

Here for Oregon. Here for Good.

Grants Portal & Online Application

Step-by-Step Instructions

V 4.0

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For Frequently Asked Questions (FAQ's) please visit the grant program's web page at <u>oregoncf.org</u> or the sidebar within the Grants Portal.

PART I: MyOCF Login

If you are on OCF's website (<u>www.oregoncf.org</u>) you can access the Grants Portal at any time by clicking MyOCF at the top of the screen.

You can also access the Grants Portal by visiting the individual grant program page on OCF's website, if the program is open for application.

To begin, enter your **User ID** and **Password** (your **User ID** is your email address). If you can't remember your password, click **Forgot Password** and follow the steps to retrieve your login information. If you're not a registered user and want to apply for a grant, visit the link at the bottom of the screen.

g in	
MyQ	
i i j \sim	1
[11] M. C. Martin and M. M. Martin, "A strain and strain an	The Oregon Community Foundation's online system.
Please use the email of Passwords are case se	address provided as your User ID.
T asswords are case se	n Isinve.
User ID	
Password	
Log In	
Log in	
Forgot Password	
Whether you're a dor	or, grant or scholarship applicant, or endowment partner, you can connect to the
information you need	through MyOCF.
To start using MyOCF,	please call 503.227.6846, or email us at info@oregoncf.org
Not a registered user	and want to apply for a grant? Click here.

After logging in, you will be directed to the following landing screen. Depending on your level(s) of access, you may see more or less of the following options. Click on **Apply for a Grant** to get started.



PART 2: Registering to Use OCF's Grants Portal

Existing users: if you don't need to register or connect yourself to an organization, skip ahead to **Part 4** to begin the application process. However, if you still need to connect yourself to an organization, please review **Part 3**.

If you are new to the Grants Portal and wish to register as a user, enter your name, email address and click **Submit**. You will receive a confirmation email with a link to complete the registration process.

Register to Use OCF's Grants Po	tal
Register to	Use OCF's Grants Portal
	the contact information below. eive a confirmation email with a secure link to complete your registration process.
New User Accourt	at
First name:	
Last name:	
Email address:	
	(Your email address will be your Login ID)
Re-enter email:	
	Submit

If the system detects that you already have an account (see example below), please go back to the login screen and try logging in with your email and password. If you continue to have any issues, please contact OCF at grants@oregoncf.org for assistance.

egister to Use OCF's Grants Po	rtal	
Register to	Use OCF's Gra	ants Portal
CARGONIC CONTRACTOR AND	the contact information l eive a confirmation ema	below. il with a secure link to complete your registration process.
New User Accou First name:		
Last name:	Smith	
	janesmith@gmail.com (Your email address will be yo It appears you already ho information.	our Login ID) ave an account in our system. Please contact us for more
Re-enter email:	janesmith@gmail.com Submit	

If you've successfully completed step one of the registration process, you will see this screen:



Completing the Registration Process

Step two of the registration process asks for additional user details. When you're finished, click **Submit**. You will then be prompted to connect yourself to an organization (see **Part 3**).

Register to Use OCF's Grants Po	tal » New User Registration Part 2
New User R	egistration
	stration, please fill out the questions below about yourself. Once you have
completed this page,	you will be able to add your organization.
Persistration Car	la const
Registration Con	
First name:	John Q.
Last name:	ublic
Login ID:	ohnny5@gmail.com
Please enter your pa	ssword:
	This should be a minimum of 11 characters, with at least one number and one letter.
	Passwords are case sensitive.
Please retype your p	assword:
To change your secret	question, provide the answer to your current question above. Next, answer at least 1 new
	save. NOTE: answers are case sensitive.
Mother's maiden	
name	
City of birth	
Favorite color	
13	
Favorite food	filbert

PART 3: Connecting to an Organization

You must be connected to at least one organization to access the Grants Portal. First, **Search** to see if your organization exists in our system.

Connect	to an Organization
You must be con	nected to at least one organization to access the Grants Portal.
	earch below to see if your organization already exists in our system. If you find your ase click Connect me to this organization beside its name.
lf you do not find	your organization in our list, click Create Organization at the bottom of the page.
Apply for a	
Grant	
Search Orga	
Organization na Community Kids	me:

If your organization shows up in the results, click **Connect me to this organization**, then **begin an application** to continue. If the organization doesn't appear in the search results, click **Create Organization** (see next page for more information).

Organization name:							
Community Kids							
Organization Resul	lts						
ORGANIZATION NAME	ADDRESS		TAX ID				
Bay Area Hospital District	1775 Thompson Road , Coos Bay, C	DR 97420	93-0593249	Connec organiza	t me to this ation		
		1.00	(~	t me to this		
Community Kids	5135 NW Saint Helens Road , Portlar 97210	nd, OK	93-0842286	organiza			
Community Kids		na, Ok	93-0842286				
Community Kids		na, Ok	93-0842286				
Community Kids	97210	na, Uk	93-0842286				
	97210	TAX ID					
Organization Res	97210 Sults			organizo		nization	

Creating an Organization

If your organization is not listed in the search results, click **Create Organization** and you will be directed to this screen. When you've completed entering the information, click **Submit**.

	name:	
Community Kids		
EIN #:	12-3456789	
Street:	1234 Any Street	
City:	Portland	
State:	Oregon	,
Zip code:	97211	
Country:		,
Phone:	503-123-4567	
Email:	johnny5@gmail.com	
Website:	www.communitykids.org	

When you click **Submit**, the following confirmation screen will appear. From here, you can add yourself to another organization by clicking **Add Another Organization**, or click **Go to Grantee Dashboard** to apply for a grant.

