Wellness Grant Application FY25

*Allegany Franciscan Ministries*

# Eligibility Requirements

**To apply and be considered for funding, the organization must meet ALL of the following requirements:**

## A grant was awarded from Allegany Franciscan Ministries in the last 5 fiscal years.\*

Last five (5) fiscal years includes grants awarded July 2019 - June 2024. Eligible grant programs include Tau, ACOR, St. Clare, Climate Justice & Care for Creation, Common Good Initiative and/or a Nonprofit Capacity & Leadership grant.

**Choices**

Yes No

## Staff Leadership Demographics (leadership team as you define it)\*

At least 25% of staff leadership (leadership team as you define it) includes individuals who identify as BIPOC, LGBTQ+, Individuals with a disability, or other historically disenfranchised individuals.

**Choices**

Yes No

## Current IRS 501(c)(3) Status\*

Have received a ruling from the Internal Revenue Service confirming its exemption from federal income tax under section 501(c)(3) of the Internal Revenue Code.

**Choices**

Yes No

## Your organization did NOT receive a Wellness Grant in FY24 (July 2023 – June 2024)\*

**Choices**

Yes, my organization did NOT receive a Wellness Grant in FY24 No, my organization did receive a Wellness Grant in FY24

# Wellness Grant Application FY25

**Organization Information**

## Describe your organization in up to five sentences.\*

*Character Limit: 300*

## Mental Health and Emotional Well-being\*

How does the organization currently prioritize mental health and emotional well-being in the workplace?

*Character Limit: 2000*

## Number of Full-time Staff Members\*

Enter the number of full-time (>30 hrs./week) staff members currently at your organization.

*Character Limit: 4*

## Number of Part-time Staff Members\*

Enter the number of part-time (<30 hrs./week) staff members currently at your organization.

*Character Limit: 4*

## Number of Volunteers (including Board Members)\*

Enter the number of volunteers including board members currently at your organization.

*Character Limit: 5*

## Organization Budget\*

Enter your organization's current fiscal year operating budget.

*Character Limit: 20*

**Project Information**

## Project Name\*

*Character Limit: 100*

## Total Amount Requested from Allegany Franciscan Ministries\*

Max amount that can be requested is $5,000.

*Character Limit: 20*

## Use of Funds\*

Explain how your organization will use the funds to support your staff's and/or volunteers' health and well-being.

*Character Limit: 2000*

## Proposed Activities - Equitable Benefits\*

Describe how the organization plans to ensure that the proposed activities provide equitable benefits to all staff and volunteers?

*Character Limit: 2000*

## Improving Culture of Wellness\*

How does the organization anticipate the proposed activities will improve the culture of wellness?

*Character Limit: 2000*

**Feedback**

## Wellness-related Programs, Activities, or Resources

Please share any thoughts on wellness-related programs, activities, or resources you believe would be beneficial to your organization or the nonprofit sector in general?

*Character Limit: 250*

## Application Process

Please explain your overall experience with the application process.

*Character Limit: 250*