

Phase I Activation Fund Concept Paper Cover Sheet

Organization Information:		
Organization's Legal Name:	Website:	EIN #:
Mailing Address:		
Organization CEO/Executive Director Name:	Email:	Phone:
Primary Contact Name/Title (if different than above):	Email:	Phone:
Fiscal Sponsor Organization (if applicable):	Website:	EIN #:
Organization Budget Size: ☐ Small (less than \$500,000)	☐ Medium (\$500,000 - \$1M)	☐ Large (\$1M +)
Primary Geographic Area(s) Served: (Please select no mor	e than three):	
☐ Quaboag Hills Region ☐ Gre ☐ Greater Worcester area – CHNA 8 ☐ Nor	th County– CHNA 5 ater Milford area – CHNA 6 th Central area – CHNA 9 ssachusetts Statewide	☐ Other Areas (please specify)
Proposed Project Information:		
Proposed Grant Amount (target range is \$60,000 - \$125,0	000): Total Project Cost (if known):	
Type of Support Requested (check one):		
☐ Capital (construction, technology, equipment, etc.) ☐ Programs/Services ☐ Both Capital & Programs		
Proposed Start and End Date (Grant period is 7/1/24 – 6/30/25):		
Instructions:		
To express interest in applying to the 2024 Activation Fund, please send the following materials via email to info@thfcm.org by 5:00 p.m. on Friday, March 1, 2024: 1) Cover Sheet (this form); 2) a 1-page concept paper outlining the proposed project (see details below); and 3) a list of Board members (with their affiliations). Foundation staff will follow up to seek additional information/clarification, if needed, by March 15. Organizations will be notified if invited to apply by April 12, 2024, and final funding decisions will be made by June 21, 2024.		
 Concept papers should be no more than one page (11 pt. font, 1-inch margins), and should include the following: Brief summary of the organization's mission, core programs/services, and diversity & inclusion practices Description of the proposed project and the population of focus, including anticipated impact (# of people served) Brief explanation of estimated costs (if known), grant amount requested, and other sources of support (if any) Longer term plans for project, if applicable 		
For questions, please contact Jennie Blake, Vice President for Programs, at jblake@thfcm.org or (508) 438-0009 x 6.		
<u>Important!!</u> Please save changes before closing document and rename file with the organization's name & date.		