	Organization Confirmed on, (Community Kids), has been created as a grantee.
Apply for a Grant	Application Status & History
and the second second second second second	dd yourself to another organization click the button below. You can also return to the oard, or get started on an application by clicking the Apply for a Grant tab in the
	Add Another Organization Go to Grantee Dashboard

PART 4: Grants Portal Homepage

The Grants Portal homepage is where you can get started on a grant application, manage your user profile (My Profile), continue applications in progress, and view applications that have been submitted.

To add another organization to your user account, click Add Organization (see Part 3 for more information).

If you're already connected to an organization and you're ready to get started, click Apply for a Grant.

If you've started an application and you're returning to continue your work, click **Continue Application in Progress**.

information.	is portal to apply for		oplication's status, and manage your organization's the Application Status & History tab below to	My Profile View your contact information and change password/security question. Step-by-Step Instructions
resume filling ou	ut your application.			Get help with navigating the system and application process.
Apply for a Grant	Application Status & History	Organization Profile	You can select a different organization from this dropdown if you are connected	Frequently Asked Questions Get any additional questions answered here.
Organizatio	n		to another organization	
The Oregon Comm	nunity Foundation	-		
The Oregon Co	mm <mark>u</mark> nity Foundation	Party Id 1		
If you wish to a	dd another organiza	tion to yo <mark>u</mark> r user ac	count, please click Add Organization	
	Add Organization			
Get Started				
You will be aske	ed to fill out an online	form and upload o	any required documents.	
Please review t	he guidelines and re	quired documents f	for the program(s) to which you are applying.	
	ng a new applicatior ase click Continue a	그 같은 것 같은 것 같은 것 같은 것 같은 것 같은 것 같이 없는 것 같이 없다.	y for a Grant. If you are continuing an application gress.	
	Apply for a Grant	Continue Application	n in Progress	

PART 5: Selecting a Grant Program & Determining Eligibility

Select a Grant Program

From this screen you can select the grant program to which you are applying. You can also make sure that you're connected to the correct organization for this application. When you're ready to move on, click **Next** at the bottom of the screen. You will be taken to the Pre-Qualifying Questions screen.

Select a	Grant Prog	ram
Apply for a Grant	Application Status & History	Organization Profile
eviewing your of application in the Community Kids Community Kids	our organization fro connection to the or ne meantime. Party I	m the following dropdown. Note: "Pending" status means we are rganization, which may take up to 48 hours. You may begin your d 253711
		nprofits whose work addresses one or more of
Douglas Cor Grants supp		f projects in Douglas County.
the second second second second second	5. C	dren's Fund of underserved youth in Baker county and
	Next	

Pre-Qualifying Questions

The Pre-Qualifying Questions screen determines your eligibility to apply for a grant. Answer the three questions, then click **Submit** to continue.

Apply for a Grant	Application Status & History	Organization Profile	
C 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			ntity, or an organization with a qualified fisca
sponsor?	Please select or	e 🔻	na na wana ka papaka waka 🗮 ka ing pakena ka pinen na kaona ka kaona ka na kaona ka
sponsor?	Please select or	e •	na na wana ka papaka waka 🗮 ka ing pakena ka pinen na kaona ka kaona ka na kaona ka
sponsor?	Please select or	e •	na na wana ka papaka waka 🗮 ka ing pakena ka pinen na kaona ka kaona ka na kaona ka
sponsor? Have you revie	Please select or ewed the requirement Please select or	e • nts for this grant p e •	na na wana ka papaka waka 🗮 ka ing pakena ka pinen na kaona ka kaona ka na kaona ka

PART 6: Filling out an Application

Project Name

Provide a name for your project that you can reference later. Click **Next** to continue.

Ballet studio improv	rements for kids programs	
Please enter the no	ame of your project to start the application process.	
4 characters used	l out of a maximum of 50 characters.	

Application Dashboard

Time to begin the application! From the Application Dashboard screen you can access any section of the application and upload required documents. You may click on any of the sections to get started.

In order to submit your application, you must complete all sections and attach all required documents. You will know this is the case when: 1.) sections 1-7 have received a green check mark, 2.) all required documents (Section 8) have a status of "Completed," 3.) the Review and Submit button is visible on the Application Dashboard.

Section 8 (Required Documents) will not show a green check mark. Instead, refer to the "Status" column in the table. Please note: Not all documents are mandatory (see "Mandatory" column).

