

Williston Basin United Way

2023 Grant Request

The mission of the Williston Basin United Way is to enhance the quality and dignity of life for individuals and families by raising and distributing funds to area organizations.

Williston Basin United Way

Minimum Eligibility Requirements

Williston Basin United Way uses the following criteria to determine eligibility of an organization for funding.

These criteria must be continually met and evidence to that effect furnished to Williston Basin United

Way. Funds granted in 2023 will be distributed starting the first quarter of 2024.

- 1. The agency program must provide services to local communities in the counties of Williams, McKenzie and/or Divide.
- 2. The agency must render a service which meets a demonstrated human need; its programs must be of quality and quantity which will justify present and proposed expenditures. The agency program must provide a health, welfare, or social service.
- 3. The agency must provide services and/or programs that do not unnecessarily duplicate existing services and/or programs.
- 4. The agency must operate as a not-for-profit organization which may legally conduct business in the State of North Dakota.
- 5. The agency must be prepared to provide updated financial information and program outcome data as requested.
- 6. Have operational expenses in proportion to direct services (suggested maximum management/fundraising costs not to exceed 25%).
- 7. The agency program must not discriminate on the basis of race, religion, sex, age, or national origin in its staffing policies, use of volunteers, or provision of services.
- 8. The agency program must demonstrate a clear ability to manage both its programs and its finances in accordance with generally accepted procedures.
- 9. The agency must agree to abide by the terms set forth in the Agency Agreement.
- 10. The agency must be willing and able to donate at least 10 hours of volunteer time to a 2023 United Way event or other campaign effort.

Basin United Way will not fund:

- 1. Direct funds to individuals
- 2. Capital construction costs
- 3. Deficit funding

	Name of United Way	Basin United Way of Williston		
on	Mailing address	PO Box 176, Williston, ND 58802-0176		
Information	Contact person	Sabrina Ramey, Interim Executive Director		
orn	Phone number	701-609-6259		
Infe	Email address	basinunitedway@hotmail.com		
Hearing dates/time April 24, 25 or 27 after 6p. Additional Presentations are limited to 15 minutes		April 24, 25 or 27 after 6p.		
Ва	Additional	Presentations are limited to 15 minutes (8 minute presentation with		
	Information	an additional 7 minutes for questions). Example: 6:15, 6:30, 6:45		

ation	Name of agency	
	Name of program	
	Primary Contact	
	Address	
orm	Phone number	
Contact Information	Email address	
	Secondary Contact	
nte	Address	
Co	Phone number	
	Email address	
	IRS Status	Non-Profit Status as determined by the IRS (Yes) or (No)

	Amount Requested	\$
Proposal Information	Types of services	
	provided by your	
	organization	
	List any new or	
	dropped services	
	within the past year	
	List major	
	accomplishments this	
	past year	
	What are your goals	
	for the near future	

What are some of the	
current challenges	
your agency is facing	
Number of	() Williston
<u>unduplicated</u>	() Williams County (exclude Williston)
individuals served this	() McKenzie County
past year	() Divide County
Estimated value	(\$) Williston
of services provided	(\$) Williams County (exclude Williston)
	(\$) McKenzie County
	(\$) Divide County
Please describe the	
specific use of	
United Way funds,	
if awarded	
Application	10 series (De not stanle Conies must be three hele nunched)

	Application	18 copies (Do not staple. Copies must be three hole punched)
ij	Budget for 2021	18 copies
ıbmit	_	
Su	Financial statement or	1 copy
	audit for the past year	

***Information in these grant applications will be read by the Basin United Way Board of Directors to determine distribution of United Way funds raised during the 2022 campaign. Your agency is asked to give a personal presentation but we understand distance and time does not always allow; therefore, we also allow a telephone conference. Please select a date that will work best for you and whether you will be making your presentation in person or by telephone conference. ***

	Application Due Date	Friday, April 7, 2023			
nc	Time requested:				
tation					
en					
Pres					
Ъ	How will you make	In Person			
	your presentation	By telephone ()Telephone number		

	Please write two sentences that best	
	describes your agency	
	for our campaign brochure	
Optional	Please relate a story or testimonial about how United Way has helped your organization. This information may be used in fundraising efforts.	
-	I give permission to	
	use this story in the	
	annual campaign	



In compliance with the USA PATRIOT ACT and other counterterrorism laws, each organization receiving funds from United Way of Williston aka Williston Basin United Way must complete and return this compliance form to ensure continued funding.

Organization Name:	
Address:	
Telephone:	Fax:
Federal Tax ID:	_
technical, in-kind or material support to any this organization takes responsible steps organization, or any organization to which	med that this organization does not knowingly provide financial, entity that supports or engages in terrorist activity. Furthermore, to ensure that its funds and resources are not used by this these funds are distributed or re-granted, to support terrorists or d donations will be used in compliance with all applicable anticatutes and executive orders.
Print Name:	_Title:
Signature:	_ Date:
Return 18 copies of your grant application a Basin United Way PO Box 176 Williston, ND 58802-0176	and financial statement hole punched, NO staples by mail:

For questions - Phone: (701)609-6259 or e-mail: basinunitedway@hotmail.com