

# Livestrong Solution Grants 2022

---

## *Livestrong Foundation*

### *Grantseeker Eligibility*

---

#### **BEFORE YOU BEGIN, PLEASE NOTE:**

- Expression of Interest application will be accepted until 11:59 p.m. CST on February 13, 2022. Late or incomplete submissions will not be accepted. We encourage early submissions, especially if you anticipate needing any technical support from the Foundation.
- Please answer all questions completely and concisely being mindful of character limits, which do include spaces and punctuation.

#### **Eligibility Criteria for Grantseekers\***

- Organizations must be based in the U.S. with a valid Tax ID # and U.S bank account.
- Organizations must be doing business for at least one year (from January 1, 2021) and be able to demonstrate how they currently generate impact.
- Projects must be aligned with the Livestrong mission, Livestrong purpose statement, and focus areas/funding priorities.
- Projects must have measurable outcomes, and be sustainable for the duration of the grant.
- Projects must not replicate existing Livestrong programs. For more information about current Livestrong programs, see here.
- There are no restrictions for reapplication for both successful and unsuccessful grant seekers.

#### **Choices**

I acknowledge the eligibility criteria and confirm my organization & project meet these criteria.

### *Organization Information*

---

#### **First Time Applying\***

Is this the organization's first time applying for a Livestrong Solution Grant?

Please note: There are no restrictions for reapplication for both successful and unsuccessful grantseekers.

#### **Choices**

Yes

No

## Organization Mission Statement\*

*Character Limit: 1500*

## Organization Board of Directors\*

Please include full names and professional affiliations

*Character Limit: 1500*

## What is your Organization Type?\*

Select all that apply

### Choices

Community/public health organization

Educational institution/organization

For-profit

Independent healthcare provider

Non-profit

Non-profit (with 501c3 status)

Other

Religious institution

Technology industry

Transportation sector

## Organization Type - Other

If you selected Other, please indicate your Organization Type here.

*Character Limit: 100*

## *Expression of Interest Project Questions*

---

### Focus Area Alignment\*

Please select which of Livestrong's focus areas most closely align with your project.

#### Choices

Nutrition

Mental Health

### Total Funding Amount Requested - in USD\*

Please state the total funding amount requested for the whole project duration. Requests should not exceed \$50,000 or one year in length.

*Character Limit: 20*

### Total Project Budget - in USD\*

Please state the total project amount for the whole project duration.

*Character Limit: 20*

**Funding Start Date\***

Please note: The funding start date for all projects must be on/after April 1st, 2022

*Character Limit: 10*

**Funding End Date\***

*Character Limit: 10*

**Project Name\***

*Character Limit: 100*

**Project Description and Purpose\***

Please describe the project and its purpose

*Character Limit: 1500*

**Project Demographics\***

Please provide the demographic breakdown of who this project will serve.

*Character Limit: 1500*

**Project Region(s)\***

Please select the regions in which your project operates

Select all that apply.

For a list of states in each region, please check: [The Regions of the United States](#)

**Choices**

Northeast

Midwest

South

West

U.S. Territories

**Project Goals and Objectives\***

Please outline the project goals and objectives

*Character Limit: 1500*

**Project Evaluation and Outcomes\***

Please outline how the project will be evaluated, and what some measurable outcomes will be.

*Character Limit: 1500*

## *Diversity, Equity, and Inclusion Questions*

---

**Advancing Diversity, Equity, and Inclusion\***

Please outline how your organization is advancing diversity, equity, and inclusion, both internally within your organization and across all programmatic areas.

*Character Limit: 1500*

### **Equitable Project Outcomes\***

Please outline how your project will promote equitable outcomes.

Please include comments or examples on how you will demonstrate a commitment to equity.

*Character Limit: 1500*

### **Black or African Americans Served\***

Please select if your project serves Black or African Americans

#### **Choices**

Yes

No

### **% of Black or African Americans Served\***

Please state the percentage of Black or African Americans your project serves. If you do not serve Black or African Americans, please enter 0%.

