Applicant Information Webinar

FEBRUARY 2020

Sara Guillaume, Senior Director of Grantmaking Operations
Agenda

- Overview of online application and how to apply
- How to register in Fluxx
- Application process
- What to expect after you apply
Online Application Form

WWW.COLORADOHEALTH.ORG

Benefits include:

• Minimizes use of paper
• Consistency of applications
How to Apply for Funding

Getting your program funded is a straightforward process. Review the step-by-step guide below:

- **Step 0: Get to Know the Colorado Health Foundation**
  There are a number of resources we recommend you review before starting an application, including a webinar, glossary and FAQ. Review these important resources now.

- **Step 1: Review Our Open Funding**
  Visit the Open Funding page to see which programs are currently open for funding consideration.

- **Step 2: Determine Eligibility**
  While each grant has a distinct set of eligibility requirements, it's important to know that we have a set of general criteria for grantees, as well. Check your eligibility now.

- **Step 3: Submit Online Application**
  When you find a grant you want to apply for, the next step is to complete an online application. Access the online application from the open funding opportunity page.

- **Step 4: Receive a Decision**
  When we receive your application, it will be reviewed for completeness and eligibility. A program officer will be in touch to discuss your proposal or to ask questions. Learn more about the grant review process.

Questions about the grantmaking process? Contact us.

LEARN MORE
How to Apply

1. Identify an eligible open funding type or grant program
2. Consider reading the Frequently Asked Questions
3. Consider contacting the Foundation to discuss your application
4. Gather information needed to complete your proposal
5. Click on “Sign up to apply” button on funding opportunity or grant program web page to access online application

SIGN UP TO APPLY

The Colorado Health Foundation™
Find Funding

Are you working to improve the health of a community? **We can help.** The Colorado Health Foundation takes a multifaceted approach to health by investing in nonprofits, communities and the public and private sectors that matter most to improving health and health equity.

[View our funding calendar](#) to learn about what funding will be available for upcoming grant deadlines.

[FIND FUNDING] [LEARN MORE]
Available Funding for Feb. 2020

To be considered for funding, applicants must meet specific criteria, outlined in the options below. You can also view our funding calendar for a list of available funding. If you would like to see what the application looks like ahead of applying, review the sample standard application and rapid response application. Please contact a program officer if you have questions.

**Maintain Healthy Bodies**
- Funding Opportunity: Advancing Team-based Care Through Technical Assistance
- Funding Opportunity: Capital Infrastructure in Support of Team-based Comprehensive Primary Care
- Funding Opportunity: Capital Infrastructure - Intergenerational/Family Physical Activity
- Funding Opportunity: Out-of-school-time Physical Activity
- Responsive Grants Program: Children Move More

**Nurture Healthy Minds**
- Funding Opportunity: Family, Friend and Neighbor Caregiver Supports
- Funding Opportunity: Supporting Coloradans in Recovery Through Peer Support Services
- Responsive Grants Program: Youth and Young Adult Resiliency

**Strengthen Community Health**
- Funding Opportunity: Community-initiated Solutions

**Champion Health Equity**
- Rapid Response Funding: Advocacy
  > Applications for rapid response funding do not have a deadline and are accepted on a rolling basis.

**Cross-cutting Efforts**
- Responsive Grants Program: Healthy Schools
Funding Overview

Family, friend and neighbor caregivers bring many strengths to the support of children including caring relationships, the warmth of a home environment, flexibility and — typically — affordability for the families they serve. At the Foundation, we believe that regardless of child care setting, caregivers should have supports for their own well-being, opportunities to grow their knowledge of child development and access to resources to support healthy child development in support of building strong and positive relationships with the young children they provide care for.

This funding opportunity will support family, friend and neighbor caregivers to build their networks, increase access to information and resources and provide professional development in support of building stable, responsive relationships with the children in their care. Eligible applicants for this opportunity include community-based organizations, community-based coalitions or public agencies that work with family, friend and neighbor caregivers serving Coloradans living on low income and those historically experiencing less power and privilege.

Proposed projects must reflect the Foundation’s cornerstones, as our work is grounded in serving Coloradans who have low income and historically have had less power or privilege, putting the creation of health equity at the center of everything we do, and being informed by the community and those we exist to serve.

Have questions? We’re here to talk through your ideas and encourage you to connect with us before applying for funding. If you don’t already work with a program officer, please reach out to us by email or by phone at 303-953-3600, and be sure to note the county you work in and area of interest.

Grant Deadlines
- Feb 16, 2020
- Jun 15, 2020
- Feb 16, 2021
- Jun 15, 2021
Logging into Fluxx

Welcome to the The Colorado Health Foundation’s Grants Portal

Login Now:

Username
Password
Sign in

Reset or create password

The Colorado Health Foundation transitioned to a new grants management system in spring 2018. All users, both former and new applicants, will need to Create A New Account when accessing the system for the first time. Please click on the “Create an account now” button below to start, input the required information, and click on Submit Request.

