Affinity Giving Grant Application

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⌄ Your Email Address

Email Address (* required)

Confirm Email Address (* required)

General Information

Project Name (* required)

Please briefly summarize the project

(2-3 sentences)

Project Mission Statement (* required)

(not to exceed 200 words)

Indiana University Campus (* required)

Select all that apply.

- ☐ Bloomington
- ☐ Indianapolis/Columbus
- ☐ East
- ☐ Fort Wayne
- ☐ Kokomo
- ☐ South Bend
- ☐ Southeast

Are you a Department, Organization, or Individual? (* required)

Department ⌄

Name of Department (* required)

IU Campus/ Department Mailing Address (* required)

Name of primary contact (* required)

Person responsible for managing the project

Primary contact phone number (* required)

Primary contact email address (* required)

Campus Administrator (* required)

Campus Administrator phone number (* required)

Campus Administrator email address (* required)

Has a campus administrator reviewed/approved your grant submission? (* required)

○ Yes   ○ No

Have you received funding from Affinity Giving before? (* required)

☐ Black Philanthropy Circle (BPC)
☐ Queer Philanthropy Circle (QPC)
☐ Women's Philanthropy Leadership Council (WPLC)
☐ I have not received funding.

Please indicate name(s) of grant(s) and when award was received

In order to receive funding, an IU fiscal account is required. Do you have an IU account, or an IU fiscal officer who will create an account? (* required)

Note: an IU Credit Union account is not acceptable

○ Yes   ○ No

Project Information

Is this a new project or an expansion of a current project?

[   ]

Total proposed budget for project

[   ]

Total dollars committed from other sources to date

[   ]

Please list the commitments from other sources to date

[   ]

Total funds requested from Affinity Giving. (If applying to more than one Affinity Giving group, list funds requested from each (WPLC and BPC requests range from $2,500 - $25,000).

[   ]

How will you use the funds? (* required)

[   ]

To the best of your knowledge, has your project fulfilled all necessary legal, regulatory, or licensing requirements? (* required)

◯ Yes   ◯ No

Project Narrative

Please select which Affinity Giving group you are applying to (* required)

You may select one or more.

☑ Black Philanthropy Circle (BPC)
☑ Queer Philanthropy Circle (QPC)
☑ Women's Philanthropy Leadership Council (WPLC)

WPLC focus areas

[Choose an option...   ⌄]

How will DEI achievements be measured?

[   ]

Describe the specific needs this project addresses

How were constituent needs addressed?

What are the unique and/or innovative aspects of your project?

How will you evaluate and demonstrate that the project was effective?

Demographics

Age range(s) served

Race(s)/Ethnicities served

Sexual Orientation(s) served

Number of people directly served

Geographic region(s) served

Other

How does this project address Diversity, Equity, and Inclusion?

How does the individual or team proposing this project embody Diversity, Equity, and Inclusion?

What need or opportunity led to the development of this project and how are you addressing it? Were constituent needs addressed, and if so, how does your proposed project address these needs?

Describe who will be served by the project. Consider including number of people served, demographics, and whether students, faculty, staff, and/or community are the target audience.

How does this project address Diversity, Equity, and Inclusion?

How does the individual or team proposing this project embody Diversity, Equity, and Inclusion?

What need or opportunity led to the development of this project and how are you addressing it? Were constituent needs addressed, and if so, how does your proposed project address these needs?

Describe who will be served by the project. Consider including number of people served, demographics, and whether students, faculty, staff, and/or community are the target audience.

How does your project address intersectionality?

Outline the timetable for the project and include up to 5 major outputs and/or outcomes you seek to accomplish. How will these results be measured? (* required)

If this project will continue after the grant money has been spent, please describe how you will continue to fund this project: (* required)

Please include information regarding any significant IU and community partnerships or collaborations for your project.

Please upload any supporting documents to be shared with the committee. (pdf;doc;docx;jpeg;png)

Please only use this option if it is necessary to provide additional context.
A file with up to two additional pages may be uploaded as ancillary information, such as important data, siting sources, or including images.

Select a file 📄   No file selected

Proposal Budget

Please complete the budget template (Excel document) and upload before submitting the application. (xls;xlsx) (* required)

Select a file 📄   No file selected

Submit