



NOTE: This is a preview of the Grassroots Fund Grow Grant Application. This document allows you to view the questions that will be asked in the application before creating an account on our website.

A note about document length: This PDF uses generous spacing, text size and includes all help text and possible questions you may be asked. The long-answer questions directly relate to the [Guiding Practices](#). During our review process, applications are scored based on their alignment with these practices. To view this rubric, see [here](#).

You must be a part of a group registered on this site to submit an application. First [search existing groups](#) and join your group if it is already registered. If not, you can [register a new group](#).

Grow applications MUST be submitted online through our grant portal, which allows it to be shared with Community Grant Readers and the Grantmaking Committee during our participatory review process.

Please see our [Grow grant webpage](#) for more information on how to submit an application online or contact Mary Jones, Grow Grant Program Manager, at mary@grassrootsfund.org.

Welcome to your Grow grant application. After naming your application, the form consists of 2 sections – group information and project information. Make sure to complete both sections. You'll find red circles on required but incomplete fields. Once all fields are complete, you will be able to submit your application for review. You will receive a confirmation email when the application is successfully submitted. After you have submitted it, you will not be able to edit it. Have fun!

The application questions are designed for you to explain your work. Your responses will be seen by grant readers and grantmaking committee members who make the final funding decision. Additionally, our process is designed to allow these reviewers to share feedback and ideas. Please let us know if you have any concerns with this component of our process.

Please contact Mary Jones at mary@grassrootsfund.org or (603) 905 9915 if you have any questions.


This form does not auto save! Please save your application frequently to avoid losing your work. The Save button appears at the bottom of your browser window. After Saving, click the 'Edit/Continue Working' button to get back to editable fields.

Deadlines: **third Tuesday of March and September**

*** Denotes Required Fields**

SECTION 1: APPLICATION NAME

Application Name *

Please give your application a name that helps you identify and return to this form. It can be whatever you want and will be the name of the link in your Action Center (top-right corner button) to access this grant application. After entering a name, please click Save below  before proceeding.

Nice work! You have reached the end of this section. Remember to click the Save button (at the bottom of your screen) to save your progress. **Next: Group Information**

SECTION 2: GROUP INFORMATION

☐ **Check this box after you have made sure all group and contact information below is correct and up-to-date at the time of submission.***

Many fields auto-fill from previous applications or from when the group was registered. Please make sure all entered information accurately represents the group as it is right now. Readers and grantmaking committee members will use the responses to make decisions.

– Group –

Updating the fields on this form will also update your group profile.

Group Name *: _____

WHAT IS THE BEST MAILING ADDRESS FOR THE GROUP?

Please enter a mailing address where we may send any correspondence. This is where a physical check would be sent, if your group's grant application is approved for funding. This could be an office or the home address of one of the volunteers who receives and processes mail on behalf of the group.

Address 1 *: _____

Address 2: _____

City *: _____

State *: _____

ZIP code *: _____

Who is the primary contact for your group? *

Please enter the name of one person who can serve as the primary contact for your group. Once a group is created, multiple people can join the group and collaboratively edit group content (grant applications, reports, etc.). The contact information listed here will be publicly shared if you are awarded a grant.

Phone number for your primary contact:*

Email address for your primary contact: *

Please list the names and emails of at least 2 other core group members. Note that groups must have TWO or more organizers actively involved in the group's decision-making on project priorities and actions to be eligible for Seed funding and THREE or more organizers for Grow funding.

Having the contact information for multiple group members is important to help us ensure we can communicate with the group when necessary.

ADDITIONAL CONTACTS (MIN 2) *

	First Name *	Last Name *	Email *	
+	<input type="text"/>	<input type="text"/>	<input type="text"/>	Remove
+	<input type="text"/>	<input type="text"/>	<input type="text"/>	Remove

Please review Grassroots Fund's [program issue area page](#) for more detail. Select the issue areas that best describe your group's work. Use the 'Add another issue' button below to list multiple issue areas for your group.

WHAT SPECIFIC ISSUE AREAS DOES YOUR GROUP WORK ON? (SELECT ALL THAT APPLY)

+

- None -

+

✓ - None -

- Climate Change & Energy
- Food
- Environmental Health
- Land & Water
- Living Economies

Add

What is your group's picture goal?

What is your group's big picture goal?

We are interested in understanding the overarching reason why the group has decided to become active. What do you see as the overall goal of your work? Some groups have a formal mission, other groups work under a more loosely defined set of goals. Either way, we would like to learn why you formed your group or this project. Why do you want to do this work? Note that you are limited to 1,500 characters (including spaces). Please use the Character counter at the bottom-right of this text box.