	Dashboard				Organization	name
Community	•				-	
Ballet studio in	nprovements for kids programs 🤟				Project Name	s automatically)
Community G	Frant Program				(ID # generate	s dutomatically)
Please click on any of the sections to begin your application.			Grant program applying	n to which you ar		
and the second	our work, you must click Save Work on Current P vill know you have completed a section when i	Contraction of the second second second second second		n of the	appi/iii8	
marked with a rec	& Submit your application, each section must l exclamation point indicates that you have sta either a green checkmark nor a red exclamation.	rted but not comp	leted that sect	on. A		
Sector and a sector of the sec	nay log out and return to your application by cl rants Portal homepage or by visiting the Applic					
Section 1: 0	rganization Contact Information	Sectio	ns I-8 must b	e complete to	submit your app	l blication.
Section 2: O	Prganization Mission & Structure					
	Irganization Financials	A 💿	green check-i	mark = Compl	ete	
	roject Summary	• • A	red exclamati	ion point = Inc	omplete	
and the second se	roject Revenues	N	o icon = Secti	on has not bee	en started	
-	roject Expenditures					<i></i>
Section 7: Fr	Preview Application as PDF	table t		tatus" column)		of "Completed" in t ents are mandatory
	equired Documents				S	
DOCUMENT	DESCRIPTION	MANDATOR	r status	COMPLETED	D ACTIONS	
501c(3) tax- exempt letter	Documentation of IRS tax-exempt status. If using a fiscal sponsor, please include the organization's IRS documentation here.	Yes	Not Complete		Upload	
Board of directors list	The list should include affiliations and phone numbers, plus the skills and	Yes	Not Complete		Upload	

Section 1 of 8: Organization Contact Information

This is a basic overview of your organization. If you have a fiscal sponsor, please note it here. Any fields in **bold** are required fields, as is the case throughout the application. In order to save your work, you must click **Save Work on Current Page**.

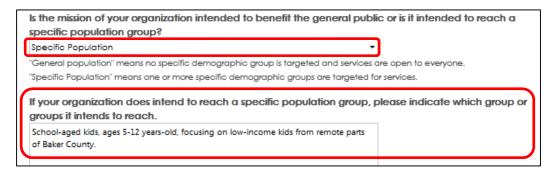
Organization name:	
Dance is Pure	
Alternate nome/Acro	anym:
DIP	
Employer ID number	IBNI:
21-0074910	
Fiscal sponsor name:	(if applicable)
Fiscal sponsor EIN:	
Mailing	(if opplicable)
Address:	PO Box 35
City:	Oceana
County:	Bridge County
State:	Oregon -
Zip code:	
ap code.	97000
Website:	www.dancelspure.org
Phone	
rnune.	503.555.5555
Executive Director or	Board Chair's Information:
Prefix	5-Ar-
	(Mr., Ms., etc.)
First name:	Jazzy
Last name:	Shoes
Title:	Director
Email:	johnnyS@gmail.com
	vork, you must click Save Work on Current Page at the bottom of each screen of the rious to return to the previous page or click Next to move to the next page.

Section 2 of 8: Organization Mission & Structure

Section 0 of 0. Organization Mission 9. Structure	
Section 2 of 8: Organization Mission & Structure	
Any fields in bold are required fields.	
Organization mission and primary activities:	
Our mission is to heal the world, make it a better place, for you and for me, and the entire human race.	
104 characters used out of a maximum of 500 characters.	
Year organization was established:	
1975	Full-time equivalent (FTE) measures a
Number of paid employees:	worker's involvement in a project.
10	An FTE of 1.0 means that the person is equivalent to a full-time worker,
Number of FTE (full time equivalent):	while an FTE of 0.5 signals that the worker is only half-time.
8.50	
Number of volunteers:	
12	
Number of board members:	
Number of board members: 12 Number of board members who contribute to appual budget:	
12 Number of board members who contribute to annual budget: 6	
12 Number of board members who contribute to annual budget: 6 Number of board meetings per year: Is the mission of your organization intended to benefit the general public or is	See next page if
12 Number of board members who contribute to annual budget: 6 Number of board meetings per year:	See next page if "Specific Population" i
12 Number of board members who contribute to annual budget: 6 Number of board meetings per year: Is the mission of your organization intended to benefit the general public or is specific population group?	open to everyone. See next page if "Specific Population" i chosen here.
12 Number of board members who contribute to annual budget: 6 Number of board meetings per year: Is the mission of your organization intended to benefit the general public or is specific population group? Please select one General population' means no specific demographic group is targeted and services are "General population" means one or more specific demographic groups are targeted for se How many unduplicated persons did your organization serve directly last year	open to everyone.
12 Number of board members who contribute to annual budget: 6 Number of board meetings per year: Is the mission of your organization intended to benefit the general public or is specific population group? Please select one 'General population' means no specific demographic group is targeted and services are 'specific Population' means one or more specific demographic groups are targeted for set How many unduplicated persons did your organization serve directly last year estimation.)	open to everyone.
12 Number of board members who contribute to annual budget: 6 Number of board meetings per year: Is the mission of your organization intended to benefit the general public or is specific population group? Please select one "General population" means no specific demographic group is targeted and services are "Specific Population" means one or more specific demographic groups are targeted for settimation.) 4,000	open to everyone.
12 Number of board members who contribute to annual budget: 6 Number of board meetings per year: Is the mission of your organization intended to benefit the general public or is specific population group? Please select one "General population" means no specific demographic group is targeted and services are "Specific Population" means one or more specific demographic groups are targeted for settimation.) 4,000	open to everyone.
12 Number of board members who contribute to annual budget: 6 Number of board meetings per year: Is the mission of your organization intended to benefit the general public or is specific population group? Please select one "General population" means no specific demographic group is targeted and services are ispecific Population" means one or more specific demographic groups are targeted for set How many unduplicated persons did your organization serve directly last year 4,000 How many persons do you expect to serve this year? 5,000	open to everyone.
12 Number of board members who contribute to annual budget: 6 Number of board meetings per year: Is the mission of your organization intended to benefit the general public or is specific population group? Please select one "General population" means no specific demographic group is targeted and services are "Specific Population" means one or more specific demographic groups are targeted for set How many unduplicated persons did your organization serve directly last year 4,000 How many persons do you expect to serve this year? 5,000 Counties where services are provided:	open to everyone.
12 Number of board members who contribute to annual budget: 6 Number of board meetings per year: Is the mission of your organization intended to benefit the general public or is specific population group? Please select one "General population" means no specific demographic group is targeted and services are "Specific Population" means one or more specific demographic groups are targeted for set How many unduplicated persons did your organization serve directly last year estimation.) 4,000 How many persons do you expect to serve this year? 5,000	open to everyone.
12 Number of board members who contribute to annual budget: 6 Number of board meetings per year: Is the mission of your organization intended to benefit the general public or is specific population group? Please select one "General population" means no specific demographic group is targeted and services are: "Specific Population" means one or more specific demographic groups are targeted for set How many unduplicated persons did your organization serve directly last year 4,000 How many persons do you expect to serve this year? 5,000 Counties where services are provided: Statewide Out of State Baker	open to everyone.
12 Number of board members who contribute to annual budget: 6 Number of board meetings per year: Is the mission of your organization intended to benefit the general public or is specific population group? Please select one 'General population' means no specific demographic group is targeted and services are "specific Population' means one or more specific demographic groups are targeted for settimation.) 4000 How many persons do you expect to serve this year? 5,000 Counties where services are provided: State wide Baker Benton Clackamas	open to everyone.
12 Number of board members who contribute to annual budget: 6 Number of board meetings per year: Is the mission of your organization intended to benefit the general public or is specific population group? Please select one 'General population' means no specific demographic group is targeted and services are: 'Bpecific Population' means one or more specific demographic groups are targeted for se How many unduplicated persons did your organization serve directly last year 4,000 How many persons do you expect to serve this year? 5,000 Counties where services are provided: Statewide Out of State Baker Benton	open to everyone.
12 Number of board members who contribute to annual budget:	open to everyone.
12 Number of board members who contribute to annual budget: 6 Number of board meetings per year: Image: Imag	open to everyone.

