

1 Rolling Opportunities Engagement Form

2 Certification and Next Steps

3 Review My Application/Revisar mi solicitud

## Rolling Opportunities Engagement Form

Printer Friendly Version/Version para imprimir | E-mail Draft/Borrador de correo electronico

\* Required before final submission

Before completing the form below, please review our [Grantseekers](#) page to learn more about our our grantmaking process, our strategic priorities, and our 2024 funding opportunities.

Please submit only **one** form per organization.

We suggest using the fillable version of this form to draft your responses, then cut and paste those responses into the electronic form. When completing the electronic application, please save your work periodically to ensure that you do not lose your responses. If saved successfully, you'll receive an email that includes your application responses.

### Your Contact Information

\* First Name

\* Last Name

\* Title

\* Office Phone

\* E-mail

### Organization Information

\* Organization Name

\* Organization Legal Name

\* EIN or Tax ID number

\* Organization Address

\* City

\* State

\* County/Tribal Area

\* Postal Code

\* Year Organization Founded

\* What is your organization's annual operating budget?

Please enter your estimated 2024 annual budget. If you don't have this information yet, enter your 2023 budget.

\* In what geographic area(s) does your organization work:

*select all that apply*

- Avery County    Buncombe County    Burke County    Cherokee County    Clay County    Graham County    Haywood County  
 Henderson County    Jackson County    Macon County    Madison County    McDowell County    Mitchell County  
 Polk County    Qualla Boundary    Rutherford County    Swain County    Transylvania County    Yancey County

Select "Yes" if ONE OR MORE of the following statements is true:

- \* Your organization offers clinical or medical services to the community.
- \* This project involves offering clinical or medical services to the community.

### Organization Mission, Vision, and Goals

\* Please share your organization's mission, vision, and values.

Word count 0 of 1500

\* What people and communities does your organization serve?

Word count 0 of 1500

\* How does your organization center equity in your work?

Word count 0 of 1500

\* What are your organization's top priorities for 2024?

Word count 0 of 1500

### Funding Request Information

\* Please tell us about the idea you'd like to discuss with a member of Dogwood's Community Investment team.

*(If you have multiple ideas, please limit your response to a maximum of **three** ideas/projects.)*

Word count 0 of 1500

\* What amount of funding are you seeking from Dogwood?

Enter the estimated amount for all ideas/projects.

**For the following question, please reference our 2024 Priorities located on our [Grantseekers](#) page.**

\* Which priority best aligns with the idea(s) you desire to discuss with us?

- Community Equity     Leverage Fund     Policy & Advocacy

\* At the end of 2024, what does meaningful progress look like for your organization with resources from Dogwood?

Word count 0 of 1500

### Certification and Next Steps

#### CERTIFICATION

By checking the box below, I certify that:

- This organization does not directly or indirectly assist in, sponsor, promote, or provide support for (i) acts of terrorism or to support organizations or persons listed as terrorists on lists maintained by the United States government, the United Nations, the European Union, and other entities; (ii) acts defined as hate crimes or ethnic intimidation under applicable federal or state laws.
- \* • This organization complies with all applicable federal, state and local civil right laws and does not discriminate against a person on the basis of that individual's race, religion, creed, color, sex, sexual orientation, gender identity or expression, marital status, pregnancy, age, ethnic/national original, citizenship status, veteran status, political affiliation, disability, genetic information, or ancestry. This organization does not directly or indirectly assist in, sponsor, promote, or provide support to any organization that discriminates against any person on the basis of the above referenced protected characteristics.
- Any funds received for this proposal will be used for the stated charitable purpose, and in accordance with the grant terms and conditions enclosed in the grant agreement letter.
- The Trust may publicize this project or program in all publications, including web-based communications, should the proposal be funded.

#### NEXT STEPS

*After submitting this form, you should receive an automatic email confirming your submission. A member of our team will review your form, and if your request aligns closely with one or more of our 2024 grantmaking focus areas, your Community Investment team liaison will schedule a conversation to learn more about your organization and ideas.*

*In preparation for the conversation, please take some time to reflect on the following:*

- *Your organization's most significant accomplishments over the last year*
- *The most significant challenges you're expecting in the next year*
- *The role external collaborations will play in supporting your progress*