

**UNITED WAY of the CENTRAL and SOUTH OKANAGAN
SIMILKAMEEN**

2012/2013 FUNDING REQUEST

Funding Request # 1 of _____ (PLEASE COMPLETE THE ADDENDUM ONLY IF YOU ARE MAKING MORE THAN ONE FUNDING REQUEST, IE. APPLYING FOR MORE THAN ONE PROGRAM.)

Agency name: _____

Program name: _____
Name of your program, or if you are applying for core funding please indicate so.

(Please note that all boxes below have been designed to increase as you input your answers)

Question 1

Original Report:

Date submitted: _____

Give a brief outline or overview of the funding request. What specific community issue does this program address?

Interim Report:

Date submitted: _____

Has anything changed in the last 6 months?

Final Report:

Date submitted: _____

Did your program address the specific community issue outlined above?

Question 2

Original Report:

How many and who will be served by the United Way funding?

Interim Report:

How many and who was served by the United Way funding in the past 6 months?

Final Report:

How many and who was served by the United Way funding in the past 12 months?

Question 3

Original Report:

Where will the services be offered? What municipalities will be covered?

Interim Report:

Were there any changes of where the services were offered, or what municipalities were covered in the last 6 months?

Final Report:

Were there any changes of where the services were offered, or what municipalities were covered in the last 12 months?

Question 4

Original Report:

Please provide examples of what the United Way funding can provide for your clients in terms of services or resources. For example, what client outcome might be achieved from receiving \$100, \$500 or \$1,000?

Interim Report:

Give an example of a **measurable short term outcome** that this funding has produced. How have you measured this outcome?

Final Report:

Give an example of a **measurable outcome** that this funding has produced. How have you measured this outcome?

2012/2013 FUNDING REQUEST BUDGET

Funding Request # 1 of _____

Revenues

	Budget for Year	6 month, year-to-date budget	12 month, actual use of funds
Government Funding			
United Way Funding			
Other Funding (secured)			
United Way Donor Designations			
Donations / Fundraising			
Fees for Service			
TOTAL			

Expenses

	Budget for Year	6 month, year-to-date budget	12 month, actual use of funds
Staffing Costs- Salaries/Wages/Benefits			
Training & Staff/Volunteer Development			
Occupancy Costs			
Other Direct Costs			
Fundraising Costs (including paid fundraisers)			
Administrative Overhead			
TOTAL			
Surplus (Deficit): **Please explain any variances +/- greater than 10% for all revenue and expense items			