

Grants Accelerator Project

Grant Program Feasibility Assessment Intake Questionnaire

To complete, please select File>Make a Copy to save a copy that you can fill in. When you're finished, send your forms to sgsteam@elevatedeffect.com

This form includes questions about your organization that will inform our Grant Program Feasibility Assessment. In your project kick-off meeting, your Elevate consultant will discuss the responses you provide here, so please feel free to indicate where additional information can be provided in that meeting. You're also welcome to include links or references to other sources of information – such as your website – where that could be useful.

Organization Name:

Organizational Capacity

Organization Name:

Organization staff size:

Do you have a Board of Directors that oversees the organization's operations and finances?

Do you have audited financials? If yes, how many years of audits are available for review?

Who at the organization is responsible for accounting/bookkeeping? Do you have the tools and capacity to track expenses and report on the use of funds to a grantmaker?

Programmatic Capacity

For how long have you operated your current programs / initiatives?

Describe your program(s). Please include detailed information about who is served, the work that you do, and your record of impact.

How do you evaluate your program(s)?

What kind of feedback have you received from funders? For example, what do your donors say motivates them to give to your organization? What constructive feedback have you received in response to a request for funding?

What kind of challenges do you face in securing funding?