What year did the group first start working together?

If people have served for a variety of years, please indicate an 'average year' that best describes the majority of the core group of volunteers.

– Group Overview –

What type of geographic area is your group working?*

Definitions: Urban - a city center | Peri-Urban - relating to an area immediately surrounding an urban-defined city. | Suburban - densely populated residential area surrounding an urban or peri-urban area. | Rural - a sparsely populated area.

✓ - None -

Urban

Peri-urban

Suburban

Rural

How many people in the group are considered “decision makers”?*

Please note that groups must have at least TWO different organizers actively involved in decision-making on project priorities and actions to be eligible for Seed funding and THREE different organizers to be eligible for Grow funding. "Decision makers" could be considered those with the authority to determine course of actions, handle finances, lead projects, are generally looked to as leaders, etc. **Use numbers only.**

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Does the group formally ask how core volunteers and decision makers self-identify across race/ethnicity, age, socio-economic level, education, etc?

We are interested in understanding if the group has a formal survey and strategy to understand the lived experiences and perspectives that core volunteers and decision makers bring in as decisions are made.

○ NO

○ YES

– Group Decision Maker Demographics –

We are collecting this information from all groups to better understand the scope of the Environmental Justice movement by identifying the trends of who is organizing in grassroots environmental groups across New England. This data will help the Grassroots Fund hone its programming to better serve the movement and the groups that are contributing to it. [Click here to learn more about why the Grassroots Fund asks demographics questions as part of the application process.](#)

We recognize that some responses to questions are limited in scope and have worked to create as inclusive of a list of answers as possible while keeping the survey concise. Any harmful errors or omissions are ours alone. If you have any concerns and you feel comfortable telling us, we are here to listen.

HOW MANY DECISION MAKERS ARE OF THE AGE:

No matter whether you formally survey your members, please think of those that are involved with the decision making process as indicated before. For each row, assign a number from 0 and above to correspond with each individual. If you don't know, indicate the number of people you don't know. **The total number here should match the number you inserted for the question: *How many people in the group are considered "decision makers"?*** [Click here to learn more about why the Grassroots Fund asks demographics questions as part of the application process.](#)

Under 26: _____

26-35: _____

36-45: _____

46-55: _____

56-65: _____

66-75: _____

76+: _____

Do Not Know: _____

HOW MANY DECISION MAKERS HOLD THE SELF-IDENTIFIED GENDER:

We ask that you fill out the boxes below, knowing that this is an imperfect way to capture the complexity of this "metric." We welcome your feedback for how we could do this better, and/or an alternate description of your gender in the text box below. The total number here should match the number you inserted for the question: *How many people in the group are considered "decision makers"?* [Click here to learn more about why the Grassroots Fund asks demographics questions as part of the application process.](#)

Woman: _____

Man: _____

Transgender, non-binary, genderqueer, or otherwise not forming to the gender binary: _____

Do Not Know: _____

Describe any missing self-identified gender: _____

HOW MANY DECISION MAKERS HOLD THE SELF-IDENTIFIED SEXUAL ORIENTATION:

As with the question above, we simplify this complex question in order to obtain the information. We welcome your feedback. The total number here should match the number you inserted for the question: *How many people in the group are considered "decision makers"?* [Click here to learn more about why the Grassroots Fund asks demographics questions as part of the application process.](#)

Lesbian, Gay, Bisexual, Queer, or otherwise “not Straight”: _____

Straight/Heterosexual: _____

Asexual: _____

Do not know: _____

Describe any missing self-identified sexual orientation below: _____

HOW MANY DECISION MAKERS HAVE THE FOLLOWING LEVELS OF EDUCATION RECEIVED?

Please select highest level of education. **The total number here should match the number you inserted for the question: *How many people in the group are considered “decision makers”?*** [Click here to learn more about why the Grassroots Fund asks demographics questions as part of the application process.](#)

No schooling completed: _____

Nursery school to 8th grade: _____

Some high school, no diploma: _____

High school graduate, diploma or the equivalent (for example: GED):

Some college credit, no degree: _____

Trade/technical/vocational training: _____

Associate’s degree: _____

Bachelor’s degree: _____

Master’s degree: _____

Professional degree: _____

Doctorate degree: _____

Do not know: _____

HOW MANY DECISION MAKERS IDENTIFY WITH THE FOLLOWING SOCIOECONOMIC STATUS?

