## Equal Measure

## Pew Fund Capacity Building Program

Letter of Inquiry Cover Sheet

Spring 2015

Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Web site (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person for this LOI: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Counties in which project will be implemented (check all that apply):

**\_\_\_\_** Bucks \_\_\_\_ Chester \_\_\_\_ Delaware **\_\_\_\_** Montgomery \_\_\_\_ Philadelphia

Current Pew Fund Service Delivery Grant (check all that apply)

 \_\_\_\_ Children Youth and Families \_\_\_ Vulnerable Adults \_\_\_\_Elderly

# Since January of 2006, how many times has your organization:

# Submitted an LOI for a Pew Fund capacity building award (*not including this one*)? \_\_\_\_\_\_\_\_\_\_\_

* Submitted a full proposal for a Pew Fund capacity building award? \_\_\_\_\_\_\_\_
* Been funded for a Pew Fund capacity building award? \_\_\_\_\_\_\_\_

……………………………………………………………………………………………………………………

# Funding Category

Indicate to which funding category your request applies (check only **one**):

\_\_\_\_ Management information systems design and development

\_\_\_\_Financial management and planning

\_\_\_\_ Evaluation and outcomes systems development

\_\_\_\_ Leadership succession and next tier leadership development

……………………………………………………………………………………………………………………

Agency’s most recent annual operating budget: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FY ends: \_\_\_\_\_\_\_\_\_\_\_ (month/year)

Estimated total cost for proposed activities: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Staff size (FTE): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Estimated amount of Pew Fund support requested: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Estimated project funds from all other sources: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROJECT OVERVIEW**

**PEW FUND CAPACITY BUILDING PROGRAM: Spring 2015**

|  |  |
| --- | --- |
| **Organization Name:** |  |
| **Organization Mission:** |  |
| **1-Year Capacity Building Goal(s):** |  |
| **How does/do this goal/these goals fit into your overall organization-strengthening plan?** |  |
| **What are the expected outcomes from this work?** |  |
| **How will the organization’s clients benefit as a result of this work?** |  |