



**North Carolina GlaxoSmithKline Foundation  
Ribbon of Hope**

Electronic Application – Printer-friendly Version

**Before You Begin**

**Welcome**

The North Carolina GlaxoSmithKline Foundation (the Foundation) established the Ribbon of Hope grant program to have a positive impact on the lives of North Carolina’s citizens in each of the state’s 100 counties. The Foundation awards grants of \$25,000 to North Carolina community-based nonprofit 501(c)(3) organizations. In addition, grantees benefit from technical assistance provided by the North Carolina Center for Nonprofits.

Ribbon of Hope grants support activities that advance science, health, and education in local communities across the state of North Carolina. These grants provide organizations with a one-time opportunity to develop a new initiative or to expand and/or enhance an existing project. An organization may not receive more than one Ribbon of Hope grant. The Foundation does not fund general operating (i.e., indirect or overhead) costs, construction or renovation projects, or medical services.

Proposed projects should be tightly aligned with the mission of the Ribbon of Hope grant program to advance science, health, and education in local communities across the state of North Carolina, address critical community needs that have been identified through a comprehensive needs assessment; provide clear and concise descriptions of project activities; and demonstrate sustainability after grant funds are expended.

**Eligible Applicants**

Established North Carolina community-based nonprofit organizations may apply. Individuals, faith-based organizations, and fraternal organizations are ineligible. Organizations with an open grant from the Foundation (traditional or Ribbon of Hope grant programs) are not eligible for additional funding. An organization may only receive one Ribbon of Hope grant. Informal groups without 501(c)(3) status may partner with a sponsor organization or group of organizations who may apply on behalf of the group. Proposals that include several community-based organizations forming a collaborative partnership interested in and supportive of the proposed work are encouraged to apply. The Foundation seeks both geographic and organizational diversity among award recipients.

## Helpful Tips

If you are not actively\* working in an application, after 20 minutes the system will notify you that it is timing out and you need to save your application. If you receive this message, click Continue then save your application. If you do not save the application at that time, none of your work will be saved.

\*Actively means entering data in multiple fields or moving between pages. The system does not recognize typing in a single field as activity. Copy and paste as needed into the application.

1. Bullets and other formatting is discouraged in the text blocks. If you need to include a chart please submit as an attachment.
2. Download and complete forms prior to submitting application. Forms can be located at this link <http://www.ncgskfoundation.org/apply-ribbon.html>.
3. Submit all Letters of Commitment from partner organizations as one attachment.
4. Submit all resumes together as one attachment.
5. Password is case sensitive.
6. Save this URL to access and log into your account at [https://www.grantrequest.com/SID\\_2260?SA=AM](https://www.grantrequest.com/SID_2260?SA=AM) to access saved and submitted requests.
7. To prevent the loss of your work in the application, use the Save and Close button often, however this may create a lag period in the application process before the application appears when you log back into the site.
8. Contact Mathias Smrekar at [msmrekar@mcrel.org](mailto:msmrekar@mcrel.org) for grant questions and Dawn at [dawn.L.Lloyd@gsk.com](mailto:dawn.L.Lloyd@gsk.com) for questions about the application software.
9. Add mail@grantapplication.com to your safe senders list to ensure you receive all system communications.

## Organization Information

❖ Required before final submission

### General Information

❖ Organization Name

❖ Address

❖ City

❖ State

❖ Zip Code

❖ Phone

Fax Number

❖ NC County

County where your organization is located

Tax ID

Social Media Identification

Web Address

## Background Information

Nonprofit Mission Statement:

## Contact Information

❖ Required before final submission

Organization Primary contact (Eg: Executive Director, President)

❖ Prefix

❖ First Name

Middle Initial

❖ Last Name

❖ Title

❖ Office Phone

❖ Extension

❖ E-mail

Request Primary Contact (Eg: Grant Writer, Program Director, Project Contact)

Same as Organization Primary Contact

Prefix

First Name

Middle Initial

Last Name

Title

Office Phone

Extension

E-mail

## Request Information

❖ Required before final submission

### Grant Request Information

Is this a new initiative or an expansion/enhancement of an existing project?

<None> ▼

❖ Project Title

❖ Project Information

Brief description of the project, target audience, proposed activities, and anticipated outcomes. Limit to one page.

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❖ Estimated Project Start Date      Project End Date

### Request Classification

Please select the classifications that best describe this particular project.

❖ County(ies) in which participants are served.

Search

Reset

You can select up to 10 counties. All/Statewide is also an option.

<Select One> ▼

Search

Reset

You can select up to 10 counties. All/Statewide is also an option.

<Select One> ▼

Search

Reset

You can select up to 10 counties. All/Statewide is also an option.

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Search

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You can select up to 10 counties. All/Statewide is also an option.

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Search

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You can select up to 10 counties. All/Statewide is also an option.