We recognize that income and quality of life vary based on geographic cost of living, racial/ethnic identity, gender identity, and more factors out of the individual's control. In an attempt to acknowledge the systemic nature of income as it relates to power in our New England communities, Grassroots Fund is shifting to a power-oriented analysis of income. When we say class, we are most concerned with your relationship to labor, production, and how needs are met, not the specific dollar amount made. Please select the choice which best describes the personal experience and financial status of the group members. The total number here should match the number you inserted for the question: *How many people in the group are considered "decision makers"?* [Click here to learn more about why the Grassroots Fund asks demographics questions as part of the application process.](#)

Currently not employed and rely on friends, family, other social supports and/or governmental aid to have a safe place to live, food to eat, and/or healthcare. This can include students and fixed incomes including but not limited to, social security payments, retirement savings (like a 401k plan), pensions, disability benefits, and life insurance payouts.

Underemployed and therefore need to rely on friends, family, other social supports and/or governmental aid to have a safe place to live, food to eat, and/or healthcare.

Currently employed, but if I were to lose my job, I would eventually need to lean on friends, family, or other social supports and/or governmental aid to have a safe place to live, food to eat, and healthcare.

Regardless of my employment status, I have access to income from other sources such as property (renting or selling), a profitable business, investments in the stock market, or other assets inherited, gifted or otherwise, which would enable me to afford a safe place to live, food to eat, and healthcare without working or relying on social or governmental supports for the foreseeable future.

None of these apply: _____

Do not know: _____

HOW MANY DECISION MAKERS IDENTIFY WITH THE FOLLOWING RACE AND ETHNIC IDENTITY?

We encourage you to select the commonly used census categories below and/or describe with more specificity in the text box below if you do not feel adequately represented by these boxes alone. If selecting white and choosing to describe ethnic identity beyond whiteness, we strongly encourage the selection of "White" AND self-describe in the text box below. This helps us to have accurate data to better understand the extent to which we are or are not truly confronting white supremacy culture in philanthropy. The total number here should match the number you inserted for the question: *How many people in the group are considered "decision makers"?* [Click here to learn more about why the Grassroots Fund asks demographics questions as part of the application process.](#)

Asian or Asian American: _____

Black or African American: _____

Indigenous American or Alaskan Native: _____

Hispanic, Latinx/of Spanish origin: _____

Middle Eastern or North African: _____

Native Hawaiian or other Pacific Islander: _____

White: _____

Mixed Race: _____

Do not know: _____

Describe any missing racial or ethnic identity: _____

HOW MANY DECISION MAKERS IDENTIFY AS A PERSON WITH A DISABILITY?

The total number here should match the number you inserted for the question: *How many people in the group are considered “decision makers”?* [Click here to learn more about why the Grassroots Fund asks demographics questions as part of the application process.](#)

Yes: _____

No: _____

Do not know: _____

ARE THERE ANY ADDITIONAL DEMOGRAPHICS OR OTHER ASPECTS OF IDENTITY YOUR GROUP ACTIVELY TRACKS, ESPECIALLY IN THINKING ABOUT DIVERSE REPRESENTATION IN YOUR GROUP’S DECISION MAKING? IF SO, PLEASE SHARE BELOW.

For example, this may include the number of decision makers with first-hand familiarity with your particular issue (such as personal experience with food insecurity, being unhoused, etc). This question echoes our guiding practice of [Shifting Power](#). Note that you are limited to 1,000 characters (including spaces). Please use the Character counter at the bottom-right of this text box.

IF YOU HAVE A DOCUMENT SUMMARIZING THE DEMOGRAPHICS OF YOUR DECISION MAKERS, YOU MAY UPLOAD IT HERE. (OPTIONAL)

We recognize that some groups may already have a document summarizing some demographics of their decision makers. This is an opportunity to supplement your answers to the above with such a document, should you already have one. Even if you upload a document, it is best for our grant reviewers that you answer the questions above regarding demographics the best you are able. Please do not feel like you need to create a new document if you do not already have one.

Add a new file

Files must be less than 500 KB.

Allowed file types: txt pdf doc docx xls xlsx.

Choose File

No file chosen

Upload

– Tax Status –

TAX STATUS

Grassroots Fund is different from many other foundations as we don't limit grants to only 501(c)3 or fiscally sponsored applicants. We are required to document the type of tax status each of our grantees has and this section helps us better understand the type of structure your group uses. Please make sure to answer the questions below to the best of your ability. We will be able to clarify further during the grant review process. If you have any questions about the tax status of your group, please [contact us](#).

DOES THE GROUP HAVE FEDERAL 501c3 NON-PROFIT STATUS?*

This is a federal nationwide IRS determined designation as tax exempt. The group will have been awarded this status after an application with the IRS and has a determination letter that is in the name of the group. Please select "no" if your group is fiscally sponsored by another entity.

