A logo for a company

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# Early Care Spaces Application

## Organizational Information

Organization Name

Is your organization a 501(C)(3) or are you fiscally sponsored? If you select "Fiscally Sponsored" please provide the information requested on the "Fiscal Sponsor Information" page of this application.

* 501(C)(3)
* Fiscally Sponsored

Tax ID *[only answer if above answer is 501(C)(3)]*

Organization Address

Organization Phone Number

Organization Website

Mission Statement

*Describe your organization's history and mission. Include significant milestones and key accomplishments.*

Annual Budget

*Please share your total annual budget.*

Current Fiscal Year End Date

## Fiscal Sponsor Information [section only seen if you are fiscally sponsored]

Fiscal Sponsor Organization

Fiscal Sponsor Contact Name

Fiscal Sponsor Contact Email

Fiscal Sponsor Tax ID

Fiscal Sponsorship Agreement

*Please upload your signed fiscal sponsorship agreement. The agreement must be signed by your organization AND your fiscal sponsor.*

## Contact Information

Organizational Leader Name

*E.g., CEO, Executive Director, etc.*

Organizational Leader Email

Primary Contact Name

Primary Contact Title

Primary Contact Phone

Primary Contact Email

Additional Contacts for this Application

## Request Information

Project Request Length (Months)

* 12
* 24

Grant Amount Requested? (Up to $75,000 for one-year grants or $100,000 for two-year grants)

Project Start and End Date

Project Title

Funding Type Requested

* **Project Support:** Project support is restricted funding for specific programs, initiatives or projects undertaken by an organization. This funding could include relevant expenses such as compensation, materials, marketing/communications, and reasonable administrative fees and overhead costs.
* **General Operating Support:** General operating support offers flexible and unrestricted funding to uphold an organization's mission rather than targeting a specific project or program. It sustains day-to-day operations and ongoing activities according to the organization's discretion. Opting for this support necessitates robust alignment between the applicant's mission and the Foundation's mission, focus areas, and priorities.

With which focus area(s) does your work align? [Choose all that apply (at least one)]

* Supporting children in expanding their literacy and language skills.
* Creating opportunities that increase parents' and caregivers' capacity to support early literacy.
* Upskilling and career advancement for early care providers to lead language-rich developmentally appropriate and culturally connected care.

What current gaps within Oakland’s ECE ecosystem are you intending to address or alleviate?

Please summarize your project’s goals and activities and how it aligns with the ECS focus area(s) you selected.

* *In your response, describe the key strategies or approaches you will use to support early literacy and language development, and how these strategies will address the needs you’ve identified in Oakland’s ECE ecosystem.*

What specific outcomes or results do you expect, and how will you measure success? What do you hope to learn?

What communities will your project serve, and how will you ensure equitable access and support? Please include how you will build relationships and foster engagement with informal caregivers.

* *If applicable, describe how your target community has been involved in shaping this project so far and how you plan to continue involving them moving forward?*

Please list Oakland neighborhoods your project will serve.

What age group(s) will your project primarily serve?

* 0-3 years
* 3-5 years

## Project Financials

Project Budget

*Use your own project budget, or our sample project budget template.*

## Organization Financials Requested after Panel Funding Recommendations

Operating Budget

*Please upload your operating budget (i.e. profit and loss statements) for the current and previous fiscal year, as one PDF document.*

Balance Sheet

*Please upload your balance sheet for the current and previous fiscal year, as one PDF file.*

Is your organization required to complete an annual audit?

Financial Assessment

*Please discuss the current financial status of your organization. Do you anticipate any financial challenges during the project period? What are your plans to address the challenges?*