

*UWCI FY25 Investment Process - New Applicant Request

United Way of Central Iowa

Program Information

Program Name*

Please enter the program name for which funding is requested.

Note: A separate application must be submitted for each funding request/program.

Character Limit: 100

Strategic Alignment - Impact Area & Result*

With which UWCI Impact Area and Result does your program most closely align?

View United Way of Central Iowa's strategy maps by impact area to determine your program's alignment:

- **Early Childhood Success (ECS):** Central Iowa children start out healthy and ready to learn.
- **Essential Needs (EN):** Central Iowans live in stable, healthy places with essential supports they need to thrive.
- **Economic Opportunity (EO):** Central Iowans have sufficient income and opportunities to build wealth.
- **Education Success (ES):** Central Iowa youth are academically successful and have a plan for their future.
- **Health & Well-Being (HWB):** Central Iowans have physical and mental well-being.

Choices

ECS: Central Iowa children start out healthy and ready to learn

EN: Central Iowans live in stable, healthy places with essential supports they need to thrive

EO: Central Iowans have sufficient income and opportunities to build wealth

ES: Central Iowa youth are academically successful and have a plan for their future

HWB: Central Iowans have physical and mental well-being

Strategic Alignment - Early Childhood Success

Early Childhood Success Strategy*

Select the Early Childhood Success strategy with which your program is aligned.

Choices

ECS1: Address barriers to prenatal care and improve birth outcomes

ECS2: Increase access to and availability of services that promote healthy child development

ECS3: Increase access to and participation of children in quality child care or preschool settings

Strategic Alignment - Essential Needs

Essential Needs Strategy*

Select the Essential Needs strategy with which your program is aligned.

Choices

EN1: Increase availability of and reduce barriers to accessing healthy food

EN2: Provide supports needed to keep people in affordable, stable, and healthy homes

EN3: Increase opportunities for safe, health-promoting spaces

Strategic Alignment - Economic Opportunity

Economic Opportunity Strategy*

Select the Economic Opportunity strategy with which your program is aligned.

Choices

EO1: Provide access to skills and supports leading to jobs and wealth building opportunities

EO2: Provide access to adult basic education, post-secondary education, job training, and supports

EO3: Provide individuals and families access to financial services and supports to manage money

EO4: Maximize use of tax code to boost income, use tax credits deductions

Strategic Alignment - Education Success

Education Success Strategy*

Select the Education Success strategy with which your program is aligned.

Choices

ES1: Improve student success

ES2: Increase student access to quality, culturally relevant activities/programs

ES3: Promote successful transitions into and/or out of middle school

ES4: Increase student access to career exploration, activities, and awareness

ES5: Increase high school students who graduate and have a plan beyond high school

Strategic Alignment - Health and Well-Being

Health & Well-Being Strategy*

Select the Health & Well-Being strategy with which your program is aligned.

Choices

HWB1: Reduce barriers to accessing physical and mental health care

HWB2: Promote and support sense of purpose, belonging, and connectedness

What We Do

WWD - Program Description and Alignment*

Provide a description of how your program operates and explain how that aligns with the strategy selected above.

You do NOT need to touch on the following bullets but they may help you brainstorm how you talk about your program:

- Program model
- Program duration
- Best practices implemented
- Relevant accreditations
- A clearly described connection between the strategy and what the program does

Character Limit: 3000

Who We Impact

WWI - Clients Served*

Approximately how many clients will be served by your program in a typical year?

Character Limit: 10

WWI - Population and People Served*

Please describe the participants served by your program and explain why your program serves them specifically. This may include:

- Specific demographic information
- Description of challenges faced by participants

Note: Demographic characteristics could include, but are not limited to: age, criminal history, education level, race, ethnicity, gender, gender-identity, sexual orientation, refugee status, immigration status, veteran status, household income, disabilities, religion

Character Limit: 1500

Budget and Funding

Maximum Request Amount

United Way has restrictions on the amount of funding your agency can request based upon the types of financial documents you have available.

The maximum request amount is by agency, not program. Please review the information below before entering your "amount requested".

Full Form 990

- Maximum agency request: \$30,000

Form 990N

- Maximum agency request: \$20,000

IRS Designation Letter

- Maximum agency request: \$15,000

Total Program Budget - FY25*

Please enter the expected program budget for Fiscal Year 2025 (July 1, 2024 - June 30, 2025).

Character Limit: 20

Amount Requested*

Please enter the amount of funding requested from UWCI for this program in Fiscal Year 2025 (July 1, 2024 - June 30, 2025).

Character Limit: 20

Use of Funds*

Expanding on the budget you've provided, describe specifically how **UWCI** funds will be used in the program. (examples include detailed descriptions of: Salaries, program materials, training, scholarships, etc.)

Character Limit: 1500

Additional Information

Does another organization serve as your fiscal sponsor/agent?*

Choices

Yes

No

Most Recent Form 990*

Upload your agency's FY23 Form 990 (or most recent, if FY23 is not available)

File Size Limit: 8 MB

Submission

Submission Confirmation*

I understand this information is being relied upon by United Way of Central Iowa (UWCI). I represent and warrant all information submitted to UWCI through this application is accurate and complete to the best of my knowledge and belief.

Enter name of person submitting this application in the box provided:

Character Limit: 50