

Guidelines for Sapphire Fund Grant Applications

This document describes the purpose of Sapphire Fund's grant making program, eligibility criteria, and the procedures to follow in submitting your proposal. Please review these guidelines carefully and submit your proposal in the requested format. The deadline for application to be selected as a 2006 Sapphire Fund beneficiary is July 30, 2005. Your proposal **must** be received at the Sapphire Fund office no later than 5:00 PM EST on that day in order to be considered. Applications for project-based grants are accepted on a rolling basis and will be considered as funds are available.

The Grant Program

Sapphire Fund provides funding and resources to strengthen organizations whose work has a positive impact on the GLBT community and those affected by HIV/AIDS.

We fund the following types of organizations:

- Groups that promote understanding and a positive self image among the diverse cultural and ethnic elements of the local GLBT community
- Community arts groups—fine arts, theatre, music, dance, art therapy & education
- Women's/lesbian groups
- HIV/AIDS organizations—treatment, education, research, prevention, support services
- GLBT health—may include HIV/AIDS but not necessarily

We give priority to organizations that address both of our primary focuses—GLBT and HIV/AIDS.

The Grant Application Process

Sapphire Fund invites proposals, under an annual competitive Request for Proposal (RFP) process, and awards grants to strengthen the capacity of local GLBT and HIV/AIDS organizations.

We support organizations directly benefiting the GLBT community in Philadelphia and the surrounding region. We do not make grants to individuals or government agencies, or for capital building projects, lobbying or religious purposes.

Applicant organizations must meet the following criteria:

- Nonprofit corporation with proof of 501(c)(3) tax-exempt status
- Strong board involvement and competent leadership
- Proven track record of relationships fostered with other organizations and constituencies in the community

You may submit your application via email to info@sapphirefund.org or as a hard copy mailed to:

Sapphire Fund
1315 Spruce Street
Philadelphia, PA 19107

The Grant Review Process

Please complete the attached application in full, including all requested attachments. We will contact you if we have questions or require additional information. We will acknowledge your application within two weeks of its receipt. If we are interested in selecting your organization as a beneficiary, we will contact you to discuss your application within one month and may request interviews with key personnel as well as a tour of your facility before making our final decision. Beneficiaries will be announced by September 15, 2005.

Your application should include a cover letter, on your stationery, signed by your director. You may also include letters of support or endorsements (maximum of two). A strategic plan, annual report or other supporting documentation may be included to help us better understand your organization's mission, structure and need. Application materials will become property of Sapphire Fund and will not be returned.

Questions

Please direct any questions about the grant process or the application itself to Shannon Cross at 267-514-2088 or info@sapphirefund.org.

Application for Sapphire Fund Grant

Legal IRS name of organization Executive director

Address City State Zip

Phone Fax

Email Web site

Year founded Date incorporated

Federal tax ID PA charitable registration #

Briefly describe your organization's mission _____

Primary geographic area served _____

Current operating budget \$ _____

Current major funding sources (source/amount)

Key staff
Name _____ Position _____

Name _____ Position _____

Name _____ Position _____

Name _____ Position _____

Board leadership: President _____
Vice President _____
Treasurer _____

Are you willing to sign a partner agreement with Sapphire Fund? The agreement will include cross-promotional opportunities to help both organizations maximize the potential of our partnership.

___ Yes ___ No

Composition of Organization & Constituency

	Board	Staff	Volunteers	Constituents
Total number of	_____	_____	_____	_____
Male	_____ %	_____ %	_____ %	_____ %
Female	_____ %	_____ %	_____ %	_____ %
Total	100%	100%	100%	100%
LGBT	_____ %	_____ %	_____ %	_____ %
African American	_____ %	_____ %	_____ %	_____ %
Asian American	_____ %	_____ %	_____ %	_____ %
Latino	_____ %	_____ %	_____ %	_____ %
White	_____ %	_____ %	_____ %	_____ %
Other	_____ %	_____ %	_____ %	_____ %
Total	100%	100%	100%	100%
Youth (<18)	_____ %	_____ %	_____ %	_____ %
Senior citizens (65+)	_____ %	_____ %	_____ %	_____ %

Certification

To the best of my knowledge and belief, statements in this application and attachments are true and correct; the document has been duly authorized by the governing body of the applicant; and the applicant organization will comply with applicable laws, regulations, terms and conditions in effect at the time of the award. I understand that Sapphire Fund, in evaluating this grant application, may, if it deems appropriate, review any and all information submitted as part of this request with advisors of the Fund's choosing.

Signature of Executive Director or Board Chair/President

Date

Print Name of Signer

Print Name of Organization