Section 2 (Continued)

If "Specific Population" is chosen, a new text box appears asking you to provide more information about who you're serving.



Section 3 of 8: Organization Financials

Section 3 asks for financial information about your organization. We will request project-specific information in later sections.

nancials for last yea	ar and this vear:		
	CURRENT YEAR BUDGET	CURRENT YEAR ACTUALS TO PREVIOUS Y DATE ACTU	2002220
Organization Revenues	\$10,000.00	\$0.00 \$10.00	00.00 Edit
Organization Expenditures	\$150,000.00	\$90,000.00 \$100,00	00.00 Edit
Operating Surplus/Deficit	\$0.00	(\$5,000.00) \$10,00	00.00 Edit
		nditure figures, please define the time period for "p	revious
n connection with th	ie above revenue/exper	nditure figures, please define the time period for "p	revious
/ear" (e.g. 7/1/2014-(6/30/2015):		
1/1/2015 - 12/31/2015			
	ing shortfall, please explo	al explanation, or if either the current year or previo ain.	ous year
epresents an operat sreakdown of organi able below by clicki ource that is not apj	ing shortfall, please explo ization revenue for the la ng Edit to the right of eac plicable to your organiza		vear in the evenue se leave
epresents an operat Breakdown of organi able below by clicki ource that is not apj t blank. If the "Other"	ing shortfall, please explo ization revenue for the la ng Edit to the right of eac plicable to your organiza	ain. st year: Please enter your revenue sources for last y ch row. Then click Save . If you reach a row with a r tion (i.e., zero dollars come from that source), plea	vear in the evenue se leave e them all
epresents an operat reakdown of organi able below by clicki ource that is not apj t blank. If the "Other" n that one row.	ing shortfall, please explo ization revenue for the la ng Edit to the right of eac plicable to your organiza	ain. st year: Please enter your revenue sources for last y ch row. Then click Save . If you reach a row with a r tion (i.e., zero dollars come from that source), plea than one revenue source, go ahead and combin	vear in the evenue se leave e them all
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epresents an operat reakdown of organi able below by clicki ource that is not app t blank. If the "Other" in that one row. REVENUE SOURCE Memberships : Individual Contribution	ing shortfall, please explo ization revenue for the la ng Edit to the right of eac plicable to your organiza category includes more	ain. st year: Please enter your revenue sources for last y ch row. Then click Save. If you reach a row with a r tion (i.e., zero dollars come from that source), plea than one revenue source, go ahead and combin AMOUNT \$50,000.00	vear in the evenue se leave e them all Edit Edit
epresents an operat Breakdown of organi able below by clicki ource that is not apj t blank. If the "Other" in that one row. REVENUE SOURCE Memberships : Individual Contribution Earned Income (Ticket	ing shortfall, please explo ization revenue for the la ng Edit to the right of eac plicable to your organiza ' category includes more s: sales, fees for service, etc.):	ain. st year: Please enter your revenue sources for last y ch row. Then click Save. If you reach a row with a r tion (i.e., zero dollars come from that source), plea than one revenue source, go ahead and combin AMOUNT \$50,000.00	ear in the evenue se leave e them all Edit Edit Edit Edit
epresents an operat Preakdown of organi able below by clicki ource that is not app t blank. If the "Other" in that one row. REVENUE SOURCE Memberships : Individual Contribution Earned Income (Ticket Fundraising benefits:	ing shortfall, please explo ization revenue for the la ng Edit to the right of eac plicable to your organiza ' category includes more s: sales, fees for service, etc.):	ain. st year: Please enter your revenue sources for last y ch row. Then click Save. If you reach a row with a r thion (i.e., zero dollars come from that source), plea than one revenue source, go ahead and combin AMOUNT \$50,000.00 \$20,000.00	ear in the evenue se leave e them all Edit Edit Edit Edit
epresents an operat able below by clicki ource that is not apy t blank. If the "Other" in that one row. REVENUE SOURCE Memberships : Individual Contribution Earned Income (Ticket Fundraising benefits: Corporate/business co	ing shortfall, please explo ization revenue for the la ng Edit to the right of eac plicable to your organiza ' category includes more s: sales, fees for service, etc.):	ain. st year: Please enter your revenue sources for last y ch row. Then click Save. If you reach a row with a r thion (i.e., zero dollars come from that source), plea than one revenue source, go ahead and combin AMOUNT \$50,000.00 \$20,000.00	Vear in the evenue se leave e them all Edit Edit Edit Edit Edit Edit
epresents an operat Preakdown of organi able below by clicki ource that is not app t blank. If the "Other" in that one row. REVENUE SOURCE Memberships : Individual Contribution Earned Income (Ticket Fundroising benefits: Corporate/business co Government support:	ing shortfall, please explo ization revenue for the la ng Edit to the right of eac plicable to your organiza ' category includes more s: sales, fees for service, etc.):	ain. st year: Please enter your revenue sources for last y ch row. Then click Save. If you reach a row with a r tion (i.e., zero dollars come from that source), plea than one revenue source, go ahead and combin AMOUNT \$50,000.00 \$20,000.00 \$20,000.00 \$30,000.00	Vear in the evenue se leave e them all Edit Edit Edit Edit Edit Edit
epresents an operat reakdown of organi able below by clicki ource that is not apj t blank. If the "Other" in that one row. REVENUE SOURCE Memberships : Individual Contribution Earned Income (Tickef Fundraising benefits: Corporate/business co Government support: Foundation support:	ing shortfall, please explo ization revenue for the la ng Edit to the right of eac plicable to your organiza ' category includes more s: sales, fees for service, etc.):	ain. st year: Please enter your revenue sources for last y ch row. Then click Save. If you reach a row with a r tion (i.e., zero dollars come from that source), plea than one revenue source, go ahead and combin AMOUNT \$50,000.00 \$20,000.00 \$20,000.00 \$30,000.00	ear in the evenue se leave e them all Edit Edit Edit Edit Edit Edit

