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Concord, NH 03301
603-228-2448

Opportunity Grants Program Proposal Guidelines

Program Goal: The goal of the Opportunity Grants Program is to improve the health of New Hampshire's people by funding projects that address urgent needs and emerging opportunities.

Grant uses: Opportunity Grants will be used to support projects (including technical assistance) that address urgent needs and emerging opportunities, innovative projects, and/or projects that build and disseminate knowledge. Typically, these projects involve a one-time commitment and are short term (12 months or less).

Eligibility: Grants will be limited to nonprofit organizations that are tax-exempt under the Internal Revenue Code, government agencies, schools, colleges and universities. Proposed projects or activities must serve the people of New Hampshire. The following are generally NOT eligible:

- Grants to individuals.
- Out of state projects.
- Ongoing operating expenses.
- Equipment purchases.
- Sponsorships for events/conferences.
- Capital campaigns and/or fundraising events.
- Lobbying. Direct (influence legislative body) and grassroots lobbying (call to action).
- Expenses already incurred.
- Replacement of public funding.
- Sectarian or religious programs.
- Directly or indirectly supporting political activities including political campaigns.

Selection Criteria: Priority will be given to projects that:

- Advance health equity for people who lack a fair opportunity to optimize their health potential for a variety of reasons including income, age, race, culture, ethnicity, disability, educational level, geography or sexual orientation.
- Leverage resources including other funding.
- Present a compelling case regarding the seriousness and urgency of the need.
- Identify realistic, attainable and measurable outcomes that address the identified need.
- Demonstrate the applicant's ability to successfully implement the project.
- Involve collaboration with other organizations.
- Demonstrate sustainability, if applicable.
- Serve or have the potential to serve a wide geographic area of New Hampshire and/or a significant population of NH residents.

Required Information

- 1) **Complete the Online Application.**
 - **Organizational Background.** Provide an overview of the organization as requested in each field.
 - **Proposal Overview.** Provide an overview of the project as requested in each field.
 - **Performance Measurement.** List specific project outcome (results you seek to achieve) and the outcome indicators (how you will know whether your outcomes have been achieved) in the designated fields.
- 2) **Proposal Narrative (5 pages or less).** Provide answers to each of the following questions completely and succinctly in a separate document and attach the document to the online application. *The level of detail should correspond to the scope and complexity of the project.*
 - **Statement of Need/Opportunity.** Describe the challenge, issue and/or opportunity the project will address. Using data, if possible, explain the need of the project.
 - **Project and Grant Descriptions.** Describe the proposed project, including how it responds to the identified need or opportunity, key project activities and timeline. Include any potential barriers to success and how you plan to minimize them.
 - **Health Equity.** Summarize how the project promotes equity for communities of color and language minorities in the targeted geographic area. Explain how the populations affected by your project have been engaged in developing your proposal.
 - **Sustainability.** If the project is to continue beyond the grant period, describe resource plans for sustaining the proposed project.
 - **Organizational Capacity.** Provide a brief overview (2-3 paragraphs) of your organization and how the project aligns with your mission. Explain (with examples) how your organization has been successful with its past work and demonstrate its ability to manage the project. Describe the qualifications of project leaders and/or key project staff and why your organization is uniquely positioned to undertake this work.
 - **Collaboration.** Describe the collaborative relationships needed for the project to be successful. Explain whether partnerships have already been established and what partners bring to the project. If collaborative relationships are not needed, explain why.
- 3) **Project and Grant Budget.** Provide a Budget Table and Budget Justification for the project and grant and submit as attachments to the online application. *See Budget Guidelines.*
- 4) **Letters of Collaboration.** If applicable, provide a letter of commitment from each collaborating organization which explains with specificity their resources that will be committed to the proposed project and submit as an attachment to the online application.
- 5) **Personnel Information.** If applicable, provide key project personnel information (bio, resume, and/or job description) and submit as an attachment to the online application.
- 6) **Contractor Information.** If applicable, provide the contractor scope of work and, if available, the contractors' qualifications and contractor agreement, and submit as an attachment to the online application.
- 7) **Board List.** Provide a list of current board members which includes business affiliations and phone numbers and submit as an attachment to the online application.
- 8) **Financial Statements.** Provide the most recent interim financial and/or audited financial statements and submit as an attachment to the online application.
- 9) **Operating Budget.** Provide the most recent operating budget as an attachment to the online application.

Funding Information

- Proposals are considered on a rolling basis.
- The grant range is typically between \$1,000 and \$20,000.
- The grant term is typically one year or less and one time funding.
- A final report is required at the end of the grant period.

To Apply

- 1) Complete the online application at www.endowmentforhealth.org
Attach the following documents to the online application, as applicable.
- 2) Proposal Narrative
- 3) Project Budget and Budget Justification
- 4) Letters of Collaboration, if applicable
- 5) Personnel Information, if applicable
- 6) Contractor Information, if applicable
- 7) Board List
- 8) Financial Statements
- 9) Operating Budget

Please contact the Sue Fulton at the Endowment for Health Office with questions (603-228-2448 X312) or email applications@endowmentforhealth.org