☐ NO

☐ YES

ONLY IF YES: WHAT IS THE GROUP'S EMPLOYER IDENTIFICATION NUMBER (EIN)? *

Since you have selected '501(c)(3)' as your group's tax status, please provide us with your Employer Identification Number (EIN). You can find your group's EIN number in the top right corner of the Federal Tax Exemption letter sent to you by the IRS.

If 501c3, Section Complete.

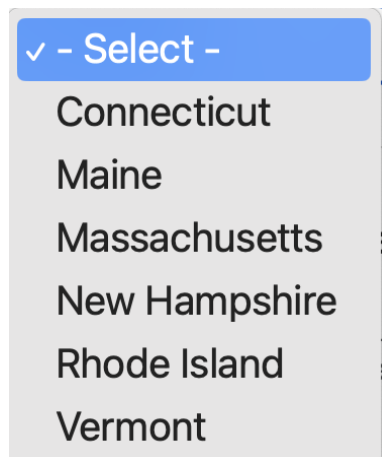
ONLY IF NO: DOES THE GROUP HAVE A NON-PROFIT INCORPORATION IN ONE OF THE NEW ENGLAND STATES?*

Nonprofit incorporation is the process of establishing that your group operates for a cause other than making a profit. The group will have filed paperwork - usually, including the group's articles of incorporation, bylaws, and financial documents - with a state office and sometimes has documentation that shows incorporation.

○ NO

○ YES

ONLY IF YES: IN WHICH STATE DOES THE GROUP HAVE ITS NONPROFIT INCORPORATION?*



✓ - Select -

- Connecticut
- Maine
- Massachusetts
- New Hampshire
- Rhode Island
- Vermont

If non-501c3 and State nonprofit incorporated, Section Complete.

ONLY IF NO: DOES THE GROUP HAVE A FISCAL SPONSOR FOR THIS GRANT?*

A fiscal sponsor is an entity (often with 501(c)3 status) who can receive money on behalf of your group. Often there is a formal fiscal sponsor agreement in place that specifies the relationship. Please note, if you

have a fiscal sponsor you are not required to use them to receive a Grow grant. To receive this grant, a group just needs to have a bank account in the group's name.

☐ **NO**

☐ **YES**

ONLY IF YES: WHAT IS THE NAME OF YOUR GROUP'S FISCAL SPONSOR?*

WHAT IS THE MAILING ADDRESS OF YOUR FISCAL SPONSOR?

Address 1 *: _____

Address 2: _____

City*: _____

State*: _____

ZIP code*: _____

WHO IS A PRIMARY CONTACT FOR YOUR FISCAL SPONSOR?*

WHAT IS AN EMAIL FOR THE PRIMARY CONTACT? *

DOES YOUR FISCAL SPONSOR HAVE 501C3 STATUS?*

This is a federal nationwide IRS determined designation as tax exempt. The group will have been awarded this status after an application with the IRS and has a determination letter that is in the name of the group.

☐ **NO**

☐ **YES**

ONLY IF YES: WHAT IS YOUR FISCAL SPONSOR'S EIN NUMBER? *

ONLY IF NO: PLEASE DESCRIBE THE TAX STATUS OF YOUR FISCAL SPONSOR. * Examples: municipality, for profit entity, etc.

If using a Fiscal Sponsor, Section Complete.

ONLY IF NO: DOES THE GROUP HAVE A BANK ACCOUNT IN THE GROUP'S NAME? *

If none of the above apply to your group, you can still receive a grant. Please note, for-profits (such as LLCs) cannot use grant funds to cover business expenses. The group will need a bank account in the group's name (important: it can not be in an individual group member's name). A volunteer effort can request a Community Volunteer EIN number by going to the IRS website (this is a short process that generates the EIN number electronically). With the Community Volunteer EIN, the group can open a bank account in the group's name. For more information on how to open a bank account, please check our FAQ section.

☐ **NO**

☐ **YES**

ONLY IF YES: WHAT IS YOURS GROUP'S COMMUNITY VOLUNTEER EIN?*

ONLY IF YES: WHAT IS THE NAME OF THE BANK WHERE THE GROUP HAS AN ACCOUNT?*

ONLY IF NO: *You can proceed with the application, but please know that if your group is approved for funding, you will have to open an account in the group's name ahead of receiving the funds.*

Section complete.

Does your group have paid staff? *

By paid staff member, we mean people that are officially on payroll and receive a regular wage. Please do NOT include volunteers who receive an occasional stipend for the work they do.

☐ **NO**

☐ **YES**

IF YES: How many staff people are paid?