Organizations operate on either a calendar year (January 1 – December 31) or fiscal year (July 1 – June 30). Please show us what "current" and "previous" year means to your organization by entering date ranges (month/day/year) into these two fields.

Click **Edit** to enter amounts, then click **Save**.

Section 3 (Continued)

.lst of five single largest contributors from last year's revenue agencies, businesses, foundations, or other groups. Individua necessary.			Click Edit and a text field wi
SOURCE (CLICK EDIT TO ADD INFORMATION)	AMOUNT		appear to enter revenue
Foundation # 1	\$5,000.00	Edit	source and amount. Click
Foundation # 2	\$5,000,00	Edit	Save.
		Edit	
		Edit	
		Edit	
	\$10,000.00		
Please list grant applications to OCF, approved or declined, approved, please include amounts awarded.	We prefer the list		
2014 - QCF, Community Grant Program (approved, \$5,000)			format seen here.

Section 4 of 8: Project Summary

Section 4 of 8: Project Summary		
Any fields in bold are required fields.		
Project contact person's information:		
First name: John		
Last name: Public	If the project contact is differ	rent than the
Title: Reading Specialist	executive director or board	chair
Phone: 503-222-5555	provided in Section 1, please	e enter it here.
(300e-300e-3000x)		
Email: john@gmail.com		
Project description (one sentence):		
to support kids living in remote Baker County, ages 5-12, t programming located at the Baker Community Center	hrough after-school literacy	
137 characters used out of a maximum of 500 characte	15.	
Key project components:		
1 After-school literacy classes for 1 hour taught by certifie 2 Provide snacks and other homework help.	d reading specialists	
3. Provide additional reading resources for parents		
4. Etc. 5. Etc.		
		Please note: this population question is
		specific to the project for which you are requesting funds, not your overall
A brief snapshot of your project, including measurable	outcomes.]	organization. The answer may look
194 characters used out of a maximum of 1000 charact	ers.	different from what you shared in Section
How many persons will benefit directly from th	e project?	2: Organization Mission & Structure.
150		
Is the project for which you are requesting fun intended to reach a specific population grou	nds intended to benefit the general public, or is it	
Specific Population	-	
"General population" means no specific demographic (group is torgeted and services are open to everyone.	
"Specific Population" means one or more specific dema	graphic groups are targeted for services.	
If the project is intended to reach a specific p it is intended to reach.	opulation group, please indicate which group or g	roups
School-aged kids, ages 5-12 years-old, focusing on low-inc	come kids from remote parts of	
Bakar County.		
In what counties will services be provided thro Baker	a Shrings had not a	
Benton		
Clackamas Clark		
Ciatsop		
Columbia Coos		
Crook		
Curry	-	
Deschutes To select more than one, hold down your ctri key and o		
Total project hurdest	nanne mannaith ann an 1970 ann an 1970 ann a' 1970	
Total project budget: \$30.000.00		
Total amount requested:		
\$10,000.00		

Section 5 of 8: Project Revenues

PLEASE NOTE: You must complete this section (Section 5) before you begin Section 7: Project Narrative Questions.

