



**Page 8 - Client Success Story** (Corresponding Value: Program Results)

Give a detailed account of a particular success story that will provide volunteers with a clear picture of how the program has helped to improve someone's life. (This narrative may also be used in United Way communications.) You should describe the challenge(s) faced by the client, what intervention was required and subsequently provided, how long it took to achieve this level of success, and how the client is doing now. **Please DO NOT use client names.** Stay within the one-page maximum allowance.

**Page 9 - Additional Attachments to Include**

ONLY ONE SET OF ATTACHMENTS IS REQUIRED PER AGENCY: DO NOT SUBMIT MULTIPLE COPIES OF THE ATTACHMENTS.

**USA PATRIOT Act / Counterterrorism Compliance Form:**

This form is required by United Way of America

**CURRENT BOARD ROSTER:**

This list provides volunteers with information about the agency's current volunteer leadership.

**Audit, 990 or Financial Statements:**

United Way's fundraising and leadership enable us to study community needs and lead community efforts to bring about meaningful, lasting impact. Inherent in this accountability to our donors is the assurance that, in order to continue to deliver needed services, agencies in which we invest must be fiscally sound and managerially effective. It is to that end that these attachments are requested. Please follow the guidelines proved on Page 1 on submission of 4a, 4b or 4c.

This completes the instruction booklet for the Request for Investment application.

ALL APPLICATIONS MUST BE RECEIVED ON OR BEFORE 1/31  
P.O. Box 270  
Watkins Glen, New York 14891



# Request for Investment

## APPLICATION INSTRUCTIONS

*The purpose of the United Way of Schuyler County, Inc.*

To create and continue a fund for the maintenance of health, educational, recreational, welfare, and charitable services.



**Welcome to the United Way community investment process!** This application is the major vehicle through which our United Way gains a greater understanding of the services that programs provide and the impact they have on the lives of the people in our community.

This instruction booklet is intended to guide you through the application. **Please read through all instruction carefully before completing the application.** Volunteers will be reviewing many applications, so accuracy and completeness throughout the process is very important.

**Deadline for all applications is end of January.**

**STEP BY STEP**

This comprehensive instruction booklet will walk applicants through the application, page by page. It may be helpful to follow along, step by step, as you complete the application. Some of the instructions may seem simple and repetitive to you, but remember there may be others who are completing this form for the first time.

The final step, once everything is completed, is to make **multiple sets of your request, front-to-back if possible, and 3-hole punched.** The number of copies required appears in the application form at the top of the signature cover page (Page 2), as well as on the Application Checklist (Page 3).

**Page 1 - Important Note**

This page emphasizes that ALL applications for the funding cycle are due on or before January 31. Please make a note of this important date.

**Page 2 - Request for Investment / Signature Cover Page**

This “cover” page should be completed with the information indicated.

Near the center of the page, you need to choose the placement of your program into **ONE** of the five impact areas:

- **Children and youth**, with emphasis on early childhood and safe, healthy environments that promote learning.
- **Healthy communities**, with emphasis on access to health care.
- **Strengthening families**, with emphasis on building the skills needed for positive futures.
- **Economic self-sufficiency**, assuring that basic needs are met.
- **Senior independence**, with an emphasis on the nutritional health of our senior population.

Understanding that many programs may overlap into more than one area of impact, you will need to determine the most appropriate “best fit” based on the main focus of the program.

Once the entire application has been completed and reviewed, it should be signed by the Executive Director of the Agency and Chief Volunteer Officer, typically the Board Chair. These signatures acknowledge that all information in the application is true, accurate and complete.

**Page 3 - Application Checklist**

This checklist is designed to assure that your application is complete upon submission. Please make sure you pay close attention to everything that is required, as there may be negative consequences for submitting an application that is incomplete. By initialing each item and signing the bottom of the page, you acknowledge that everything requested is present and ready for submission.

**Page 4 - Agency Budget**

*(Corresponding Value: Effective Use of Resources)*

This page should reflect the expenses and revenues for the ENTIRE agency. (This should consist of all program within the agency, including those that do not receive funding from United Way.)

**Page 5 - Client Population & Conditions**

*(Corresponding Value: Client Need)*

This information relates directly to client need. The factual description provided should clearly describe who this program serves and the condition they experience ( *Ex. 1: Youth ages 15 to 17 in ABC county. Ex. 2: Families earning \$35,000 per year or less.*) Spell out why your intervention is required and the scope of the problem being addressed (*Ex. 1: Statistically, 68% of high school graduates will move out of the area upon graduation. Ex. 2: Many of these families are lacking the skills necessary to manage credit and debt, or assess their own financial situation.*) Stay within the one-page maximum allowance.

**Page 6 - Program Description**

*(Corresponding Value: Client Need, Program Results, Focused Alignment, Effective Use of Resources)*

While this page is asking for a description of the program and its specifics, you will still need to stay within the one-page maximum allowance. This is your opportunity to spell out how the program is going to address the needs of the clients and the conditions they face; please do so in a **clear and concise** manner (*Ex. 1: Staff creates relationships with area employers that are willing to mentor teens in job-training internships, screens program participants for current career interests, hobbies and life interests, places youth in appropriate, selective internships to increase their knowledge of various career opportunities in the community, and supervises internship matches on an ongoing basis. Ex. 2: staff and trained volunteers work directly with participants through a combination of one-on-one counseling sessions and small group meetings with families in similar situations. Progressive continuing education sessions and newsletters are delivered every two months that provide a vehicle for continued support and encouragement.*) Schuyler County United Way wants a clear picture of what services are provided to address the conditions the clients face (which you have already identified), and how this program contributes to the community as well as the priorities identified by United Way. Again, stay within the one-page maximum allowance.

**Page 7 - Program Improvement** *(Corresponding Value: Continuous Learning & Improvement)*

One of the key purposes of measuring program outcomes is the ability to use the information gained to improve the program and its services to better meet the needs of its clients. Describe how the agency promotes continuous learning and how often program outcomes are reviewed. Explain how the data is used to improve program services. Stay within the one-page maximum allowance.