Please indicate the number of individual staff who are paid.

IF YES: Across the entire staff, how many staff hours are paid per week?

Please indicate the total hours per week for all paid staff people as one lump number. For example, one full time paid staff might be 40 hours of paid hours per week.

What (if anything) did the group SPEND during the last calendar year (2025)?*

I.e. what is the total amount (for all the work/projects - not just the one you are applying for here) the group spent all of 2025. Note that Grassroots Fund prioritizes groups with approximate annual spending of UNDER \$100,000. Grassroots Fund does not fund groups spending over \$150,000 in the last calendar year.

- o *Less than \$10,000*
- o *\$10,001 to \$25,000*
- o *\$25,001 to \$50,000*
- o *\$50,001 to \$75,000*
- o *\$75,001 to \$100,000*
- o *\$100,001 to \$150,000*
- o *Over \$150,000 (Ineligible to apply for funding)*

[ONLY IF \$100,001-\$150,000 option above selected] Please select any and all of the categories that apply to your group. Grassroots Fund grants prioritize groups with approximate annual spending of UNDER \$100,000. Tolerance for groups spending up to \$150,000 a year is primarily limited to the situations listed below.*

- ☐ We do not have access to tax exempt status at the state or federal level (including via a fiscal sponsor).
- ☐ We are a mutual aid group and funds over \$100,000 were spent via direct payments to community members.
- ☐ Spending over \$100,000 per year is unusual for our group and is the result of a one-time or non-recurring source.
- ☐ None of the above applies.

Briefly, please give some additional context about your expenses in the last calendar year. Note that you are limited to 2000 characters (including spaces). Please use the character counter at the bottom-right of this text box.*

What is the group planning to spend in total this calendar year?*

We want to know the group's current annual budget (the total amount you think you might spend across all projects and activities this calendar year).

If you have any context you would like to provide about this calendar year's budget, please use the box below. Note that you are limited to 2000 characters (including spaces). Please use the character counter at the bottom-right of this text box.

What has led the group to believe your work is wanted and needed by the community?*

We want to know more about how the work your group does is addressing a need as identified by those who will benefit from your projects. This question echoes our guiding practices of Rooted Innovation. Note that you are limited to 2,000 characters (including spaces). Please use the Character counter at the bottom-right of this text box.

– Staying In Touch –

The Grassroots Fund would like to keep in touch and help to amplify your story

ALMOST ALL APPLICANTS WILL BE ASKED TO HAVE A SHORT FOLLOW UP CALL ABOUT YOUR APPLICATION. WOULD YOU PREFER TO HAVE THE CALL IN A LANGUAGE OTHER THAN ENGLISH?

Grassroots Fund will organize and pay for any translation services.

○ NO

○ YES

[IF YES] - WHAT LANGUAGE WOULD BE BEST FOR THE FOLLOW UP CALL?

Instagram

Please add the link (ex: www.instagram.com/grassrootsfund) for your group's Instagram page. Leave the field blank if you don't have or prefer to not disclose.

Facebook

Please add the link (ex: www.facebook.com/thegrassrootsfund) for your group's Facebook page if you have one. Leave the field blank if you don't have or prefer to not disclose.

Newsletter

Please add the link to sign up for your group's newsletter. Leave the field blank if you don't have or prefer to not disclose.

Please provide a name, town, state, and link.

WHAT ARE THE "HOMETOWN" NEWSPAPERS OR OTHER SOURCES OF NEWS SOURCES IN YOUR SERVICE AREA?

This could be listservs, other social media platforms, website blogs, etc. Please provide links.

Name: _____

Town: _____

State: _____

Link: _____

ARE THERE ANY OTHER OUTREACH TOOLS YOU USE THAT YOU'D LIKE TO SHARE?		
	Title	URL
+	<input type="text"/>	<input type="text"/>

Does the Grassroots Fund have permission to share stories, photos, or any other information posted on the above listed outreach channels?

☐ NO

☐ YES

GROUP PHOTO(S)

Please upload photos that highlight your group's work. Ideally the photos show active participation from (community) members. To upload a photo, click the Browse button and select the appropriate file from your computer. Once you've selected the file, hit the upload button to add the photo to the group profile. Repeat this process to upload multiple photos. Please don't add more than 5 total. Feel free to add a short description in the Title field under each photo. When your group receives a grant, the first photo will be used for the profile that appears on the [grantee map](#). You can change the order of your photos by clicking and dragging different rows. Note that the Grassroots Fund may use pictures in publications like brochures, annual reports and funder reports. Please [email us](#) if you have trouble uploading photos.

