

2026 Community Grant Program Application

Community Foundation of Elmira-Corning and the Finger Lakes

Information about the Community Grant Program

Welcome to the Community Foundation's online application process. It is important for your to read and understand the grant program's guidelines before starting an application to ensure the request meets the specific criteria. Guidelines can be found on our website at www.communityfund.org

Direct specific questions to the VP of Programs by calling 607-739-3900 or by emailing ses@communityfund.org

Community Grant Program

The Community Foundation of Elmira-Corning and the Finger Lakes, Inc. is grateful to support a wide variety of organizations through our Community Grant Program. The Community Grant Program is an open, competitive program through which grants are made to nonprofit organizations that enable us to support our community's most pressing needs and opportunities. Each proposal is reviewed by a panel of community members and formally approved by the foundation's Board of Directors. Awards are determined based on the proposals' value to the residents and communities in the Southern Tier, availability of funding, quality and vision presented in the application.

We recognize that needs far surpass our available resources. An unsuccessful application does not reflect a judgement about the worthiness of an organization or project. Often, we receive far more grant requests than we are able to fund. If your application is denied, we encourage you to reach out to Community Foundation staff to discuss the reasons why your application was not successful.

Organization Information

Date of Nonprofit Incorporation*

Character Limit: 10

Purpose of the Organization*

Briefly describe the organization's history, mission, vision and values.

Character Limit: 5000

Board of Directors*

Upload a file or type in the names and professional affiliations of your current board of directors.

Character Limit: 5000 | File Size Limit: 5 MB

Nondiscrimination Policy*

Community Foundation of Elmira-Corning and the Finger lakes, Inc. follows an equal opportunity employment policy and employs personnel without regard to race, creed, color, ethnicity, national origin, religion, sex, sexual orientation, gender expression, age, physical or mental ability, pregnancy, veteran status, military obligations, and marital status. This policy applies to hiring, internal promotions, training, opportunities for advancement, and terminations.

No person in the United States shall, on the basis of actual or perceived race, color, religion, national origin, sex, gender identity (as defined in paragraph 249(c)(4) of title 18, United States Code), sexual orientation, marital or parental status, political affiliation, military service, physical or mental ability, or any other improper criterion be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity funded in whole or in part with funds made available by the community foundation, and any other program or activity funded in whole or in part with funds appropriated for grants, cooperative agreements, and other assistance administered by the community foundation.

Does the organization confirm that its philosophy is consistent with this policy? *Please note that if you are a fiscally sponsored organization, you are responding for your organization AND your fiscal sponsor.*

Choices

Yes

No

Commitment to Welcoming & Belonging

The mission of the Community Foundation is to leverage the power of philanthropy to create a great place to live, give, and thrive for all people. It is critical that we address the inequalities and injustices within our organization and through our work in communities. The Community Foundation is committed to creating a welcoming workplace and community. We see an ongoing need to gather information and invite conversation with our grantees.

Please assist us by providing the information requested below to the best of your ability.

Welcoming and Belonging*

We value organizations that demonstrate a commitment to justice, equity, diversity, inclusion, and belonging as reflected by the individuals who serve as board members.

Please describe how your **board of directors and staff** reflect the people and communities you serve in terms of race, ethnicity, class, gender, and/or lived experiences. If the board and/or

staff currently do not reflect the people and communities you serve, please share the policies and procedures you have in place to promote welcoming and belonging in your organization. As you consider your response, please know that there are no "correct" answers. Every organization is different and we recognize that advancing equity is an ongoing process. We appreciate your honest reflections. (Short answer - no more than 2 paragraphs.)

If you have been answering this question the same way for several grant cycles, please describe the ways in which your organization has evolved over that time to become more welcoming.

Character Limit: 1000

General Application Questions

Organization Name*

Character Limit: 100

Are you using a fiscal sponsor?*

If yes, please note that an additional group of questions will appear.

Choices

Yes

No

Are you a private and/or parochial school?*

If yes, please note that an additional group of questions will appear.

Choices

Yes

No

Primary County(ies) that the organization serves*

Note that the Community Grant Program grants are restricted to serving residents of Chemung and/or Southeastern Steuben counties. Your organization may serve more counties however if you apply for a project grant, funding may only benefit residents in Chemung or SE Steuben. If you apply for a general operating support request, the organization must physically reside in Chemung or SE Steuben counties.

Southeastern Steuben County is defined as the greater Corning area including the towns of Addison, Campbell, and Savona.

Choices

Chemung County

Schuyler County

Southeastern Steuben County

Steuben County

Yates County

Program Area*

What program area best describes your organization's work? e.g. arts and culture, economic mobility, human services.