To begin Section 5, please indicate whether this is a multi-year request to OCF. If this a new multi-year request, please select "Yes." If you have been invited to reapply for year two or three of your project, please select "Yes."

If you're not sure whether the program to which you are applying accepts multi-year requests, please visit oregoncf.org to review the program's application guidelines.



If you select "No" from the dropdown, please complete the proposed sources of funding table and the remaining questions on the screen. See page 16 for details.

If you select "Yes" an additional table and set of questions will appear as follows:

Year 1 \$30,000.00 Ed Year 2 \$20,000.00 Ed Year 3 Ed \$50,000.00 \$15,000.00 If you are asking for multi-year support from OCF, is this current application a new request, or have you been invited by OCF to reapply for funding for year two or three of the project? (If you are not sure whether you have been invited to reapply, please review your award letter from the previous year.)	Yes		•	
Year 1 \$30,000.00 Ed Year 2 \$20,000.00 Ed Year 3 Ed \$50,000.00 \$15,000.00 If you are asking for multi-year support from OCF, is this current application a new request, or have you been invited by OCF to reapply for funding for year two or three of the project? (If you are not sure whether you have been invited to reapply, please review your award letter from the previous year.)			for each year, as well as the amount request	ed each yea
Year 2 \$20,000.00 \$5,000.00 Ed Year 3 Ed \$50,000.00 Ed \$50,000.00 \$15,000.00 Ed If you are asking for multi-year support from OCF, is this current application a new request, or have you been invited by OCF to reapply for funding for year two or three of the project? (If you are not sure whether you have been invited to reapply, please review your award letter from the previous year.)	YEAR	PROJECT BUDGET	AMOUNT REQUESTED FROM OCF	ACTIONS
Year 3 Ed \$50,000.00 \$15,000.00 If you are asking for multi-year support from OCF, is this current application a new request, or have you been invited by OCF to reapply for funding for year two or three of the project? (If you are not sure whether you have been invited to reapply, please review your award letter from the previous year.)	Year 1	\$30,000.00	\$10,000.00	Edit
\$50,000.00 \$15,000.00 If you are asking for multi-year support from OCF, is this current application a new request, or have you been invited by OCF to reapply for funding for year two or three of the project? (If you are not sure whether you have been invited to reapply, please review your award letter from the previous year.)	Year 2	\$20,000.00	\$5,000.00	Edit
If you are asking for multi-year support from OCF, is this current application a new request, or have you been invited by OCF to reapply for funding for year two or three of the project? (If you are not sure whether you have been invited to reapply, please review your award letter from the previous year.)	Year 3			Edit
been invited by OCF to reapply for funding for year two or three of the project? (If you are not sure whether you have been invited to reapply, please review your award letter from the previous year.)		\$50,000.00	\$15,000.00	
The been invited to reapping	oeen invited l	by OCF to reapply for funding for y	year two or three of the project? (If you are no ase review your award letter from the previous	ot sure

Click **Edit** to share an annual budget breakdown of your project (cost per year) along with the amount you're requesting from OCF in each year.

If you've been invited to reapply for year two or three of your project, please include project budgets from prior years and amounts awarded by OCF.

Section 5 (Continued)

In the proposed sources table below Click **Edit** to add a revenue source and amount. Select **Yes** or **No** to indicate whether it's been secured. *Please Note: a pledge from an individual is not considered secured until it is received.*

Please list all proposed sources of funding. You may include the value of in-kind support. Please indicate whether or not the funding has been secured. Note: For multi-year requests, please enter a single year of project revenues (the year in which the grant would be awarded) and upload a full, multi-year budget when you reach Section 8 of this application. REVENUE SOURCE AMOUNT SECURED? ACTIONS Main Street Grant \$2,500.00 No Edit | Remove \$10,000.00 No Umpqua Bank Edit | Remove Jan & Stu Smith \$60,000.00 Yes Edit | Remove Capital Campaign \$10,000.00 No Edit | Remove Foundation #1 \$10,000.00 Yes Edit | Remove \$5,000.00 No Edit | Remove Fundraiser \$97,500.00 Add

(Click the "add" link to create new rows in the table.)

If your project revenues require additional explanation, please offer it here. The fundraiser is scheduled in a couple months' time. Last year's fundraiser netted \$3,500

90 characters used out of a maximum of 750 characters.

You may use this text field to provide details about your revenue sources. This might include:

- pledges
- anticipated fundraising timelines
- proposals actively being reviewed by other funders

Section 6 of 8: Project Expenditures

Below is a sample of a complete project budget expense table.