Add a new file

Files must be less than 256 MB.

Allowed file types: png gif jpg jpeg.

Images larger than 1200x1200 pixels will be resized.

Choose File	No file chosen
Upload	

Can the Grassroots Fund use these photos for outreach purposes, including fundraising?

○ NO

○ YES

Nice work! You have reached the end of this section. Remember to click the Save button (at the bottom of your screen) to save your progress. **Next: Project Information**

SECTION 3: PROJECT INFORMATION

We ask you to be honest and transparent in answering the following questions. This is an opportunity to not only celebrate and share what is exciting, but also to share challenges and tensions you experience in the work. Our review process invites readers and review committee members to offer feedback, suggestions and ideas, which we will share at the end of the process. These readers and committee members are your primary audience for this grant application, so please answer your questions with accessible language for all people and context for those who may not live in your state, although some of these volunteers may even be a part of your own community!

The Grassroots Fund's Guiding Practices can be traced back to our founding principles and remain an important touchstone for all of our work. These Practices open up opportunities to have conversations around who is involved in (co-)creating local solutions, how a group's work is (or can be) contributing to a Just Transition and what we can do to support on-the-ground efforts.

If you are not familiar with the Grassroots Fund's Guiding Practices, you can find them [here](#). These Practices provide a sense of priorities for our programs. Please use them as context for your application and a starting point for further conversations about the work.

☐ **I have read the Grassroots Fund's Guiding Practices materials***

– Summary –

Amount requested*

Grow grant requests can range from \$1,000 to \$4,000. We highly recommend groups seek the full \$4,000, if they can use it. Reviewers may decide on partial funding based on alignment of the work with the [Guiding Practices](#) and any partial funding amount % is calculated from the amount requested.

Primary Project Issue Area*

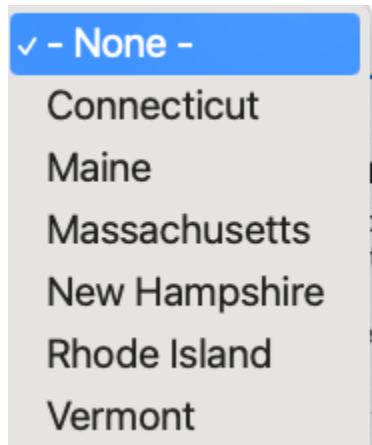
Please review the Grassroots Fund's [program issue area page](#) for more detail. Select the issue area that best describes the focus of this application.

- **Climate Change and Energy**
- **Food**
- **Environmental Health**
- **Land & Water**
- **Living Economies**

Town*

Please tell us which town or city is most impacted by the proposed project. If the project spans multiple towns, please answer this question appropriately but remember that Grassroots Fund's focus is on community-level work.

State*



Describe your group's project in a few sentences*

Tell us more about the project for which the group seeks funding. We want to hear about the full project, not just the part that would be funded with Grassroots Fund support. Note that you are limited to 2,000 characters (including spaces). Please use the Character counter at the bottom-right of this text box.



If resources weren't an issue, what do you ultimately hope to see change in your community as a result of the work you do?*

This is a huge question to pose. We are asking this because we want to give you a space to share how you see your work connecting to a larger vision of the world as it should be. We know grant questions can often focus on your immediate project and not leave space for you to share your group's vision/dreams. This question echoes our guiding practices of **Centering Just Transition** and **Rooted Innovation**. Note that you are limited to 2,000 characters (including spaces). Please use the Character counter at the bottom-right of this text box.

What do group leaders propose as the steps to achieve their vision? That is, how do you get from where the group is now, to the change you hope to see in your community, and what makes those steps effective?*

We want to better understand what your day-to-day work looks like. How do you bridge the gap between your vision for your community, and the work you do on your project today? How are they connected? This question echoes our guiding practice of **Centering Just Transition**. Note that you are limited to 2,000 characters (including spaces). Please use the Character counter at the bottom-right of this text box.

– Decision Making and Leadership –

What protocols, procedures, or community agreements do you abide by to ensure GROUP MEMBERS have decision making power in the group and project?*

How do you structure your meetings, communications, and hiring/onboarding so that all **group members** can participate equitably? How do you handle disagreement? This question echoes our guiding practice of **Shifting Power** and **Equity in Participation**. Concrete examples and stories are encouraged. Note that you are limited to 2,000 characters (including spaces). Please use the Character counter on the bottom-right of the text box.