Character Limit: 250

How are the people/community you serve involved in decision-making for your organization?*

How are community members and the people your organization serves involved in informing your work, guiding the creation of programs, assisting your staff, and/or other ways that are instrumental to your organization, (For example, serving on Boards/committees, assisting in program design, serving as interns, etc.).

Character Limit: 1000

Fiscal Sponsor

Instructions for Organizations Using a Fiscal Sponsor

The organization acting as the fiscal sponsor should be the organization whose profile is being used to submit this application. You may email the Vice President of Programs to add a user for the sponsored organization so that login information does not need to be shared.

The financial questions in this section only should be answered using the fiscal sponsor's information.

All other questions in this application regarding organizational information, program information, and financials should be answered using the fiscally sponsored organization's information.

Organization Name*

Sponsored Organization Name

Character Limit: 250

Fiscal Sponsor Name*

This is technically the applicant organization, so this should match the organizational profile under which this application is being submitted.

Character Limit: 250

Why are you using a fiscal sponsor at this time?*

Choices

Seeking 501c3 status and not yet awarded

Lost 501c3 status

Not seeking 501c3 status

Other

Letter of Support*

Please upload a letter of support from the sponsoring organization or MOU outlining your fiscal sponsorship agreement.

File Size Limit: 2 MB

Fiscal Sponsor Financial Information*

Please upload the fiscal sponsor's current operating budget.

File Size Limit: 2 MB

Financial Information

File Uploads:

If you have multiple files, please combine them into 1 document, save it as a PDF and upload it into the application.

Type of Grant Request*

You may choose to apply for Unrestricted -General Operating Support **OR** for Project Support. Refer to the grant guidelines for eligibility and criteria for each grant program.

Choices

Unrestricted - General Operating Support

Project Support

Amount Requested*

Enter the whole dollar amount (round up) you are requesting for either a project support or general operating support grant.

Note about general operating requests:

- If you are requesting general operating support, refer to the grant guidelines for the amount your organization is eligible to apply for.

Character Limit: 20

Amount Being Requested from the Community Foundation

Project Grants: up to \$10,000

General Operating Support Grants:

- Operating Budget between \$50-\$100k = up to \$5,000
- Operating Budget between \$100-\$200k = up to \$7500
- Operating Budget between \$200-\$500k = up to \$10,000

- Operating Budget between \$500k+ = up to \$15,000

Character Limit: 20

Total Annual Operating Expenses*

Character Limit: 20

Operating Budget*

Please upload a copy of your organization's current FY operating budget. The budget should include all expenses and revenue for the organization.

File Size Limit: 5 MB

Total Project Expenses

For project support grant requests only. Leave blank if you are applying for general operating support. This is the total expenses for the project you are seeking funding for.

Character Limit: 20

Project Support Budget Request

Upload a **detailed grant project budget**, which includes all sources of income and expenses for the project you are requesting funds for. Include in-kind gift/services, other grants requests (committed or pending). Clearly identify the expense(s) that you would like the Community Foundation to support. **Use only Word, Excel, or .pdf files.**

(Note - this is not your organization's operating budget).

File Size Limit: 2 MB

Budget Narrative*

Briefly describe how the Community Foundation grant will be spent. (2-3 sentences.)

Character Limit: 500

Partial Funding

Project Support Grant requests only:

In the case that the grant is partially funded, how will the organization implement the project?

Character Limit: 500

Estimates & Quotes

For building renovations, repairs, or large equipment/technology purchases, please include **at least two quotes**. Combine files into a word doc or pdf.

File Size Limit: 5 MB

Private and/or Parochial Schools

Private and/or Parochial Schools

If you are a Private and or Parochial School applicant, please complete the following questions:

School Building Use

Tell us about community based organizations that use the school building and their frequency. For example, The Alzheimer's Support Group meet in our cafeteria, 2 times per month.

Character Limit: 500

Total Number of Students Enrolled Current Fiscal Year

Character Limit: 250

Total Number of Students Enrolled Previous Fiscal Year

Character Limit: 250

Percentage of Enrolled Students Receiving Financial Assistance

Character Limit: 250

Project Support Questions

Project Name*

Think of this as the title of your request. Please ***do not*** repeat the name of your organization here.

Character Limit: 100

Project Type*

Grants funded by the Community Foundation typically fall into three categories. If you're unsure, refer to the Community Grant Program Grant Guidelines for descriptions.

Choices

Capital (renovation, repair, equipment/technology purchase)

Organizational Development/Capacity Building

Program or Direct Service

Project Start Date*

Please tell us the date you anticipate launching the project. **NOTE: This grant cannot pay for expenses incurred by the project prior to award notification.**

Character Limit: 10

Project End Date*

Organizations have 1 full year to utilize grant funds.

Character Limit: 10

Total Unduplicated Number of Clients/Beneficiaries this project will serve*

Character Limit: 250

Tracking the Number of Clients/Beneficiaries Served*

Briefly tell us how you track the number of people your organization serves.

Character Limit: 1000

Project Description*

Provide a **concise description of the project** that the organization is seeking funding support for and that also answers the following questions:

- What community need does this project address?
- How do you know this approach will work?
- Include any external support, partnerships, and/or collaborations.
- For technology support, describe how technology will improve program delivery.
- For organizational development/capacity building/capital support, describe how the project will address organizational challenges or needs?

Character Limit: 5000

Action Steps, Goals & Outcomes*

Briefly describe the process and timeframe to develop and implement the program. Provide 2-3 brief goals and their anticipated outcomes. How will your organization know that it has been successful?

Character Limit: 5000

Previous Grant Award*

If the organization received project support in the previous year, briefly (2-3 sentences) describe the impact it has had. Type N/A if the organization did not receive project support.

Character Limit: 500

Unrestricted - General Operating Support Questions

Please answer the following questions that will describe your General Operating Support funding need(s).

Objective of the General Operating Support Grant*

Be sure to address the following as concisely as possible:

- What is/are the primary issue(s) or challenge(s) you are trying to address with this grant?
- What is your goal or goals with this funding?
- What activities will you conduct to accomplish your goal?

Character Limit: 5000

Strategies to Address Challenges*

Describe any short and long-term strategies for addressing the identified organizational challenges.

Character Limit: 5000

Impact of a General Operating Support Grant*

- How will funding make an impact on the people or community your serve?
- What change will occur as a result of funding and your work?
- If you have measurable outcomes, please include them.

Character Limit: 5000

Years in Operation*

How many years has the organization been in operation?

Character Limit: 250

Strategic Plan*

Upload the organizations current strategic plan. Strategic plan must cover at least a 24-month period.

File Size Limit: 5 MB

Previous Grant Award*

If the organization received general operating support in the previous year, briefly (2-3 sentences) describe the impact it has had on operations. Type N/A if the organization did not receive general operating support.

Character Limit: 500

Supporting Information

Optional Supporting Documentation

If you have any additional information you'd like to share about the work you are doing - photographs, publications, etc. - - please upload it here.

If there's anything else you would like to briefly share that was not addressed in the questions above, you may do so here.

Character Limit: 1000 | File Size Limit: 3 MB

Thank you for completing this grant application!

Notice of Grant Decision: Applicants will be notified of approval or declination by email following the approval of grants by the Community Foundation Board of Directors. An unsuccessful application does not reflect a judgment about the worthiness of a particular project. The Community Foundation routinely receives more requests than it can fund. If your request is denied, we encourage you to contact the Vice President of Programs to discuss specific reasons.

Deadline & Decision Schedule:

July 1 - Application Deadline

End of August - Notification

If you have any questions before or after submitting, please contact the Vice President of Programs at ses@communityfund.org.

Applicant Feedback

Our foundation is a learning organization. The following questions seek feedback from applicants that will assist us in our learning. We encourage honesty! Answers will not affect your organization's chances of being awarded a grant through the Community Foundation.

Application Completion*

How long did it take you to collect the information requested and complete this application?

Choices

Under 3 hours

3-6 Hours

6-9 Hours

9-12 Hours

12+ Hours

Open-ended Feedback

Please provide any constructive feedback about the application process, or general feedback we should consider as the Foundation evolves.

Character Limit: 1000

Comments & Questions

What else would you like to share with us about your experience with the Community Foundation? What questions do you have that you would like an answer to?

Character Limit: 1000

Thank you for helping us learn through your experiences.

Signature

Artificial Intelligence (AI)*

If any portion of this grant application was prepared using artificial intelligence (AI) tools or services, the applicant hereby attests that they have thoroughly reviewed all content generated by the AI and commit to its accuracy, completeness, and alignment with the applicant's goals and representations. The applicant understands that the use of AI does not absolve them of responsibility for the application and agrees to stand behind all information submitted, regardless of its source.

Accuracy and Compliance

By signing this application, the authorized representative certifies that the applicant organization is in good standing, that the information submitted in this application is true and correct to the best of their knowledge, and that the organization will comply with all relevant policies and regulations if awarded a grant.

Type in first and last name.

Character Limit: 100