

# 2018 Valentine Grant Program

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## *Valentine Foundation*

### **Project Name\***

*Character Limit: 100*

### **Project Description\***

*Character Limit: 4000*

### **Amount Requested\***

*Character Limit: 20*

### **Target population for program\***

#### **Choices**

Girls/Adolescents  
Young Women/Adult Women  
Senior Women  
Multi-Age Women/Girls  
Transgender  
Boys/Men

### **Gender of populations served by program**

Please indicate the % of each gender in the areas below.

#### **Female**

*Character Limit: 3*

#### **Male**

*Character Limit: 3*

#### **Transgender**

*Character Limit: 3*

### **Program area/Proposal focus**

You may choose up to 3 areas

#### **Choices**

Anti-violence  
Arts  
Childcare  
Civil rights  
Community development  
Domestic violence  
Economic development  
Education  
Employment

Environment  
Family support  
Health/well-being  
Housing  
Political advocacy  
Reproductive rights  
Self-esteem/empowerment

## Geographic area served by program\*

You may choose up to 3 areas.

### Choices

Bucks County  
Chester County  
Chester  
Delaware County  
Five Counties  
Montgomery County  
National  
New Jersey  
Pennsylvania  
Philadelphia

## Funding Type\*

### Choices

General Operating Support  
Project Support

## Social Change Indicator\*

Click Here to read about the Social Change Indicators:

### Choices

Shift in Engagement  
Shift in Definition  
Shift in Policy  
Current Position Maintained

## Populations your organization serves\*

### Choices

African/African-American/Caribbean  
Asian/Asian-American  
White  
Hispanic/Latino  
Native American  
Multi-ethnic/Other  
US Born  
Non US Born

**Age groups your organization serves\*****Choices**

Children 0-11  
Adolescents 12-18  
Young Adults 19-25  
Adults 26-64  
Seniors 65+

**Income levels of populations served by organization\*****Choices**

Public Assistance (below \$22K)  
Middle Income (\$45K-160K)  
Low Income (\$22K-\$45K)  
Upper Income (above \$160K)

**Total number (unduplicated) of people served by your organization this fiscal year\***

*Character Limit: 7*

**Overall budget for your organization\***

*Character Limit: 20*

**Budget for your program\***

If applying for program funding

*Character Limit: 20*

**Are you also applying for a grant from the Leadership Fund?\*****Choices**

Yes  
No

## *Organizational Information*

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**Funding request for single or multi-year\***

Funding can be requested for up to three years. First time applicants are NOT eligible for multi-year funding.

**Choices**

Single year  
Two Years  
Three years

**Year your organization was founded\***

*Character Limit: 4*

**Mission of your organization\***

You may type your mission in the space below or upload it using the upload button.

*Character Limit: 500 | File Size Limit: 1 MB*

**List your organizations major funding sources\***

*Character Limit: 1000*

**Board Composition****Total Number of Board Members\***

*Character Limit: 5*

**Total Female Board Members\***

*Character Limit: 5*

**Total Male Board Members\***

*Character Limit: 5*

**Total Transgender Board Members\***

*Character Limit: 5*

**Age of Board Members****Number of Board Members Under Age 23**

*Character Limit: 5*

**Number of Board Members Age 23-35**

*Character Limit: 5*

**Number of Board Members Age 36-64**

*Character Limit: 5*

**Number of Board Members Age 65+**

*Character Limit: 5*

**Race/Ethnicity/National Origin of Board Members****Total Number African/African- American/Carribbean**

*Character Limit: 7*

**Total Number Asian/Asian-American\***

*Character Limit: 7*

**Total Number White\****Character Limit: 7***Total Number Hispanic/Latino\****Character Limit: 7***Total Number Native American\****Character Limit: 7***Total Number Multi-ethnic/Other\****Character Limit: 7***Total Number US Born\****Character Limit: 7***Total Number Non US Born\****Character Limit: 7***Do any constituents serve on your board?\*****Choices**

Yes

No

**Are any of your board members compensated? If yes, please explain below.\*****Choices**

Yes

No

**If you answered 'Yes' above please explain.***Character Limit: 1000***Staff Composition****Total Number of Full Time Staff Members\****Character Limit: 7***Total Number of Part Time Staff Members***Character Limit: 7***Total Female Staff Members\****Character Limit: 7***Total Male Staff Members\****Character Limit: 7*

**Total Transgender Staff Members\****Character Limit: 7***Age of Staff Members****Number of Staff Members Under Age 23\****Character Limit: 7***Number of Staff Members Age 23-35\****Character Limit: 7***Number of Staff Members Age 36-64\****Character Limit: 7***Number of Staff Members Age 65+\****Character Limit: 7***Race/Ethnicity/National Origin of Staff Members****Total Number African/African- American/Carribbean\****Character Limit: 7***Total Number Asian/Asian-American\****Character Limit: 7***Total Number White\****Character Limit: 7***Total Number Hispanic/Latino\****Character Limit: 7***Total Number Native American\****Character Limit: 7***Total Number Multi-ethnic/Other\****Character Limit: 7***Total Number US Born\****Character Limit: 7***Total Number Non US Born\****Character Limit: 7***Total number of staff assigned to grant if funded\****Character Limit: 7*

**NOTE TO APPLICANTS:** To ensure that you receive email communication from the foundation please add the email address **administrator@grantinterface.com** to your list of safe senders. For Outlook users the instructions are as follows:

1. On the **Home** tab, in the **Delete** group, click **Junk**, and then click **Junk E-mail Options**.
2. Select the **Safe Sender** tab and click **Add**
3. Add email address **administrator@grantinterface.com** and click OK.