Any fields in bold are required fields. Please list all budgeted expenditures. Project expenses list Please click Add if you need to include more line items.	ed here should correlate to	project activities.	
Note: For multi-year requests, please enter a single year of would be awarded) and upload a full, multi-year budget w	Contract of the second second	n which the grant	Click Edit to add an expen
EXPENSE (CLICK EDIT TO ADD INFORMATION)	AMOUNT	ACTIONS	item and amount. Click Sa v
Cubicles, mirrors, barres	\$6,000.00	Edit Remove	
Bathroom upgrades	\$10,000.00	Edit Remove	
HVAC system, hot water heater	\$5,500.00	Edit Remove	
Floors, walls, windows, ADA donors	\$21,000.00	Edit Remove	
Appliances, furniture, signage	\$10,000.00	Edit Remove	
Security system	\$1,000.00	Edit Remove	
Professional fees	\$5,000.00	Edit Remove	
Permit fees	\$10,000.00	Edit Remove	
Miscellaneous	\$1,000.00	Edit Remove	
Increased rent/utilifies - one year	\$28,000.00	Edit Remove	
	\$97,500.00	Add	
Please describe how OCF funds would be allocated for t	10 10 1 10 10 10 10 10 10 10 10 10 10 10		
OCF's funds will be used for bathroom upgrades to make them ADA	accessible.	items i	identify which of the line n the table above you are OCF to fund specifically.
75 characters used out of a maximum of 750 characters.			
f your project expenses require additional explanation, ple	ase offer it here.		
Miscellaneous expenses include the following: toilet paper, towels, o supplies, etc.	leaning	.	
		under	e are any line items that fall a broad category (e.g.,
		Miscoll	aneous) please provide

Section 7 of 8: Project Narrative Questions

PLEASE NOTE: You must complete Section 5 before you begin Section 7: Project Narrative Questions.

Below are sample project narrative questions. Each grant program has its own unique set of questions.

If you've been invited to reapply for funding in year two or three of your project, you will be asked a set of questions about your progress to-date and upcoming plans. *Please be sure to complete Section 5 first to get the right set of questions*.

The system will warn you before it times out; however, we recommend preparing and saving your answers in another program (i.e. Microsoft Word).

Please note: Most formatting from other systems (i.e. Microsoft Word) doesn't translate well when you copy & paste (e.g. bullets, bold text, quotation marks, apostrophes, etc). **Please review your work carefully if you copy & paste to make sure that the system has saved your answers the way you want them to be presented.** The "Preview Application as PDF" on the Application Dashboard will help you with this task.

Section 7 of 8: Project Narrative Questions	
Please complete Section 5: Project Revenues before beginning Section 7:	7: Project Narrative questions.
The answers you provide in Section 5 may impact which set of narrative que	estions you will be asked.
Any fields in bold are required fields.	
Tell us about your organization. What are your mission and track record? I facts and accomplishments that best define your organization.	Highlight two or three key
Since 2009, DIP has offered (via scholarships and sliding-scale tuition) dance	
programs for low-income children in the North Sea neighborhood whose families and schools cannot provide such opportunities. Through dance, we promote the physical, artistic and emotional health of youth, inspiring them to achieve their goals. Serving more than 600 children per year, DIP has offered year-round dance classes in studio space at the Community Cultural Center (CCC) and through after-	Please note the character limit for eac question.
school dance programs at three schools.	You can track how much you've writte with the character count just below th
Parent surveys created and analyzed by Pacific Universitys psychology school in 975 characters used out of a maximum of 1500 characters.	text box.
Since 2012, the local school district has eliminated or significantly reduced art & PE due to state budget cuts. And many children are excluded from private dance classes due to the high cost (\$200-\$400 per term). Our sliding-scale tuition-based dance program would be the only such program in North Sea.	
We have outgrown the studio space we lease at CCC, with many classes at our carrying capacity of 10-12 students per class. This is due to the studios small size	
carrying capacity of 10-12 students per class. This is due to the studios small size and increased demand. And many of our after-school ballet students are growing beyond the skill-level of the program at the school but we have no additional	
carrying capacity of 10-12 students per class. This is due to the studios small size and increased demand. And many of our after-school ballet students are growing	essing this need? What is your

Section 8: Required Documents

At the bottom of the Application Dashboard is the Required Documents table. All mandatory documents must be uploaded in order to submit your application (see "Mandatory" column). If a document is not mandatory, you have the option of adding it, as applicable.

Section 8: Red	quired Documents				
DOCUMENT	DESCRIPTION	MANDATORY	STATUS	COMPLETED	ACTIONS
501c(3) Tax-Exempt Letter	Documentation of IRS tax-exempt status.	Yes	Completed	11/19/2015	Upload
Board of Directors List	The list should include affiliations and phone numbers, plus the skills and experience each contributes.	Yes	Completed	11/19/2015	Upload
Organization Budgtet for Current Year	Please submit your organization's current year budget on one page and detail both the revenues and expenditures to-date.	Yes	Completed	11/19/2015	Upload
Organization Actuals for Past Year	Please submit your organization's past year actuals on one page with detailed revenues and expenditures.	Yes	Completed	11/19/2015	Upload
Financial Statements (if available)	Most recent audited financial statement if available, or end-of-year financial statements for last year.	No	Completed	11/19/2015	Upload
Multi-Year Project Budget (if applicable	Please include if you're requesting support for multiple years of funding (includes renewal applicants).	No	Not Complete	7	Upload
Additional Project Info (optional)	Could include a one-page project graphic, schematic or timeline.	No	Not Complete		Upload

When a document has been successfully uploaded, "Not Complete" will change to "Completed"

To upload a document, click **Upload** in the far right column.

