



**WILLIAM F. THIEL TRUST
REQUEST FOR PROPOSALS
2017**

Background

William Thiel was a long time philanthropist in the Wyoming County area. His generosity through monetary gifts to the hospital, fire departments, and other community organizations in Wyoming County was well known. He also left a significant legacy to the County through the creation of the William F. Thiel Trust, a fund held by the Community Foundation for Greater Buffalo. The fund document of the William F. Thiel Trust states that distributions

"from this gift shall be used and applied by the Governing Committee of The Buffalo Foundation (now the Board of Directors of the Community Foundation for Greater Buffalo) for the use and benefit of the health requirements of the residents of Wyoming County, New York."

Project Focus

In an effort to serve the health needs of the residents of Wyoming County, the Community Foundation for Greater Buffalo commissioned a comprehensive Wyoming County Health Needs Assessment (WCHNA) in 2006. The information gained through the WCHNA directed future grant making decisions for the Thiel Trust and ultimately support the development and delivery of programs and services to improve health outcomes for Wyoming County residents.

In 2012, the foundation introduced a new WCHNA entitled Wyoming County Health Needs Assessment and Guidance Report for 2013-2017. The update is based on the history of Thiel granting since 2006 along with the current healthcare environment, both on a national and local level.

The report is available at www.cfgb.org under the William F. Thiel Grants section of the website and should be reviewed in detail by any applicant before they submit a request for funding to see if their program is appropriate and fits a need in a given year. Special attention should be given to Exhibit 1 on page 4 of the Executive Summary. This table lists the health needs (a.k.a. components) for which the foundation will be requesting proposals. **THE APPLICABLE CYCLE IS THE 2017-2018 COLUMN ON THE TABLE.**

Next Steps

Applications **MUST** be submitted electronically online at www.cfgb.org utilizing the Foundant grants management system. No paper, pdf, or emailed applications will be accepted. Outcome reporting will also be online when closing the grant. Following, for your convenience, is an outline of the questions you will be required to address when completing your electronic application.

Grant seekers are encouraged to call the Community Foundation with any questions related to this application.

Timeline

11/14/16	Application available online
12/15/16 @ 4 PM	Application submission deadline
~Mid 2/17	Grant decisions communicated

Application deadline is 4 PM on December 15, 2016—NO EXCEPTIONS. Applications in draft form on the website as of 4:01 PM will be considered abandoned and not eligible for funding.

Any questions related to this application process should be directed to:

Darren Penoyer, Senior Program Officer: darrenp@crgb.org

Phone: 716-852-2857, x206

2017 Thiel Trust Grant Application Questions

NOTE: Applications MUST be submitted electronically online at www.crgb.org utilizing the Foundant Grant Lifecycle Manager system. No paper, pdf, or emailed applications will be accepted. The following questions are provided for your reference when completing the application online.

- Program name
- Amount requested
- Purpose of organization
- One sentence summary of grant purpose
- Date required
- Funding priority to be addressed (choose one of the following)
 - Health Services
 - Dental Health-Underserved
 - Medical Specialties-General Population
 - Mental Health-Underserved/Youth
 - Primary Care-Underserved, Elderly, Chronic Disease
 - Enabling Health Services
 - Access and Navigation-Seasonal Farm Works
 - Community Health/Food to Schools-Youth/Obesity
 - Emergency Assistance and Support-Low Income
 - Infrastructure
 - Affordability-General Population
 - Coordination-General Population
 - Equipment-General Population
 - Personnel-General Population
 - Public Health-General Population
- Choose no more than three of the following Health Status Priorities and list them in ascending order (1-2-3) in relation to how your program addresses them
 - Cancer-especially for adults 55-74
 - Heart disease-especially for people over 75
 - Diabetes-people over 65
 - Obesity-children and adults
 - Respiratory disease, including tobacco use-all ages
 - Suicide-youth and young adults
 - Oral health-people with low incomes
- Five year history of prior grant requests to the Thiel Trust
 - Previous requests, date submitted, and action (approved or denied) taken on each

- Financial background of organization including:
 - Annual operating expenses
 - Last fiscal year surplus/deficit
 - Accumulated surplus/deficit
 - Endowment market value

PROJECT DESCRIPTION

1. **Define priority need - why should this be done?**
 - What specific funding priority and health status priorities does proposal address? Who - and how many - will benefit? (must be quantified)
2. **Describe how this project advances one or more of the solutions identified through the WCHNA.**
 - What actions/activities are proposed to meet this need?
 - What are the distinctive features of your approach/program?
 - What is the timetable?
3. **Who will be involved?**
 - What are the qualifications of people proposed for the project?
4. **Is this a collaboration?** If so, address the following:
 - Reasoning behind the collaborative solution
 - Exact role partner(s) will play
 - Extent to which CFGB funds will be subcontracted to other agencies for support of their collaborative roles
 - Provide documentation of support from partners, specifying their own unique role
 - What other area providers deliver similar services?
 - What coordination has been/could be achieved with these providers? If not, why not?
5. **What are your intended impacts/outcomes? (quantifiable changes preferred)**
 - How will they be measured (by whom and when)
6. **If the program or activity is to continue, is the program or activity sustainable**
 - Provide evidence on how the project will be sustained

PROJECT BUDGET

- Provide a very specific complete budget breakdown, identifying costs of the individual items that constitute your funding request to the Foundation.
- Budget narrative (optional)
- What investment is your organization making in this project?
- Other funding sources from whom funds have been requested and the status of these requests.
- If project is ongoing, what are your plans for continuing funding?

CERTIFICATION OF GRANT ELIGIBILITY

Board Endorsement

- Certification that the executive director and a board officer have approved submittal of the grant request and that all information provided is accurate.
- Confirmation that organization has a Conflict of Interest policy in accordance with NYS Law.
- List of all board members

ATTACHMENTS

- Resumes or CVs of project personnel – required
- Memoranda of Understanding or letters in support of your project from collaborators or letters from other funding sources who may have expressed interest in supporting the project – optional, but strongly advised
- Recent evaluations of your programs – optional