



Title of your proposal: 2019 Smith-McCarthy Funds for The Blind and Visually Impaired

Summary

Provide the Mission and Vision Statements of your organization:

Dollar Amount Requested:

Organization Information

Legal name of organization:

Type of Organization:

501 (c) (3)

501 (c) (4)

Government Entity / School District

Other

Provide a brief mission statement of your organization: *(350 Character limit)*:

Employer Identification Number:

Organization address:

Is the above address accurate?

Organization website:

Head of organization:

Head of organization title:

Head of organization email:

Contact Person Information

Name of contact person for this application:

Contact person title:

Contact person email:

Contact person phone:

Proposal Information



Dollar Amount Requested:

Brief description of your request: *(800 characters limit)*

What activities or services do you propose to provide for the blind and visually impaired with this support? *(1200 Character limit)*

How will the proposed activities be measured for success? Include quantitative and qualitative measures. *(1500 Character limit)*

Have you already started the work you described above? If not, when would this begin? *(500 Character limit)*

What distinguishes your organization's services for the blind and visually impaired? *(1500 Character limit)*

The Minneapolis Foundation is committed to supporting organizations that are diverse and inclusive and specifically include individuals and groups that have been marginalized and discriminated against because of their culture, race and ethnicity, gender, sexual orientation, age, disability, socioeconomic status, appearance and more.

Please define and explain who you are currently serving and how the leadership and board represents the population being served. *(1500 Character limit)*

Explain how your activities or services will impact the blind and visually impaired in a positive way. *(1500 Character limit)*

How many blind or visually impaired people will your organization or project engage with this support? How many are Minnesota residents? *(1200 Character limit)*

What are the demographics of the people to be served? e.g. age, race, income, city, etc. *(1500 Character limit)*

Describe the role of the blind and visually impaired in your proposed activities: *(1500 Character limit)*

Confirmation and Signature

By checking this box, the applicant confirms that the Executive Director or CEO, not the Development Director, has approved submission of this application and certifies that all of the information is true and accurate. In addition, this person agrees to the terms of the grant, including submitting a final evaluation, if approved.

Please type the name and title of the person who has authorized submission of this application to The Minneapolis Foundation. Typing the name and title here is an electronic signature.

Name

Title