What protocols, procedures, or community agreements do you abide by to ensure COMMUNITY STAKEHOLDERS have decision making power on your project? *

What structures does your group have in place to ensure community members can always participate equitably? How do you co-create with the people the project affects so that they directly help guide and inform these decisions and protocols? This question echoes our guiding practice of **Shifting Power** and **Equity in Participation**. Concrete examples and stories are encouraged. Note that you are limited to 2,000 characters (including spaces). Please use the Character counter on the bottom-right of the text box.

What lived experiences do current decision makers offer that will help with the project?*

We are interested in the perspectives and diversity (however you choose to define that) of the core group of decision makers as it pertains to lived experience. Grassroots Fund believes all lived experience is expertise, and that not all expertise is academic nor professional. Oftentimes, expertise comes as the lived experience as a member of a certain community, our race/ethnicity, our age, and other information others use to identify us. How do these things contribute to the collective experience of decision makers in the group? This question echoes our guiding practice of **Shifting Power**. Concrete examples and stories are encouraged. Note that you are limited to 1,000 characters (including spaces). Please use the Character counter at the bottom-right of this text box.

–Community Participation & Impact –

Please describe how your project is contributing to a shift toward procedures and strategies that ensure ecological and social well-being, cooperation and regeneration in your community.*

You can learn about these concepts (often connected to Just Transition) through our [Centering Just Transition](#) guiding practice. Concrete examples and stories are encouraged. Note that you are limited to 1,000 characters (including spaces). Please use the Character counter at the bottom-right of this text box.

How does the group plan to learn about the project's impact(s) and understand whether this project's continuation meets a need within the community?*

Please describe how the group plans to monitor the impact of the work. What protocols/processes exist to adjust the work based on feedback from community members? This question echoes our guiding practices of [Just Transition](#) and [Rooted Innovation](#). Concrete examples and stories are encouraged. Note that you are limited to 1,000 characters (including spaces). Please use the Character counter on the bottom-right of the text box.

Describe how the group makes efforts to understand and address barriers to participation in this project.*

We are interested in understanding how the group advances (or plans to advance) equitable access to resources, events, information and participation in the project. This question echoes our guiding practice of [Equity in Participation](#). Concrete examples and stories are encouraged. Note that you are limited to 1,000 characters (including spaces). Please use the Character counter at the bottom-right of this text box.

Will this project build upon previous or parallel efforts (either initiated by your group or by others) or is this a new organizing strategy for the community?*

We would like to understand the community context. Are there other groups nearby that do similar work? Is this project energizing previous efforts? How is your group working alongside similar projects/groups? This question echoes our guiding practice of **Rooted Innovation**. Note that you are limited to 1,000 characters (including spaces). Please use the Character counter on the bottom-right of the text box.

– Project Budget –

How much money is needed in total to complete the full proposed project?*

i.e. what is the total program(s) budget? The total budget may be more than the Grow grant you are applying for.

Budget categories, or line items, 'tell the story' of your project. The categories should provide more detail on types of expenses you are predicting. If you don't have exact numbers, just estimate to the best of your ability. Please review the **Telling Your Story through Your Budget handout** for an example. Note that the totals in this section should add up to the TOTAL project budget listed above. A reminder that the following expenses are not eligible for Grow grant funding: national or international work, lobbying or partisan

political activity, acquisition of land and/or buildings, studies with no follow-up action, publication of books or reports, retroactive expenses (that pre-date application submittal), and micro-, mini, re-granting programs.

PLEASE BREAK-DOWN/CATEGORIZE THE TOTAL PROJECT COSTS ✕

Proposed Item

Estimated \$ Amount

\$

⊕

Would grant funds be used for this item?

- None -

▼

Type Of Expense

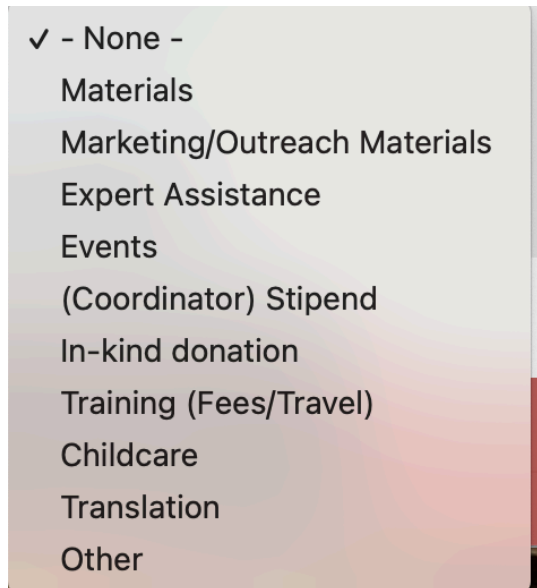
Materials

▼

Remove

Add another item

(Note: Above you will categorize each proposed item with options listed under “Type of Expense.” See below for a list of categories.



