

# New Applicant

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*The Henderson-Wessendorff Foundation*

## REQUEST INFORMATION

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### **Amount requested:\***

*Character Limit: 20*

### **Total project, program or operating cost:\***

*Character Limit: 20*

### **Amount of funds received to date in support of the total cost of the project, program or operations:\***

*Character Limit: 20*

### **List outstanding funding requests related to this project, program, or operations:\***

*Character Limit: 500*

### **Upload a detailed budget for the amount requested.\***

If requesting operating support, upload the organization's budget.

*File Size Limit: 6 MB*

### **When do you plan to use these grant funds?\***

*Character Limit: 100*

### **What needs have been identified, and how will the requested funds be used to address these needs?\***

Include geographic area and numbers to be served.

*Character Limit: 4000*

### **Which organizations will help to accomplish your plan?\***

Include entities, facilities, partnerships, etc.

*Character Limit: 1000*

### **Are there other organizations addressing the same need?\***

If so, indicate how the organization or proposal differs in scope or approach.

*Character Limit: 3000*

## REQUEST CODING\*

Options listed below are used for internal classification purposes and do not represent the Foundation's areas of focus for grants. Please visit [www.hw-foundation.com](http://www.hw-foundation.com) for the

Foundation's grant guidelines.

### **Target Population**

Choose the best option.

#### **Choices**

Abuse/Neglect Victims  
Behavioral/Mental Health  
Disaster Victims  
Economically Challenged  
General Population  
Homeless  
Intellectually/Developmentally Disabled  
Physical Health Conditions/Illnesses  
Physically Disabled  
Substance Abuse Victims  
Unemployed/Underemployed  
Veterans  
Other

### **Program Area\***

Choose the best option.

#### **Choices**

Animals  
Community Development  
Education  
Employment  
Environment  
Food, Agriculture & Nutrition  
Government  
Health & Wellness  
Housing  
Human Services  
Legal  
Public Benefit  
Public Safety  
Recreation & Sports  
Religion  
Science & Technology  
Social Science, Culture & Humanities  
Other

### **Geographic Area\***

Choose the best option.

#### **Choices**

Blanco Area  
Fort Bend County  
Greater Houston

Richmond  
Richmond and Rosenberg  
Rosenberg  
Texas  
Other

### **Funding Type\***

Choose the best option.

#### **Choices**

Construction  
Equipment  
Land Acquisition  
Operating Support  
Program Development/Support  
Research  
Scholarships/Endowments  
Other

### **Age Group\***

Choose the best option.

#### **Choices**

Infants to Preschool (under 5 years)  
Children & Youth (0-19 years)  
K-12 (5-19 years)  
Adolescents (13-19 years)  
Adults  
Senior Citizens  
All Ages

## **ORGANIZATION AND BOARD INFORMATION**

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### **Mission statement:\***

*Character Limit: 300*

### **Provide a brief history and describe the current work of the organization.\***

Include geographic area, population served, and a list of programs with brief descriptions.

*Character Limit: 4000*

### **Upload the organization's strategic plan.**

*File Size Limit: 4 MB*

### **Upload an organizational chart.**

*File Size Limit: 2 MB*

**Upload a list of the organization's current board members.\***

Include their company and community affiliations, and number of years served.

*File Size Limit: 2 MB*

**Describe how board members support the work of the organization.\***

*Character Limit: 1000*

**Describe upcoming leadership changes or changes which occurred during the past two years.\***

*Character Limit: 1000*

## *FINANCIAL INFORMATION*

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**Fiscal year end date:\***

*Character Limit: 10*

**Upload the organization's current, board approved, budget.\***

*File Size Limit: 4 MB*

**Upload the organization's previous budget.\***

*File Size Limit: 4 MB*

**Upload the organization's most recent reviewed, compiled, or audited financial statements.**

*File Size Limit: 6 MB*

**Upload the organization's internal financial statements for the previous fiscal year.\***

*File Size Limit: 6 MB*

**Does the board have a reserve policy?\***

If so, provide a description and the current reserved amount.

*Character Limit: 1000*

**Does the organization have an endowment fund?\***

If so, what is the current amount and what percentage is available annually for expenditure?

*Character Limit: 1000*

**Does the organization file an IRS Form 990?\***

If so, the Form 990 will be reviewed through online sources and you will be contacted if additional information is needed.

**Choices**

Yes

No

## *ADDITIONAL DOCUMENTATION*

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### **Upload additional documents important to this request. (optional)**

*File Size Limit: 6 MB*

### **Upload additional documents important to this request. (optional)**

*File Size Limit: 6 MB*

### **Upload additional documents important to this request. (optional)**

*File Size Limit: 6 MB*

## *FEEDBACK*

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### **What feedback would you give to the Foundation about our grantmaking process or system?**

Responses to this question will not affect future grant decisions for your organization. We truly wish to improve and streamline our process where possible.

*Character Limit: 10000*

## *EXECUTIVE DIRECTOR ACKNOWLEDGMENT*

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If you **are** the Executive Director, skip to the *Organization and Board Information* section.

If you **are not** the Executive Director, enter the email address of the Executive Director, copy the text below, click *Compose Email*, and paste this text in the Body of the email with the subject line *Action Required*.

*Body Text to Copy:* Please look for a separate email with instructions to acknowledge the request to The Henderson-Wessendorff Foundation.\*

*Character Limit: 254*

Your organization is requesting a grant from The Henderson-Wessendorff Foundation. To acknowledge this request, enter the requested amount and proposed use of funds.

### **Requested Amount:\***

*Character Limit: 20*

### **Proposed Use of Funds:\***

*Character Limit: 250*

 **Authorized Individual\***

If the request is approved, an Authorized Individual will need to be a user in our online grants system to electronically sign grant agreements. If the Authorized Individual is not already an established user, we will create their user account and send log on instructions to their email address.

Are you authorized to execute a grant agreement on behalf of your organization?

**Choices**

Yes

No



If you are not, type the name, title, phone number, and email address of the individual who is authorized to execute a grant agreement.

*Character Limit: 500*

 **Your Signature\***

First and Last Name:

*Character Limit: 50*



Your Title:\*

*Character Limit: 50*



Your Email Address:\*

*Character Limit: 254*



Date:\*

*Character Limit: 10*