Hello Laura,

Welcome to the Rapid Response Fund Grant Application.

General Information:

- We encourage you to cut and paste your narrative responses from a word processing application (Word, Google Docs, etc.) to ensure work is not lost should there be an internet connectivity or technology glitch.

- Please feel free to write a short response to the grant application questions. We do not need long responses to each question. We have included suggested lengths to encourage brevity, but we have not set word limits because we recognize these can end up creating more work for applicants. If we need additional clarification regarding any of your responses we will reach out.

- Questions with a red asterisk are required for submission.

- Click the “View/Print Application” button at the bottom of any page to view the application form in its entirety. Please note that the printed version will not show the drop down options.

- We can view your in-progress application. If you have questions or need assistance, please contact the foundation and we can work together to resolve any problems.

Moving through the application:

- Click the “Next” button at the bottom of each page to move through the application.

- You may also click on the page title tabs on the right hand side of the application to toggle between pages.

- Page title tabs on the right hand side will have checkmarks if the page is completed.

- Page title tabs will have checkmarks if the page does not include any required fields. However, please review each page before submitting your application.

- If you wish to flag a page to come back to at a later date, select the "Flag this step" at the bottom of any page. A flag icon will appear on the page title tab for easy reference.

Save your application:

- The portal will automatically save your answers as you work through the application.

- For security purposes, the system times out after 90 minutes. Saving refreshes the system.

- Click the “Save & Come Back Later” button at the bottom of any page to save your information, exit out of the application, and into your online account.
You will need the email address and password of your organization's account to access the saved application.

Review your application:

- Click on the "View/Print Application" button at the bottom of any page, to view the application in its entirety. The fields will be populated with your completed answers.
- You will have a final chance to review and amend your work prior to submission on the Review and Submit page. This page alerts you to any required questions missing answers, or any pages previously flagged to return to at a later time. The application cannot be submitted until all required questions are answered and there are no flagged pages.

SUBMIT your application:

- Click the "Submit" button at the bottom of the "Review and Submit" page to complete the submission process. An email confirming your submission will automatically be sent to the email address associated with your account.

Organization or Collaborative Information

Please provide information for the Applicant Organization or Collaborative. Applicants using a fiscal sponsor will be asked to provide information about the sponsoring organization on the bottom of this page.

*Applicant Organization Name

Mailing Address

Organization Phone Number

Website Address

Organization Logo
If you have a logo for your organization or collaborative please upload it here. If awarded a grant, we may use your logo on our website and in our communications. This is not required.

Organization Operating Budget Total
Please provide your current fiscal year operating expense (in whole dollars).

*Organization or Collaborative Mission
Please provide your organization or collaborative's mission statement.

Board Members
How many people currently serve on your Board of Directors?

Full-Time Staff
How many full-time employees does your organization have?
**Part-Time Staff**
How many part-time employees does your organization have?

*Is your organization using a fiscal sponsor?*
If you select "Yes" a new tab will appear on the right-hand navigation bar where you can enter the details of your fiscal sponsor, and upload your signed Fiscal Sponsorship Agreement.

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**Fiscal Sponsor Information**

Please note that the Sewall Foundation considers the fiscal sponsor to be the grantee. If awarded a grant, the grant award letter and agreement will be sent to the fiscal sponsor, along with the grant award check. A copy of the grant award letter and agreement will be sent to the applicant organization.

The fiscal sponsor is responsible for the outcomes and administrative and legal requirements associated with any grants awarded as a result of this application. The fiscal sponsor retains oversight and responsibility for the project and any funds awarded.

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**Fiscal Sponsor Organization Information**

Organization Name

Federal Tax ID Number

Mailing Address

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**Fiscal Sponsor Executive Director or Head of Organization Contact Information**

Contact Name

Contact Title

Contact Email

Contact Phone Number

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**Fiscal Sponsor Agreement**

A copy of an agreement between your organization and the fiscal sponsor that outlines the understanding and responsibilities of both parties must be submitted with this application. The agreement must be signed by the Executive Director or Board Chair of both organizations.

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**Fiscally Sponsored Applicant Budget**
If applying as a fiscally sponsored organization, please attach your (the applicant) budget.

If you are not a fiscally sponsored organization or collaborative we are not requesting a budget, though you are welcome to attach one if you choose.

Why we ask for this? For grants made to fiscally sponsored work, we need to know that funds will be supporting work that qualifies under IRS definitions of charitable purposes.