This is the screen that you will see:

tion Organization Profile				
And a second sec	n			
TINFO (OPTIONA	AL)			
age project graphic	schematic or tin	neline		
		4520 BAD-5		
rt × Remove				
	bage project graphic,	bage project graphic, schematic or tim	page project graphic, schematic or timeline.	bage project graphic, schematic or timeline.

PART 7: Process for Uploading Documents

Step I: Click **Select** to find your document.

Step 2: Click **Upload** to add your document. If you need to replace your document, click **Remove** and start at step 1 again.

Step 3: Click **Back to Requirements** to return to the Application Dashboard and Required Documents table to continue uploading all of your documents.

STAFF RESUMES OR BIOS	
Description Please include concise resumes or bios for key staff pers	sons.
File Name CK Staff Resumes and Bios.docx Remove	If you need to remove or replace your document, click here.
3 Back to Requirements	

PART 8: Completing an Application

When you've completed all sections of the application and uploaded all required documents, the screen will look like the one below. Each section will have a green check mark, all mandatory documents will be listed as "Completed," and a new **Review and Submit** button will appear in the middle of the screen.

If you have any sections marked with a red exclamation point, it means you have not completed that section. Please note that all questions in bold are required questions; please check your work thoroughly on each screen.

Click **Review and Submit** to proceed to the signature page and submit your application.

Application D	ashboard				
Community Kids					
Ballet studio impr	ovements for kids programs				
Community Gran	t Program				
Please click on any	of the sections to begin your application	le:			
and the second se	work, you must click Save Work on Curr know you have completed a section w				
ma <mark>r</mark> ked with a red e	Submit your application, each section r xclamation point indicates that you hav her a green checkmark nor a red exclar	e started but not c	ompleted that	section. A	
States and a state of the state	y log out and return to your application nts Portal homepage or by visiting the Ap				
Section 3: Orgo Section 4: Proje Section 5: Proje Section 6: Proje Section 7: Proje	ct Revenues ct Expenditures ct Narrative Questions	w & Submit			
DOCUMENT	DESCRIPTION	MANDATORY	STATUS	COMPLETED	ACTION
501c(3) Tax-Exempt Letter	Documentation of IRS tax-exempt status.	Yes	Completed	11/19/2015	Upload
Board of Directors List	The list should include affiliations and phone numbers, plus the skills and experience each contributes.	Yes	Completed	11/19/2015	Upload

PART 9: Reviewing and Submitting an Application

In order to submit an application, you must first certify that you meet each of the requirements below by checking the boxes to the left. You still have the opportunity to edit your application by clicking **Return to Application Dashboard**. When you're ready to submit, enter your name, today's date, then click **Submit Application**.

Please revie enter your si	and Submit Application w your application by clicking Preview Application as PDF. If you're ready to submit, please gnature and date below and click Submit Application. If you need to go back and edit yo please click Return to Application Dashboard.
With my sig	nature, I certify the following:
The abov	ve information is correct;
	norized by the governing board of this organization to submit this grant application regon Community Foundation;
	nization is in good standing with the IRS, retains its 501(c)(3) tax exempt status, and classified as a public charity and not a private foundation;
genderi	nization does not discriminate on the basis of ethnicity, color, religion, gender, dentity or expression, sexual orientation, physical circumstances, age, status as n, or national origin.
Applicant S	ignature:
Jane Smith	
	Date: 4/13/2015
	Submit Application Preview Application as PDF Return to Application Dashboard

When you have successfully submitted your application, this is the screen you will see. You will be sent an automatically-generated confirmation email.

Apply for a Grant	Application Status & History	Organization Profile
Thank Yo	u!	
Your applicatio	n has been submitte	d.
		ds, please click View Application as PDF. To access this and any othe is portal, click Application History & Status in the navigation tab
	e in touch if followup .org for information c	is required. Please refer to the grant program's website at about timelines.
If you have any	questions or concer	ns, please contact OCF at grants@oregoncf.org.
	View Apolication	as Poff

PART 10: Accessing applications (submitted or in process)

At any point you may access your applications, both those that you're still working on ("In Process") and those that you've submitted ("Received" or "Under Review"). Applications listed as "In Process" can be edited by clicking **Details**. This will take you back to the Application Dashboard (see page 9). Applications listed as "Received" or "Under Review" are locked from further editing. You have the option of reviewing and printing a copy of your submitted application by clicking **View PDF**.

Ways to search for an application

If you are working on applications for multiple organizations, select the applicable organization from the dropdown. You can also search for an application by selecting a date range (Duration) and by keyword (e.g. project name, grant program) by clicking **Advanced Search**.

Application Status & History This page shows the status of your organization's grant application(s) in real time. Please do not consider any application approved until you receive written notification from The Oregon Community Foundation. If you did not submit your application through this website, please email grants@oregoncf.org to check its status. If you are in the middle of completing a grant application, please note that it is not complete until you upload all required documents. If you have not yet uploaded the required documents for one of your applications, you can click the corresponding "Upload" link.
Apply for a Grant Application Organization Search Duration: Duration: Last 6 Months •
Organization Community Kids 211info Community Kids Exact Match Search Duration: Last 6 Months
My Applications PROJECT PROGRAM APPLICATION AMOUNT APPROVED STATUS ACTIONS VIEW NAME REQUESTED
Community Kids after-school Ben Serafin literacy program Fund - 232936
TEST Community Kids after-school literacy program - 232935 Small Arts & Culture Grants 4/1/2015 \$15,000.00 In Process