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You can select up to 10 counties. All/Statewide is also an option.

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You can select up to 10 counties. All/Statewide is also an option.

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You can select up to 10 counties. All/Statewide is also an option.

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You can select up to 10 counties. All/Statewide is also an option.

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Search

Reset

You can select up to 10 counties. All/Statewide is also an option.

<Select One> ▼

### Age Group

- Pre-K through 12 (combination)
- Pre-Kindergarten
- Elementary School Age
- Middle School Age
- High School Age
- Adults
- Elderly/Seniors
- General Population
- College Undergraduate Students
- College Graduate Students
- Community College Students

## Population Served

- Disaster Victims
- Learning Differences
- Minorities
- Others
- Physically/Mentally Challenged (Disabled)
- Rural
- Underserved
- Urban
- Veterans

## ❖ Focus Areas Addressed by this Project

- Science     Health     Education

## Detailed Project Description

### ❖ I. Project Need

Please provide a comprehensive description of the need for the proposed project. Be sure to include:

- A) A description of the community (e.g., demographics, socioeconomics).
- B) A description of the community need this proposal addresses.

Cite external sources (e.g., data collected by the lead and/or partner organizations, a community needs assessment, county-level data) as appropriate. External sources used to describe the need may be included as attachments.

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### ❖ II. Project Design

Please provide an in-depth summary of the proposed project activities. Be sure to include:

- A) The specific project goal(s) and objective(s).
- B) An explanation of how proposed project goal(s) and objective(s) relate to the mission of the Ribbon of Hope program.
- C) Information about the individuals who will benefit from the proposed project (i.e., the target group), including size, description, and planned recruitment activities.
- D) A detailed description of the proposed project activities, including the rationale for selecting each activity.
- E) Information about how each activity addresses the identified need(s) and relates to the proposed goal(s) and objective(s).

1. For new initiatives, describe how this project fills a gap in community services.
2. For expansion/enhancement projects, please provide evidence of success (e.g., increased participation rates, increased test scores, increased satisfaction).

- F) Information about the role and responsibility of key project staff, including those from partner organizations (if applicable).
- G) Information about the resources each partner organization will contribute to the project.
- H) A detailed project timeline.

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### ❖ III. Project Evaluation

Please provide information about how the proposed project activities will impact the target group. Be sure to include:

- A) A detailed description of each project outcome (i.e., what will change in the target group?).
- B) A description of how project outcomes align with project objectives.
- C) Information about how each outcome will be measured (specify instruments and when and how data will be collected).

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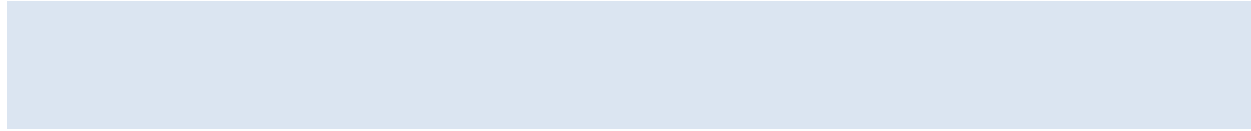
### ❖ IV. Project Sustainability

Please provide information about how project activities will be sustained after grant funds are expended. Be sure to include:

- A) Information about plans to sustain and/or scale up project activities (e.g., list specific partnerships, potential funding sources).
- B) Information about how project outcomes will be used to inform future work, including organizational policies, strategies, and/or services to the community.

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Tell us about some examples of the lead organization's similar work if applicable.



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## V. Organizational Capacity

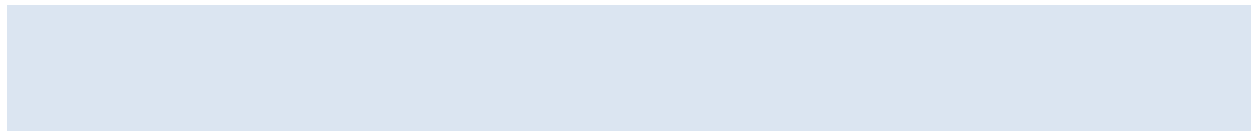
### ❖ Background

**Organizational History.** Please provide a brief statement of the lead organization's history.

**Capacity.** Please describe how the lead organization and partner organization(s) will accomplish project goals and objectives.

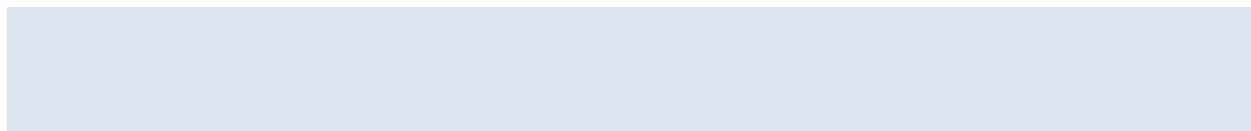
Be sure to include:

- A brief capacity statement for the lead organization and partner organization(s).
- Information about how this project relates to the lead organization's past accomplishments/projects.
- A short biography for each key project member, including organizational affiliation.