Contacts

*Organization Primary Contact
  Executive Director or head of organization

*Application Contact
  Communication regarding this application will be directed to this person

Leadership Demographics

On this page we are asking for you to share demographic information about your organization's leadership, specifically about your board of directors and the head of your organization. These questions are completely optional, and will not impact your organization's eligibility for funding. To learn more about why we are collecting this information and how we will use it, please review the demographics page (https://www.sewallfoundation.org/demographics) we've added to our website.

In our research we found many formats and versions of demographic questions to ask. We have decided to follow Guidestar/Candid (https://help.guidestar.org/en/articles/3232470-demographics-section-faqs)'s model for demographic data collection because it was created specifically for the nonprofit sector in concert with the D5 Coalition (https://www.d5coalition.org/), CHANGE Philanthropy (https://changephilanthropy.org/) and Equity in the Center (https://equityinthecenter.org/).

At the bottom of this page we have created a text field where we welcome any additional information you may want to share, as well as comments and suggestions.

Board of Directors Demographics

Please provide numbers in the appropriate demographic fields.

Race and Ethnicity

How many Board Members publicly self-identify as the following:
Asian American/Pacific Islanders/Asian

Black/African American/African

Hispanic/Latino/Latina/Latinx

Native American/American Indian/Indigenous

White/Caucasian/European

Multi-Racial/Multi-Ethnic (2+ races/ethnicities)

Unknown

**Gender Identity**

How many Board Members publicly self-identify as the following:

Male

Female

Non-binary

Unknown

How many Board Members publicly self-identify as the following:

Transgender

Not Transgender (Cisgender)

Unknown

**Sexual Orientation**

How many Board Members publicly self-identify as the following:

Gay, Lesbian, Bisexual, or other sexual orientations in the LGBTQIA+ community

Heterosexual or Straight
Disability Status

How many Board Members publicly self-identify as the following:

Person with a disability

Person without a disability

Unknown

Organization Leader Demographics

This section refers to the head of your organization, usually an Executive Director or similar position. Please select from the dropdown menus below.

Race and Ethnicity

Does your organization's leader publicly self-identify as:

Gender Identity

Does your organization's leader publicly self-identify as:

Does your organization's leader publicly self-identify as:

Sexual Orientation

Does your organization's leader publicly self-identify as:

Disability Status

Does your organization's leader publicly self-identify as:

Additional Information

Demographic Data Additional Information

Please feel free to share any additional information, clarifications, thoughts or suggestions.
Request Information

*Proposal Title

*Requested Amount
While there are no firm limits on request amounts, most Rapid Response Fund Grants will be no greater than $10,000. Please provide the amount in whole dollars.

Please provide the amount in whole dollars.

*Type of Support
What type of support are you seeking through this request? You can select more than one option. If you select multiple options, please share how requested funds would be allocated in the "Use of Funds" question on the following page.

- Capital supports land, building/construction, or infrastructure.
- Operating supports the general work of your organization and is not restricted to a specific project within your organization.
- Project/Program supports a specific project or program.

*Summary of Work
Please share a brief summary of the emergency or time sensitive needs which the funds requested would address. How would this grant help you address those needs? 1-2 paragraphs suggested.

*Primary Population Served
Select one descriptor that best aligns with the population served by your work. Click on the "+" signs to see more options.

If your work includes multiple populations, please scroll down further and select, in order of priority or importance in your work, up to three populations you serve using the additional fields below.

This list comes from Candid and is used for our national philanthropic reporting on grants.

*Additional Population Served

*Additional Population Served

Population Description
Please feel free to use this space to describe the population who will benefit from this request, including additional details that may not be readily discernable from the above selections.

*Primary Geographic Area Served
Select one geographic area that best aligns with the location of your proposed work. Click on the "+" sign to see more options.

If your work extends beyond that area, scroll down further and select, in order of priority or importance, up to three geographic areas using the additional fields below. Please note, only select "Maine" if your proposed work has statewide impacts.
*Additional Geographic Area Served

*Additional Geographic Area Served

*Subject Area
You may select up to three subject areas that best capture the primary scope of your work. This list comes from Candid and is used for our national philanthropic reporting on grants.

Survey Question

How long did it take you to complete this application?
We encourage you to share how long it took you to complete this application. It will help us as we plan future applications. This is an optional field, and will not impact the review of your application.

Please respond in hours.