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**2023 Grant Application Instructions**

Thank you for participating in the Delta Dental of Arizona Foundation 2023 Grant Cycle. If you have any questions about your program’s fit within Grant Guidelines or about the application, please contact Espie Jauregui-Echeveste at 602-588-3915 or via email at deltafoundation@deltadentalaz.com.

**The Grant Applications are due 5:00 PM (firm) on Thursday, October 13, 2022.**

Contact the Foundation before the deadline if you have challenges submitting the application electronically. Any applications received after 5:00 PM (DDAZF timestamp) will not be considered. Once your application has been submitted, you will receive a confirmation email from the Foundation. If you do not receive confirmation within 24 hours, please contact us.

**Application**

There are two different application forms available for 2023 grants. The application chosen depends on the *program* being funded. If an organization is requesting funding for a program that has been funded by the Foundation in the last three years, use Application 1. If an organization is requesting funding for a new program, or one not funded in the last three years, use Application 2.

**Application 1 (Re-Application) – for programs funded by DDAZF in last 3 years**

1. The completed Grant Application 1 includes:
* Cover Sheet (page 1)
* Narrative (page 2) – not to exceed 2 pages
* Program and Grant Budgets (page 3)
* Grant Budget Narrative (page 4)
* The application must be provided only as a **WORD** document. **Do not save as a PDF document.** **Use your organization name when you save the file: *e.g. ACME 2022 Grant Application. Do not use Delta Dental in the file name.***
1. Supply Donation Request Form
	* Please complete this form if your program requires Smile Bags (toothbrush, toothpaste, floss, bilingual oral health education card, and a plastic bag to hold these items). If your program is funded, this form will be used to provide the supplies requested.
	* One Supply Donation form will be accepted per organization. *You may request additional supplies on this form for non-funded programs, although Delta Dental will only accept* ***ONE*** *supply request per organization per year.*

**Application 2 – for programs NOT funded by DDAZF in the last 3 years**

1. The completed Grant Application 2 includes:
* Cover Sheet (page 1)
* Narrative (page 2) – not to exceed 2 pages
* Program and Grant Budgets (page 3)
* Grant Budget Narrative (page 4)
* The application must be provided only as a **WORD** document. **Do not save as a PDF document. Use your organization name when you save the file: *e.g. ACME 2022 Grant Application. Do not use Delta Dental in the file name.***
1. Supply Donation Request Form (same as above).
2. **Remaining attachments**:
*Please submit the following documents in order as one separate, continuous* ***PDF file****:*
* Your *organization’s* operating budget for the most recent fiscal year (noting your organization’s fiscal year dates). It is acceptable to use your organization’s budget format.
* Provide a copy of the organization’s 501(c)(3) letter of determination. If the organization is a school, federally recognized Indian Tribe, or government entity, this document may not pertain.
* A current list of the Board of Directors **with their titles and affiliations**.
* Any other applicable attachments.

**Instructions**

***Cover Sheet (Page 1)***

1. Complete the first sheet of the application with contact information.
2. Program summary must be less than the allotted words and should not carry over to second page. We are looking for the program info, i.e., a sealant program for children ages 5-8 in X school district provided by an RDH; an oral health education program for 300 children at X delivered by X. Please just summarize the program and how it is delivered. Could someone reading the description understand what the program is and how it is being delivered?
	* If grant funds are awarded, this summary will be the basis for the program description in a wide variety of documents and materials. It is important to be concise in the description of your proposed program. See grantee program descriptions on website from link below:

<https://www.deltadentalaz.com/foundation/grants/grant-recipients/>

***Application Narrative (Page 2)***

1. Fully complete each of the Program Goals chart and Program Overview questions.
2. Your goal(s) is(are) EXTREMELY important and must be crafted as a SMART Goal (Specific, Measurable, Achievable, Relevant and Time bound). The Foundation would like to help you achieve your goal(s).
The grant committee reviews your answers to these questions to understand your plan to achieve the specific goal.
3. Complete the questions as succinctly and concisely as possible. Extraneous content is not necessary.

***Program Budget (Page 3)***

***We are asking for 2 budgets:***

1. The **PROGRAM** Budget – the middle column of the page – is the budget for the entire program.
2. The **GRANT** Budget – the right column of the page – is the budget for the grant you are requesting in this application (how you will utilize the funds you may receive from DDAZF).
* We compare these two budgets and can see how much of the entire program DDAZ may fund and how you are utilizing the grant funds.
* Do not include the cost of Smile Bags in your GRANT Budget. Smile Bags are to be requested separately on the Donation Request Form found with the application.

***GRANT Budget Narrative (Page 4)***

1. Each line of the **GRANT** Budget (page 3) corresponds to a line in the **GRANT** Budget Narrative (page 4). Both areas have a big, bold, red line around them.
2. The amount on the **GRANT** Budget page is to be described in the **GRANT** Budget Narrative. For example: **GRANT** Budget on Supplies in line 6: “$500.” Line 6 on the **GRANT** Budget Narrative should explain that amount: e.g. “500 Happy Teeth booklets @ $1/book = $500.” Provide an explanation for each expense listed in the **GRANT** Budget on the **GRANT** Budget Narrative.
3. When funding for staffing or salaries is part of the proposal, include in the **GRANT** Budget Narrative detail such as hours and wages per hour.