List grants received from High-Tech High Heels in the past two years: | Click here to enter text. |
| List other funding sources for this project, including the dollar amount from each source: | Click here to enter text. |
| Please describe your plans to support the proposed project after the term of this grant and/or if you do not receive this grant? | Click here to enter text. |

## Outcomes

**Goals, Baseline and Target Numbers**

Please provide your top three goals for this specific program/project request.

[See Appendix B for definitions and examples](#_Appendix_B_-).

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| --- | --- | --- |
| Goals | Baseline # | Target # |
| 1. Click here to enter text. | Click here to enter text. | Click here to enter text. |
| 2. Click here to enter text. | Click here to enter text. | Click here to enter text. |
| 3. Click here to enter text. | Click here to enter text. | Click here to enter text. |

**Measuring Effectiveness**

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| Estimated number of unduplicated girls to be served by this request: | Click here to enter text. |
| What age group or grade level is being served? Provide a percentage. | Click here to enter text. |

Explain how you plan to measure the success of this program. What metrics will you collect, what tools will you use, will you collect longitudinal data? Please explain what data will be collected and methodology that will be used (surveys, test scores, media attention, awards, longitudinal studies, etc.). Can include attachments.

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| Click here to enter text. |

What results have been delivered by this program or project in the last two years? Explain how this program is proven to be effective. If this proposal is for a new program, do you have data to show that this type of program is effective?

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| Click here to enter text. |

If applicable, what are your plans for expansion?

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| Click here to enter text. |

Please list (in descending order of importance) the 3 most significant challenges facing your organization in the coming year

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| 1. Click here to enter text. 2. Click here to enter text. 3. Click here to enter text. |

**Final report on program will be due within 60 days of completion of the project**

## Required Attachments

Please attach the following documents to the grant request:

Please provide Proof of Insurance for:

Directors and officers

General liability

Workman's comp

A copy of your 501(C)(3) IRS determination letter

Most recent Form 990 or Form 990-EZ

Current year-to-date balance sheet and financial statement from prior 2 years

Project Budget (if applicable)

## Appendix A - Sample Budget

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| **HTHH Example Budget**  August 15, 2017 – May 31, 2018 *This is an example program budget with general categories broken out as separate line items.* | |
| **Expenses** |  |
| Program Director | $\_\_\_\_ |
| Housing | $\_\_\_\_ |
| Volunteer & Staff Training | $\_\_\_\_ |
| Transportation | $\_\_\_\_ |
| Meals | $\_\_\_\_ |
| Supplies | $\_\_\_\_ |
| Technology Upgrade | $\_\_\_\_ |
| **Total Expenses** | $\_\_\_\_ |
|  |  |

## Appendix B - Guidelines for Goals\*

**Goals** - Measurable statements of activities proposed in the grant request. When appropriate, please include a date for the goal to be accomplished when writing your goals. In most cases, baseline data (i.e., the current or starting level) should also be included. Exceptions include, but are not limited to, starting a new program.

**Goals can be listed as:**

1. **Outputs**: Direct products of the activities proposed - usually measured in terms of volume of work accomplished – for example, number of people served
2. **Outcomes**: Benefits or changes to individuals, families, communities, etc. resulting from program participation – for example, improvement in test scores compared to students that did not participate.

**Examples:**

Goals without baseline data:

1. To complete construction of the new facility by 12/31/2018.
2. To serve 500 students in 2017.
3. To purchase 6 robotics supply kits for 2017 camps.

Goals with baseline data:

1. Increase the amount of summer robotics camps offered from 4 to 6 by 12/31/17
2. Improve AP physics scores of participants compared to peers by 10% by 12/31/18.
3. Increase the number of girls in afterschool program from 30 to 60 by 12/31/17.

*\*Based on the Communities Foundation of Texas DFW Common Grant Application*

[*http://www.cftexas.org/nonprofit-resources*](http://www.cftexas.org/nonprofit-resources)