*Character Limit: 100*

### **% of Black or African Americans in Organization\***

Please state the percentage of your organization that is composed of Black or African Americans. Include staff, senior leadership, board members, etc.

If you do not have any Black or African Americans associated with your organization, please enter 0%.

*Character Limit: 100*

## *Expression of Interest Financial Information*

---

### **Total Annual Revenue of the Organization - in USD\***

Organization's estimated annual budget for fiscal year most closely aligned with the grant period.

Please note: We don't require full project budget details at this time. We will ask for these on the finalist application, if invited.

*Character Limit: 20*

### **Operating Budget for the Financial Year - in USD\***

*Character Limit: 20*

### **Budget Year\***

What upcoming time period do these budget numbers reflect? (eg. Fiscal Year July 20XX- June 20XX, Calendar Year 20XX, etc.)

*Character Limit: 100*

### Funding Allocation\*

Please provide a percentage breakdown of how funding will be used.

*Example: 50% Salaries, 20% Travel, 5% Office Supplies, 10% Overhead/Indirect*

*Character Limit: 500*

### Partial Funding Support\*

Will you be able to implement the proposed project with partial funding from Livestrong?

Livestrong may determine to provide a grant for less than the requested amount. If asked to submit a Finalist Application, Livestrong may request you adjust your project plan, budget and outcomes accordingly.

#### Choices

Yes

No

### Other Funding Sources\*

Are you seeking funding from other sources or other sponsors?

#### Choices

Yes

No

### If yes, please list additional sources of funding/support

*Character Limit: 1500*

## Expression of Interest File Uploads

---

### Cover Letter\*

Please provide a cover letter to support your expression of interest application.

*File Size Limit: 2 MB*

### 501c3 Designation Letter

Please provide a copy of your organization's 501c3 designation letter, if applicable.

*File Size Limit: 2 MB*

## Compliance Questions

---

### Conflict of Interests\*

Are there relationships, conflicts of interest or any additional information Livestrong should be aware of?

#### Choices

Yes

No

### **Outstanding Obligations and/or Contingencies\***

Does your organization have any outstanding obligations and/or contingencies?

#### **Choices**

Yes

No

### **Ongoing Investigations\***

Is your organization, and any parent or subsidiary of your organization, the subject or target of an ongoing administrative or legal investigation or proceeding, or has been sanctioned or barred by any international or U.S. federal or state authorities or agencies?

#### **Choices**

Yes

No

## *Compliance Questions - Additional Information*

---

### **Additional Detail\***

Please provide further details on your Conflict of Interest, Outstanding Obligation and/or Contingency, or Ongoing Investigation

*Character Limit: 2000*

## *Application Submission Agreement*

---

### **User Profile Accuracy\***

Please confirm your user profile is up-to-date and reflects accurate profile information.

#### **Choices**

Yes, I confirm the information in the portal is accurate.

### **Final Submission Agreement\***

By clicking the "Submit" button, I am certifying the following:

- I am authorized to submit this request on behalf of the organization.
- The information in this application is true and correct.
- I understand that additional information may be needed to review the application. I understand that failure to promptly respond to requests for information will delay the review of my application, or forfeit my application for this grant cycle.
- I understand that individual Livestrong representatives do not have the authority to commit funding to requests.

- I understand that information submitted in this form may be used by Livestrong for public/promotional use.

Approvals under this system are subject to the execution of a binding Funding Agreement between the organization and Livestrong.

### Choices

I acknowledge and agree to the statements listed above.

### Full Name\*

*Character Limit: 150*

### Job Title/Organization Role\*

*Character Limit: 150*

Expression of Interest Forms must be submitted by 11:59 p.m. CST on February 13th, to be considered for our 2022 Livestrong Grant Cycle. Late submissions will not be accepted.

The Foundation will review all forms and provide an emailed response, either a denial, a request for further information, or an invitation to submit a finalist application. Only those applicants who have received a favorable response to their expression of interest form will be able to access the finalist application to submit a full grant proposal.