

Application Content (Airtable Form)

Grant Writing Stipend Request Form

Applications will be processed in the order they are received. This form will remain open until June 30, 2024 or until funding is expended.

Eligibility Criteria

1) Your organization must meet 3 out of the 4 following criteria:

- Does not have a full-time development director or grant writer on staff (contracted grant writers are okay).
- Has an annual operating budget of less than \$2 million.
- Has at least 50% representation of folks from impacted communities on your Board or leadership (self-defined leadership).
- Has a current or developing relationship with BHT. This includes organizations contracted with BHT at any time, current BHT Collaborative or Forum Members with signed agreements, and/or organizations with representatives currently serving on a BHT technical council or board.

2) Your organization is a nonprofit or has a fiscal sponsor.

3) Your organization serves the community in one or more of Better Health Together's geographical regions: Adams, Ferry, Lincoln, Pend Oreille, Spokane, Stevens, and Whitman Counties, and Colville Indian Reservation, Spokane Indian Reservation, and Kalispel Indian Reservation.

4) Your organization's mission and values align with BHT's [Vision, Goals, and Commitment to Anti-racism](#). BHT's vision is an integrated and anti-racist health system accountable for better health for ALL in Eastern Washington. Our goals and commitment to anti-racism center health equity, and partners eligible for this opportunity share these commitments.

Name of Nonprofit applying:

[Text field]

Contact person at your organization for this project:

We will reach out to this person with program details and communications.

[Text field]

Best ways to contact:

Select all that work well for you.

- Email
- Phone
- Text

Contact Email address:

[Text field]

Contact Phone/Text number:

[Text field]

Select the criteria your organization meets:

Three out of four are required to be eligible for this opportunity

[Select option, requirement to meet 3 out of 4 in order to proceed]

- Annual organization operating budget is less than \$2 million.
- No full-time grant writer or development professional on staff
- At least 50% representation of folks from impacted communities on board or leadership (self-defined leadership).
- Organization has a current or developing relationship with BHT.

Does your organization align with BHT's vision, goals, and commitment to anti-racism?

See full statement here: <https://www.betterhealthtogether.org/about-bht>

[Single select]

- Yes
- No

Are you a nonprofit, or do you have a fiscal sponsorship?

This Grant Writing Stipend is only available to nonprofits and those with fiscal sponsorship from a nonprofit. "Fiscal sponsorship" refers to nonprofit organizations offering their legal and tax-exempt status to projects and activities related to the sponsorship organization's mission.

[Single select, "yes" is required to proceed]

- Yes
- No

Please attach your organization's W9

[Upload attachment, required]

Please attach your IRS letter confirming your organization's nonprofit status or other documentation showing fiscal sponsorship.

[Upload attachment, required]

Counties/Areas you serve

[Multi-select option]

- Adams County
- Ferry County
- Lincoln County
- Pend Oreille County
- Spokane County
- Stevens County
- Whitman County
- Colville Indian Reservation
- Kalispel Indian Reservation
- Spokane Indian Reservation

Name of funding opportunity:

[Text field]

Web link for funding opportunity:

[Text field]

Type of funding opportunity

[Single select]

- Federal
- State or Local (public)
- Private (foundation or other private funding source)

Due date of application for funding opportunity:

Please ensure that you submit this request with enough time to work with a grant writer to prepare a high-quality application.

[Date field]

Grant Writer Information

Please provide the name and contact information of the grant writer/s your organization plans to work with for this project. Confirmation emails will be sent to the organization contact and the grant writer contact listed here.

[Text box]

Please verify your organization’s eligibility for this grant opportunity by selecting one of the following options.

Grant Writing Stipends are designed to support organizations pursuing eligible funding opportunities. We ask for you to verify your eligibility for the grant opportunity you have in mind. You can do that by scheduling a free eligibility coaching session with a grant writing consultant (one-week turnaround time) or explaining in writing how your organization is eligible for the grant. We have prepared this eligibility coaching video as a resource to support making your eligibility determination:

<https://fathom.video/share/-qesDz2BjS63APx4MHsTCHPxkjuWxLY->

[Single select]

- Schedule a free grant eligibility coaching session [opens sign-up option for specific dates/times]
- Tell us how you are eligible [opens text box]

Attestation

This opportunity provides up to \$5,000 in Grant Writing Stipend dollars for each eligible applicant. If you would like to use these funds for more than one grant proposal, each specific funding request must go through the application and approval process. If you participate in BHT’s Grant Writing Stipend program, it is your responsibility to maintain your own contract with a grant writer and to communicate with them about how you will proceed if the project exceeds the potential total available to your organization. Your organization is responsible for paying contractor fees if your grant writer’s time exceeds the maximum allowable per organization.

[Check box]

- I agree.

Submit Button

Confirmation Page Text:

Thank you for applying to Better Health Together’s Grant Writing Stipend program. Someone from Better Health Together will reach out within 3 business days.