



2026 Grant Application Preview

ELIGIBILITY REQUIREMENTS

Please review our Grant Guidelines webpage prior to applying to check what Mildred's Dream will or will not fund: <https://mildredsdreamfoundation.org/grant-program/>

APPLICANT INFORMATION

Applicant First Name:

Applicant Last Name:

Cell Phone Number:

Office Phone Number:

Applicant Email:

FINANCIAL ELIGIBILITY & REQUIRED DOCUMENTATION

Please note that **EVERY applicant** will be required to upload the following three (3) REQUIRED documents in order to qualify for grant consideration:

- Our 2026 Budget Workbook which will include:
 - Program-specific budget showing how \$25,000 would be utilized (*Note: most grantees are awarded between \$5,000 and \$10,000*)
 - Organization balance sheet as an operating budget (Please note the program expense in the budget that you are applying for with the MDF grant)
- A copy of the organization's most recent 990
- A copy of the organization's IRS 501(c)(3) Determination Letter

Important Note: *MDF prioritizes applicants seeking funding for programs with total budgets of \$250,000 or less, as this allows the MDF grant to represent a meaningful portion of the program's overall funding (typically up to 10%).*



SECTION 1: ORGANIZATIONAL INFORMATION

Organization Overview

Which category is the focus of your grant application? (You must select only one)

- Education (with a focus on access, diversity and/or inclusion for children)
- Violence Prevention and Survivor Support (with a focus on domestic violence and sexual assault and including dating violence, stalking and abuse prevention)
- Physical and/or Mental Health Challenges

Your Organization's Name:

Year Founded:

EIN Number (Federal Tax ID Number):

Physical Location's Address:

Street Address

Street Address 2 or Suite Number

City/Town

State

Zip Code

How did you hear about Mildred's Dream Foundation's grant program?

Previous Grant History

Has your organization applied for a grant from Mildred's Dream Foundation in the past?

- Yes
- No
- Unsure

If you selected either Education or Physical and/or Mental Health Challenges: Has your organization received three (3) consecutive years of funding from Mildred's Dream Foundation?

- Yes
- No



Social Media Handles

Please enter your organization's social media handles below. If not applicable, enter "NONE" in the field.

Facebook (Meta):

Instagram:

LinkedIn:

X (formerly Twitter):

YouTube:

SECTION 2: ORGANIZATIONAL CAPACITY & INFRASTRUCTURE

Mission & Overview

Please include your organization's Mission Statement:

Provide a brief overview of your organization. (Limit: 150 words)

Staffing

Number of FULL-TIME employees on payroll

Number of PART-TIME employees on payroll:

Number of PAID CONSULTANTS on contract or retainer:

Organizational Leadership

Name of Executive Director:

Name of individual who would oversee this Program/Project:

List your organization's Board of Directors/Trustees:

Organizational Impact

Enter the number of individuals served annually by your entire organization:



Alignment with Mildred's Momentum (Prior Grantees Only)

If you were previously awarded a grant, how are you aligning with Mildred's Momentum? Please select all that apply:

- Had representatives attend the 2025 Grantee Celebration in November
- Had representatives attend 2025 A Night to Dream
- Nominated someone for the Rick Perini Mentor of the Year Award
- Collaborated with another Mildred's Dream prior grantee
- Participated in our World Cup Raffle
- Other: _____
- None of the above

SECTION 3: PROGRAM DETAILS

Is this a new program or project or is it the continuation of an existing program or project?

- New Program
- Continuation of an Existing Program

What is the estimated total cost of this program or project?

Amount requested for the specific program or project (MDF will be distributing grants up to \$25,000).

Provide a brief description of the specific program or project, including why it is important, its objectives, and potential impact, for which you are requesting funding. (Limit: 300 words)

Please describe your timeline for implementation and completion of program or project. (Limit: 150 words)

If awarded, explain how the funding will impact your ability to operate the program. (Limit: 150 words)

How will you proceed with the program or project if the organization does not receive funding for the full requested amount? (Limit: 150 words)

Specify your plans for the continuation of financing the program or project at the end of the MDF grant period. List other financing sources or strategies. (Limit: 150 words)



Will this program involve partnerships with other organizations?

- Yes
- No

If yes, describe the nature of these partnerships and how they strengthen the program. (Limit: 200 words)

SECTION 4: PROGRAM EVALUATION & IMPACT

Explain how your program aligns with MDF's focus area(s) and mission. (Limit: 300 words)

Expected number of individuals to be served by this program or project (for this upcoming grant year). Be sure to include key demographic information. (Limit: 100 words)

Define your criteria for success. Include specific, measurable outcomes that you will use to determine the success and impact of your programming or project. (Limit: 200 words)

What tools will you use to evaluate your program/project's success and impact? (e.g., records, surveys, interviews, pre- and post-tests, community feedback, data dashboards). (Limit: 200 words)

How will you use evaluation findings to improve the program? Describe your learning and adaptation process. (Limit: 150 words)

SECTION 5: FUNDING & FINANCIAL MANAGEMENT

Does your organization operate multiple programs?

- Yes
- No

If yes, describe your inter-program funding protocols. Can funds from other programs be redirected or used to supplement this program if needed? Under what circumstances would this occur? (Limit: 150 words)

Does your organization maintain an endowment?

- Yes
- No



If you answered yes above, does your organization draw from the endowment to support programmatic work?

- Yes
- No

If yes, please explain the circumstances and frequency of endowment draws. If no, please explain your rationale for not drawing from the endowment. (Limit: 150 words)

Beyond this MDF grant request, list all other current funding sources for this program, including foundations, government contracts, individual donors, and earned revenue. (Limit: 150 words)

SECTION 6: GRANT AWARD DETAILS & COMMUNICATION

If awarded a grant, please provide the payee name:

If awarded a grant, please provide the full mailing address to send the check to:

Street Address

City/Town

State

Zip Code

Please list any contact emails who should be communicated updates from Mildred's Dream Foundation (for grantee celebration invites, impact statement reminders, etc.). You can list up to 3 emails. (Note: Notification of grant awards will be sent through SurveyMonkey Apply to the email address that submitted this application.)

Applicant Certification