– Accessing Resources –

How does your group manage financial expenses?*

For example, does the group have a ‘treasurer’? How do you currently keep track of group expenses? Does the group have a bank account in the group’s name? Note that you are limited to 1,000 characters (including spaces). Please use the Character counter at the bottom-right of this text box.

Which of these best describes your group’s experience applying for grant funding for your projects? *

We want to understand if and how your group is able to access grant funding. We are interested in all grant funding sources, not just Grassroots Fund.

- None -

The group has never applied for any grant before this application.

The group has applied for grants before, but never received any.

✓ The group has applied for and received grants in the past.

[ONLY IF LAST OPTION above selected] For how many years have you received funding from grants (from any source or funder)?

✓ - None -

Less than 2 years

Between 2-5 years

More than 5 years

Does the group have a paid position to help with fundraising efforts (such as a Development Coordinator, Executive Director and/or paid Grant Writer?)*

○ NO

○ YES

What strategies has your group used to fundraise or access resources in the past?*

This can include both financial resources such as grants or monetary donations, as well as in-kind contributions of materials, time, etc. Note that you are limited to 750 characters (including spaces). Please use the Character counter at the bottom-right of this text box.

Does the group have a (long-term) fundraising plan to bring in diverse sources of funding?*

The definition of long-term is somewhat dependent on the project, but overall we are interested in hearing if you have a plan to continue to raise funds if the project is projected

to be ongoing. And, if so, whether income is mostly through donations, or if there are other possible income streams. We are not necessarily looking for a complete, detailed fundraising plan, but want to understand whether the group has had conversations about how to continue to bring in financial resources to do the work.

☐ **NO**

☐ **YES**

IF YES: Please summarize the group's long-term plan to raise funds

We are interested in understanding the sources of funding and overarching strategies the group plans to seek out. Note that you are limited to 750 characters (including spaces). Please use the Character counter at the bottom-right of this text box

Does your group face any specific challenges or opportunities in accessing resources for your work?*

These can range from skills & capacity to group tax status to competition for local resources.

☐ **NO**

☐ **YES**

IF YES: Describe any specific challenges and opportunities your group faces in accessing resources for your work.

These can range from skills & capacity to group tax status to competition for local resources. Please give us some insight into the group's specific context. Note that you are limited to 1,000 characters (including spaces). Please use the Character counter at the bottom-right of this text box.

Do you have strategies or solutions to these challenges/opportunities which you have not yet tested or implemented?

☐ **NO**

☐ **YES**

IF YES: Please describe those strategies or solutions

Note that you are limited to 1,000 characters (including spaces). Please use the Character counter at the bottom-right of this text box.

Below are the overarching track topics offered during Community of Practice workshops ([learn more by clicking here](#)). Please select as many topics as relevant and use the “Other” option to suggest additional topics.

Please select which of the following Community of Practice topics would be useful for members of your group as they start implementing the project:

- ☐ Rooted Solutions
- ☐ Equity in Participation
- ☐ Just Transition
- ☒ Shifting Power in Decision Making
- ☐ Accessing Resources
- ☐ Dismantling White Supremacy Culture
- ☐ Other

Is there anything else we should know about this project?

Note that you are limited to 1,000 characters (including spaces). Please use the Character counter at the bottom-right of this text box.

How did you hear about this grant opportunity? Note that you are limited to 1,000 characters (including spaces). Please use the Character counter at the bottom-right of this text box.

– Attachments –

Please feel free to attach any application support materials. For example: overall group budget, volunteer biosketches, news articles, etc. If you are working with specific partners, attaching existing letters of support or memoranda of understanding is helpful (if you have them readily available). Please note that as part of the participatory review process, readers and reviewers have access to files you upload here. Please don't share any documents that

have personal or private information that you don't want shared publicly. File size should not exceed 500kb.

Add a new file

Files must be less than **500 KB**.

Allowed file types: **txt pdf doc docx xls xlsx**.

Choose File No file chosen

Upload

Nice work! You have reached the end of this section. Remember to click the Save button (at the bottom of your screen) to save your progress. **Next: Ready to Submit?**

SECTION 4: READY TO SUBMIT?

Please summarize your project request in 2 to 3 sentences*

The Grassroots Fund's review process invites grant readers to share their perspectives and insights on all applications. This brief summary is shared with readers to help them organize their different reading assignments.

To submit your application, please select the "Ready to Submit" option below and click Save. You will receive a confirmation email once the application has been successfully submitted.

☒ In progress ☐ Ready to Submit