

**Please Note:** This worksheet is meant to assist applicants with completing the Letter of Intent (LOI) step of the Responsive Grant application process. All of the questions from the LOI are listed below in the same order and under the same categories as they appear on the LOI online, and question word limits are indicated where applicable. **This document is not meant to replace the LOI and should not be submitted to the Foundation.**

### Organization Information

- Organization name
- Street address
- City
- State
- Zip Code
- Main Phone Number
- Website Address
- Brief organizational background
- Mission Statement of Applicant Organization

### Contact Information

The information listed below must be submitted for the main point of contact for the project and the head of the organization.

- First Name
- Last Name
- Job Title
- Office Phone Number
- Office Phone Extension
- Email Address

## Program and Grant Information

### General Information

- Program Title
- Brief Description of Program (please limit to 50 words or fewer)
- Total Program Budget Amount
- WHF Grant Request

### Relation to the Foundation's Priorities

- WHF's strategic plan guides all funding decisions with our focus in the following eight areas: behavioral health services, community capacity building, healthy aging, healthy eating/active living, integrated care, two-generation family services, organizational capacity building, and public policy advocacy. Please select one or two of these funding areas you believe your grant request will best target and briefly describe how your organization proposes to address those funding areas. (150 word limit)
- The WHF encourages collaboration within the community. Please identify partners or collaborating agencies contributing to this program. (150 word limit)

### The Need and the Underlying Causes

In the two questions that follow, the WHF is interested in understanding the evidence establishing the existence of the need and its underlying causes which will be addressed by the proposed grant. Please note, if the applicant is invited to submit a full application, there will be an opportunity to address more fully the evidence establishing the need.

- What specific need will the proposed program address with WHF funding? (150 word limit)
- How will the program address that need? (150 word limit)

## Demographics

- How many individuals do you anticipate this program will serve?
- What percentage of the people served by this program live in the WHF's service area (City of Williamsburg, James City County, York County)?
- What percentage of the people served by this program is estimated to be below 200% of the [Federal Poverty level](#)?
- What other demographic characteristics of the people expected to be served by a WHF grant would you like to share with us? (150 word limit)

## Attachments

- [WHF Program Budget Packet](#) (Online submission required)