GATEWAYFUND™

ORGANIZATION INFORMATION

Please complete the following:

Other Names the Organization Goes By (Doing Business As (DBAs)):

Organization's Address:

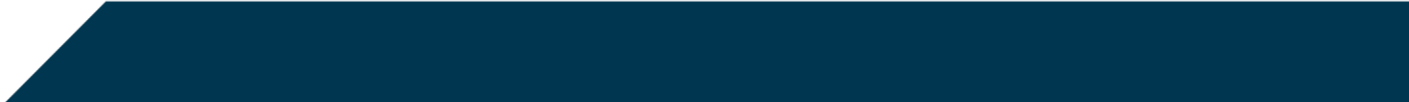Executive Director's Name:

Executive Director's Email:

Executive Director's Phone Number:

Optional Secondary Contact Name:

Optional Secondary Contact Email:

Optional Secondary Contact Phone Number:

Total Number of Staff (Full and Part Time):

GATEWAYFUND™

Total Number of Board Members:

Total Number of Volunteers:

Zip Code(s) of Where You Serve/Provide Programming:

Organizational Budget - Revenue Number (Last Fiscal Year):

Website and Social Media Links:

Referral - How did you learn about the grant?

	Company Website
	LinkedIn
	Employee Referral (Employee Name)
	Other (How did you learn about the grant?)

Are you receiving any additional funding for the program?

	Yes
	No

If yes, who else is funding the program and how much additional funding are you receiving?

Giving Priority Area:

	STEM Education and Workforce Development
	Health and Wellness
	Environmental Stewardship

Do you have a strategic plan?

	Yes (Please upload an attachment of your strategic plan.)
	No

If no, please explain why you do not have a strategic plan.

Current Mission Statement:

Current Vision Statement:

Please share the CEO/Executive Director/Founder's background and path to leadership.

Define their leadership philosophy, and how they lead the mission/vision of the organization.

GATEWAYFUND™

Organizational History: Please provide an overview of how long the organization has been in existence, how it started and how it has evolved, and accomplishments to date.

How does your organization promote inclusion, equity, and equality? In particular, how do you encourage or create a space for diversity of thought?

Please give us a brief overview of your current programs and activities.

Statement of Need: What problem does the organization solve?

Statement of Need: How do you know that the organization and/or program for which you are applying for funding is needed in our community?

Statement of Need: What indicators or statistics show that your work is necessary?

GATEWAYFUND™

PROJECT INFORMATION

Please complete the following:

Project Name:

Project Description:

Project Budget:

Project Purpose - What needs is it filling in our community?

Project Goals:

Project Activities:

How does the project contribute to your strategic goals?

Is this a new program?

	Yes
	No

If no, what were the past outcomes?

```
```

How will you recognize Gateway Engineers over the course of the grant?

```
```

What would happen if you do not receive this funding?

```
```

Are there any collaborations or partners, including funders, for this project?

	Yes
	No

If yes, who are they? What do they bring to the project?

```
```

GATEWAYFUND™

ALIGNMENT TO GATEWAY'S MISSION

Gateway focuses on three areas: People, Projects, and Purpose. Gateway is looking to support organizations that align to investing in people, internally and externally, providing quality projects/programs that positively impact the region, and have purpose, a defined reason or "Why" behind the drivers of the areas of work.

PEOPLE:
People are at the heart and center of everything we do.

How does your organization care for its most valuable asset, people?

What is your organization doing to empower and engage your staff/employees?

How does your culture encourage and promote diversity of thought?

PROJECTS/PROGRAMS:
As a Project-Focused Organization (PFO) everyone and everything in the company is focused on creating client value through project execution. We apply our proven systems, tools, and processes to everything we do, whether a complex client need or planning an employee event.

How is your organization aligning your staff/volunteers to the programs/projects based on your mission?

GATEWAYFUND™

What evaluation are you currently doing to assess the impact/effectiveness of your programs/projects?

PURPOSE:

We do not strive to be the biggest. We strive, every day, to be the best in all we do. We are continually improving as people, as professionals, and as an organization. At Gateway, all we expect you to do is grow.

What priorities have been defined in your strategic plan (if applicable) to grow/expand your programs or services?

How will this grant contribute to your continued growth and development as an organization?

How do you invest in developing your Executive Director, staff, and board?

GATEWAYFUND™

GRANT ATTACHMENTS/UPLOADS:

Please upload the following:

Most Recent Form 990

Organizational Budget

List of Board Members (including occupations or places of employment)

Annual Impact Report