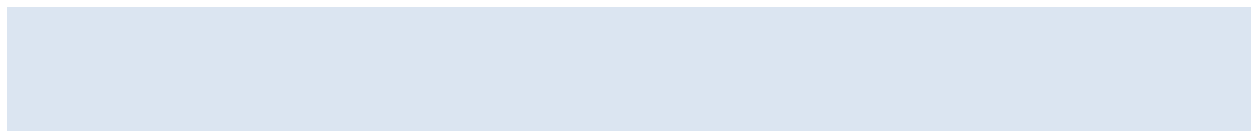
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Tell us about a prior relationship with the Foundation if you have one.



Word Count 0 of 250

List of lead organization's current project, by funding source and amount.



Word Count 0 of 250



## Attachments

❖ Required before final submission

### Attachments

#### ❖ 1. Proposed Ribbon of Hope Budget

First download the budget form, save it to your desktop, complete the form, save and download (click the blue line), complete and attach [THIS BUDGET TEMPLATE](#) or the word document at [Word Doc Budget TEMPLATE](#)

No file chosen

#### ❖ 2. Proposed project budget narrative attachments

No file chosen

### Budget Narrative

Please provide a detailed justification of each line item in the proposed budget, demonstrating that all expenditures are reasonable and necessary to accomplish the proposed project activities. Note: The Foundation does not fund general operating (i.e., indirect or overhead) costs, construction or renovation projects, or medical services.

#### ❖ 3. Lead organization's statement of financial activity

Please download, complete and attach [THIS STATEMENT OF FINANCIAL ACTIVITY TEMPLATE](#) or the word document [THIS STATEMENT OF FINANCIAL ACTIVITY TEMPLATE WORD DOCUMENT](#)

No file chosen

#### ❖ 4. Copy of lead organization's 501(c)(3) determination letter

Note: Individuals, faith-based, and fraternal organizations are ineligible for Ribbon of Hope funding.

No file chosen

❖ 5. Copy of lead organization's most recent financial statement (auditor's report or Form 990).

No file chosen

6. If you are partnering with other organizations you must submit a letter of commitment from each partner organization(s) detailing their commitment and contribution to the proposed project.

These must all be saved as one document and uploaded as such.

No file chosen

❖ 7. Resumes for key project personnel (including from partner organization[s]) (biographies are not sufficient)

These must all be saved as one document and uploaded as such.

No file chosen

❖ 8. Communication plan

Please download (click the blue text), complete and attach [THIS PROPOSED PROJECT COMMUNICATION PLAN TEMPLATE](#) or the word document [THIS PROPOSED PROJECT COMMUNICATION PLAN TEMPLATE WORD DOCUMENT](#)

Include specific examples of planned activities to advertise the Ribbon of Hope award, activities, and key outcomes in the target community.

No file chosen

❖ 9. Sample press release to announce the Ribbon of Hope award.

No file chosen

## 10. Other letters of support or endorsement, supplemental reports, strategic plans

These must all be saved as one document and uploaded as such.

**Organizations may choose to submit additional documentation that will aid reviewers' understanding of the proposal, such as letters of support or endorsement, needs assessment data or reports, and/or strategic plans.**

No file chosen

## 11. Additional attachments if needed

No file chosen

## Questions?

For additional information, contact Mathias at 303.632.5590 or [msmrekar@mcrel.org](mailto:msmrekar@mcrel.org)

- **Answers to Ribbon of Hope frequently asked questions:**  
<http://www2.mcrel.org/NCGSKFRibbonOfHope/FAQs.asp>
- **The following websites provide guidance and resources on grant writing:**
  - Minnesota Council on Foundations – Writing a Successful Grant Proposal:  
<https://www.mcf.org/sites/default/files/files/pages/writingagrntproposal.pdf>
  - First Nations Development Institute: Specific, Measurable, Achievable, Realistic and Timely (SMART) objectives:  
[http://www.firstnations.org/sites/default/files/GrantseekerResources/EvaluationTips\\_SMARTGoalsObjectives.pdf](http://www.firstnations.org/sites/default/files/GrantseekerResources/EvaluationTips_SMARTGoalsObjectives.pdf)
  - Colorado Nonprofit Association – Difference Between Objectives, Goals, and Outcomes:  
<https://www.coloradononprofits.org/knowledge/faq/what-difference-between-objective-goal-and-outcome>
- **Information on the North Carolina GlaxoSmithKline Foundation:**
  - Ribbon of Hope: <http://www.ncgskfoundation.org/roh.html>
  - Twitter account: <http://twitter.com/ncgskfound>