

**Middlesex United Way**  
**Community Impact Small Grant Application**  
**Eligibility for Grants**



Middlesex United Way offers one-time small grants for eligible programs and event sponsorships that support our Impact Areas. Small grant funding operates in a two year on – one year off schedule. Your organization and program/event should meet the following criteria.

**Eligibility Criteria**

- (1) The organization must be a 501(c)(3) or have a fiscal sponsor that is a 501(c)(3).
- (2) The proposed program must serve the constituents of Middlesex County: Chester, Clinton, Cromwell, Deep River, Durham, East Haddam, East Hampton, Essex, Haddam, Killingworth, Middlefield, Middletown, Old Saybrook, Portland, and Westbrook.
- (3) Middlesex United Way Community Impact Grant funds cannot fund capital expenditures, scholarship programs, staff compensation, or any third party or contract. All grant funds must be spent on the intended purpose.
- (4) Applications must be a minimum request of \$100 and a maximum of \$1,000.
- (5) The organization cannot currently be receiving funding through the traditional Community Impact Grant program and must be in good standing with Middlesex United Way.
- (6) The program/event must fit within a specific Impact Area: Education, Housing, Financial Stability, Racial Equity & Inclusion, Wellness, and Youth Development.

**Grant Size and Frequency**

The Community Impact Council will review applications twice a year in September and December. An organization may apply for a repeat program annually and only if it meets the criteria listed in the Reporting Results section of these guidelines. One organization can only receive funding for two years consecutively and is then ineligible for funding for a third year.

**Application Checklist**

Be sure to read this application thoroughly and answer all questions in full. Include the requested documentation noted at the top of the application form. Grants will be reviewed bi-annually at Council meetings in September and December. The application is open August 9, 2024 – November 29, 2024.

Send your application and supporting documents to the Community Impact Director, Madison Baranoski at [madison.baranoski@middlesexunitedway.org](mailto:madison.baranoski@middlesexunitedway.org).

**Reporting Results**

All funded agencies must report on the results of the program or event being funded. If your application is selected for funding, a *Report Form* will be emailed to you along with your award letter. Please fill out the form and return it by May 30, 2025. Failure to report will result in disqualification for future funding.

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*Along with this application form, submit the following as separate attachments:*

- A copy of your IRS tax exempt letter OR a letter from a fiduciary, and
- A program specific budget detailing how funds will be used.

**Part 1: Agency/Organization Information**

Legal Name of Agency/Organization:

If applicable, name of organization that will serve as fiduciary:

Mailing Address:

Street Address (if different from mailing address):

Name of Executive Director/President/CEO:

Phone:

Email:

Name/Title of Primary Contact Person (for this application):

Phone:

Email:

State the organization's mission:

**Part 2: Program/Event Information**

Name of program/event for which funding is requested:

State the needs or issues that will be addressed by the program/event:

Describe the project/event activities and timeline, including how this grant funds will be used:

Describe the program/event goals and objectives, include intended impact and measurable outcomes on the organization and service recipients:

How does this project/event fit within the Impact Area you are applying for?

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Have you solicited and/or obtained additional funding from other sources? If so, what amounts?

Describe the marketing and public relations plan you will use to publicize the grant award:

Program participant anticipated demographics data:

- Town(s) Served:
- Number of People Served (Anticipated):
- Age Group Served:
- Gender of People Served:
- Race/Ethnicity of People Served:

Amount of Request: \$

\* Please be sure to include a program specific budget with your application.

**Part 3: Additional Information**

What is your organization’s philosophy or vision on racial equity and inclusion, and how has it impacted the work you do and clients you serve?

How did you hear about the Middlesex United Way Community Impact Small Grant program?

Would you like to receive the Middlesex United Way newsletter? Yes / No

Would you like the opportunity to speak at a Middlesex United Way event about your agency’s mission, programs, and goals? Yes / No

**Executive Director Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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*This section for use by MUW Community Impact Council only:*

Date Request Received:

Action: Approved / Disapproved

If approved, amount of approval: \$

Date Approved:

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Date Award Letter Sent:  
Date Progress Report Received:

