Application to become a Participating Member Agency of United Way

Each year area non-profit organizations providing human services are invited to apply for funding from the United Way. Agencies must focus around education, financial stability, and healthy lives. Applications are reviewed by the Allocation Committee for consideration of membership and funding. Applications for funding and all documents are required to be completed by \_\_\_\_\_\_\_\_\_\_\_\_

Agency Name \*

Agency Director \*

Director E-mail \*

Agency Address \*

City, St, Zip \*

Agency Phone Number \*

Website \*

EIN \*  
Fiscal Year Start Date and End Date

Application Contact Name \*

Application Contact E-mail Address \*

Applicant's Phone Number \*

\_\_ I certify I have the authority to submit this application on behalf of the organization \*

Organization’s mission statement. \*

Organization’s vision statement. \*

Provide a 25-word summary of your agency\*

How many dollars are you applying for from the United Way of the Mark Twain Area? \*

Are you currently receiving dollars from the United Way of the Mark Twain Area? \*

\_\_ Yes

\_\_ No

Have you ever received dollars from the United Way of the Mark Twain Area? \*

\_\_ Yes

\_\_ No

What is your organization applying for funding from United Way for?

\_\_ Specific Project/Program - dollars will be designated to only be utilized for a specific purpose.  
\_\_ General Support - dollars will be considered general revenue to the organization.

If applying for dollars for a specific project/program, name of the project/program.

Give a brief overview of the program(s) your organization implements. Provide headings above each program.

Why does your organization implement these programs in our community? What data shows the work of your organization is needed? Provide data and share the source of the data to prove that your organization’s work is needed in our community.

How does your organization measure the success of the programs it implements in the community? What kind of change/improvement does your organization anticipate seeing in the community by doing your work?

Are there other organizations in our community addressing the same need and implementing similar programs who serve the same geographic area as your organization?

Which United Way focus area(s) does your organization's work align to? \*

\_\_ Education

\_\_ Financial Stability

\_\_ Healthy Lives  
\_\_ Equity

How does your organization’s work align to the area(s) of focus selected above?

Which United Way priority does your organization’s work align to?   
\_\_ Supporting Critical Services  
\_\_ Providing Opportunities for Upward Mobility   
  
Explain how your organization’s work helps with supporting critical services and/or providing opportunities for upward mobility.   
  
  
Describe the demographic makeup of the clients you serve. If applying for project/program funding, specify the demographic makeup of the clients who will be served with that funding. United Way prioritizes the needs of individuals who are marginalized (individuals living in poverty, minorities, children without parental support, etc.) \*  
  
  
Dollars from the United Way of the Mark Twain Area can ONLY be used to support programs in Marion, Monroe, Ralls, Lewis, and Shelby Counties in Missouri. If you serve additional counties, how can you prove dollars are only used to support the work of these counties?

What other revenue streams are utilized to support the program you are applying to the United Way to receive funding for?

Explain the impact funding from United Way will have on the work of your organization if selected to receive funding from November 2022-October 2023.

Explain any collaborations with other agencies. \*

For Organizations that have received funding from United Way previously: How has your organization shown that your organization receives funding from United Way and partnered with the United Way organization?

**DOCUMENTS TO UPLOAD:**  
\_\_ Number of Individuals Served - Form found on Website - Save as Excel Document and Upload   
\_\_ Organization Budget - form found on website - Save as Excel Document and Upload  
\_\_ Program/Project Budget (if applying for program/project dollars) - Form found on Website - Upload as Spreadsheet  
\_\_ Most Recent IRS 990  
\_\_ Federal IRS 501(c)3 Tax Exempt Certification - Not required for returning applicants

\_\_ For budgets over $300,000 please upload your most recent fiscal year's audit (or bring one to the United Way Office)  
\_\_ For budgets of $20,000-$300,000 please upload a Compilation Report prepared by a CPA (or bring a copy to the United Way Office if no full audit)  
\_\_ For budgets under $20,000 please upload most recent approved financial statement  
\_\_ Board Member Listing - form found on website - Save as Excel Document and Upload  
\_\_ Key Employee Listing - form found on website - Save as Excel Document and Upload  
\_\_ Organization's most recent Annual Report (if applicable)  
\_\_ Upload Agency's Bylaws - Required for new applicants, required for returning applicants if any changes have been made in past year.