

# **Opportunity Grant Application 2026**

#### Section 1

#### **General Information**

- 1. \*Name of Agency
- 2. \*Address
- 3. Mailing Address, if different
- 4. \*Main Phone Number
- 5. \*Website
- 6. \*Name of Primary Contact for this Grant
- 7. \*Email Address
- 8. \*Cell Phone Number

### **Board information**

- 1. \*Name of Board President/Chair
- 2. \*Email Address
- 3. \*Cell Phone Number
- 4. \*Name of Executive Director
- 5. \*Email Address
- 6. \*Cell Phone Number

# **Upload the Following:**

- 1. \*List of your Board of Directors with position, years of service and <u>residing city</u> for each member, including Honorary and Advisory Members.
- 2. \*Your agency's high-resolution logo, jpg or png format.

#### Section 2

### **Non-Profit Information**

- 1. \*Provide your Tax-Exempt number and identify the number of years held.
- 2. \*Number of Full-Time Employees.
- 3. \*Number of volunteers, per year.
- 4. \*What percentage of the people served by your agency are children ages 0 to 18 years of age?
- 5. \*What percentage of these children identified above reside in Pima County?

### **Section 3**

# **Demographics**

Provide the demographics for the children served by your agency. This information is critical for Angel Charity to seek grants and donors on behalf of your request.

1. GENDER
Male %
Female %
2. HISPANIC ORIGIN
NOT of Hispanic, Latino or Spanish origin %
Mexican, Mexican American, Chicano %
Puerto Rican %
Cuban %
3. RACE
American Indian/Alaskan Native %
Asian %
Black or African American %
Native Hawaiian or Other Pacific Islander %
White, Caucasian %
Two or more races %
Other %
4. SOCIO ECONOMIC STATUS
Percentage of children served by your agency on Free and Reduced Lunch %

### Section 4

# **Financial Status of your Agency**

- 1. \*Provide a breakdown of your main sources of revenue:
  - a. Government %
  - b. Individual Giving %
  - c. Foundations %
  - d. Corporate Funding %
  - e. Earned Income %
  - f. Annual Fundraising Events/Campaigns % Name and dates of Events/Campaigns:
  - g. Other % Explain:
- 2. \*Describe any major increases or decreases in funding your agency has experienced in the last two years.

# Upload the following:

- 1. \*Copy of IRS Tax Determination Letter
- 2. \*Annual Report
- 3. \*Income Tax Returns from the Last Two Years
- 4. \*Financial Statements and Balance Sheet for Current Year to Date
- 5. \*Budget to Actual Financial Statement for Current Year
- 6. \*Most Recent CPA Audit or Reviewed Financial Statement for the last two years.

#### **Section 5**

# **Angel Charity Grant Request**

- 1. \*Describe in 250 words or less, the services your agency provides to the community.
- 2. \*List the amount of funding you are requesting from Angel Charity. The total must be between \$10,000 and \$75,000.
- 3. \*Describe in 250 words or less, how the funds from this grant will be used to serve the needs of children in Pima County.
- 4. \*What percentage of the people who are directly served by this grant are children 0-18 years of age?
- 5. \*What percentage of children served by this grant reside in Pima County?
- 6. \*How many children will be served from this grant request?

a. Purchase Equipment/Personal Property/Asset \$

- 7. \*Has your agency (or a predecessor agency) applied for a grant from Angel Charity before?
  - a. If so, in what years, the amounts, and the purpose? Indicate any which Angel funded.
- 8. \*Select the sub-sections that pertain to your request and provide a breakdown of where the funding from this grant will be spent:

	h Dragram Evnances C				
	<ul><li>b. Program Expenses \$</li></ul>				
9.	*Provide a list of naming opportunit	ties for Ange	l Charity and Dono	r Recognition if y	our grant is

- selected (i.e., rooms, programs, publication, website, and social media posts)
- 10. \*List other sources or entities your agency has requested funding from for this project/program and the results of these requests.
- 11. \*If the request to Angel Charity does not fund 100% of your project/program, how will you fund the balance remaining?

#### **Section 5A**

### **Details of the Grant Request**

# A. PURCHASE OF EQUIPMENT/PERSONAL PROPERTY/ASSET

Note: If the equipment/personal property/asset is part of a construction project that requires a building permit, the permit must be secured and submitted to Angel Charity before the funding will be distributed.

- 1. \*Explain how the equipment/personal property/asset requested will benefit your agency and the children that you serve. (250 words maximum)
- 2. \*Provide the percentage of time the equipment will be utilized by children and by adults.
  - a. Children %
  - b. Adults %
- 3. \* List all equipment/personal property/assets being requested.
  - a. List of equipment/personal property/assets and purpose
  - b. Itemized Purchase Price \$
- 4. \*Will this request for equipment/personal property/asset require a permit? Y/N If yes, explain why a permit is needed for this specific request from Angel.
- 5. \*Will this request be part of a larger project? Y/N
  - a. If yes, describe the larger project
  - b. Will a permit be required for the larger project? Y/N
- 6. \*List the companies from which price sheets, proposals or bids were acquired as part of the competitive bidding process.

### Upload the following:

- 1. \*A copy of the chosen proposal, price sheet or bid.
- 2. Permits, if available

#### **Section 5B**

# **B. PROGRAM EXPENSES**

- 1. \*Explain how the program you plan to offer will benefit your agency and the children that you serve. (250 words maximum)
- 2. \*Provide the percentage of the program that will serve children and/or adults.
  - a. Children %
  - b. Adults %
- 3. \*Program requests must be for no more than one year. Identify the length of the requested program.
- 4. \*Explain the future of this program once Angel funding ends.

### Upload the following:

1. \*Program budget for the term of the request and itemize the expenses to be covered with Angel funding.

#### **Section 6**

#### **CERTIFICATION OF INFORMATION AND AGREEMENTS**

# \*We certify:

- 1. The information provided in this application is true and accurate to the best of our knowledge.
- Our agency does not discriminate against any person, organization or entity on the basis of race, gender, religion, sexual preference, age, pregnancy, marital status, veteran or military status, genetic information, disability, or national origin. Our agency shall at all times comply with applicable laws, rules and regulations prohibiting discrimination and harassment.
- 3. Our Executive Director and our Board President/Chair have reviewed this application prior to submission and that, to the best of their knowledge, the information presented is correct, true and reliable.

\*We further understand and agree that if our agency is chosen as an Angel Charity Beneficiary:

- 1. A member of our Board/Staff will report at Angel Charity's General Membership Meetings if requested.
- 2. If a permit is required, the permit must be secured and submitted to Angel Charity before the funding will be distributed.
- 3. Our agency will provide a year-end report summarizing the accomplishments/impact of this grant and the actual number of children served.
- 4. Funding for Opportunity Grants will be disbursed by May 2026, or once a permit is secured as noted above.