You will then receive an email notification from the Foundation with login information, which will give you access to the portal and our application forms. Should you be awarded grant funding, this portal will give you access to our reporting templates.

After you’ve created an account, if you forget or want to reset your account password, click on “Reset or create password” located under the Login Now section. You will then receive an email notification from the Foundation with login information.

Create an account now

Powered by FLUXX
Creating an Account

Welcome to the The Colorado Health Foundation's Grants Portal

<table>
<thead>
<tr>
<th>ORGANIZATION INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tax ID</td>
</tr>
<tr>
<td>Organization Name</td>
</tr>
<tr>
<td>Organization Legal Name</td>
</tr>
<tr>
<td>Organization Address 1</td>
</tr>
<tr>
<td>Organization Address 2</td>
</tr>
<tr>
<td>Organization City</td>
</tr>
<tr>
<td>Organization Country</td>
</tr>
<tr>
<td>United States</td>
</tr>
<tr>
<td>Organization State/Province</td>
</tr>
<tr>
<td>Organization Postal Code (Zip)</td>
</tr>
<tr>
<td>Contact Prefix</td>
</tr>
<tr>
<td>Contact First Name</td>
</tr>
</tbody>
</table>
Registration Process

Thank you for submitting your registration request. You will receive an email from us within one business day with your login credentials.

Return to login screen
Logging into Fluxx

Welcome to the The Colorado Health Foundation’s Grants Portal

Login Now:
- Username
- Password
- Sign in

The Colorado Health Foundation transitioned to a new grants management system in spring 2018. All users, both former and new applicants, will need to Create A New Account when accessing the system for the first time. Please click on the “Create an account now” button below to start, input the required information, and click on Submit Request.

You will then receive an email notification from the Foundation with login information, which will give you access to the portal and our application forms. Should you be awarded grant funding, this portal will give you access to our reporting templates.

After you’ve created an account, if you forget or want to reset your account password, click on “Reset or create password” located under the Login Now section. You will then receive an email notification from the Foundation with login information.
What you’ll see when you first log in

IMPROVING THE HEALTH OF COLORADANS

Welcome to the Grants Portal

Apply for a Grant

Welcome to the Colorado Health Foundation’s Grants Portal

Please use Google Chrome as your browser when accessing the grants portal in Fluxx.

From this portal, you can:

- Log into your existing account or create a new account
- Submit a proposal for funding (click here for guidance)
- Review your previous and current grants, reports, and payment schedules
- Submit grant reports and requirements
- Update organization contact information

Account Management:

- To update your organization information, you can do so through clicking on “Update Organization Contact Information” found under the Organization section on the left hand side of this page. This can only be updated by the Primary Account Holder of the organization.
- To update your individual contact information, you can do so through clicking on “People” found under the Users section on the left hand side of this page.

Additional Information:

- Please note that if you begin a draft application in Fluxx and do not end up submitting it for one of our deadlines, The Colorado Health Foundation will delete your draft application approximately a month after the most recent deadline has passed.
- If you have questions or need assistance, please contact our Grantmaking Operations Department at 303-563-9693 or grants@coloradohealth.org.
- About Funding
- Sample standard application and rapid response application.
- Application Attachment Checklist
- Frequently Asked Questions
- System Navigation Assistance
Starting an Application

IMPROVING THE HEALTH OF COLORADANS

Welcome to the Grantee Portal!

.Apply for a Grant.

Welcome to the Colorado Health Foundation’s Grantee Portal

From this portal, you can:
- Log into your existing account or create a new account
- Submit a proposal for funding
- Review your previous and current grants, report, and payment schedules
- Submit grant reports and requirements
- Update organization contact information

Account Management
- If you want to create a new account, please click on the “Create an account now” button here to register in our system. Once you have completed the registration form, click on “Submit Request.” You will then receive an email from the Foundation with login information.
- If you forgot your password, please click on the “Forgot or create password” link here. You will then receive an email from the Foundation with login information.
- To log into your existing account, please type your email and password into the Login Now fields here.
- To update your organization information, you can do so through clicking on “Update Organization Contact Information” found under the Organization section on the left hand side of this page.
- To update individual contact information, you can do so through clicking on “People” found under the Users section on the left hand side of this page.

Additional Information
Navigation Inside the Application

At the top of the application –

- Reminder: This portal does not autosave.

At the bottom of the application screen –

The Colorado Health Foundation®
Providing Organizational & Contact Info

Organization & Contact Information

- Organization
- Location
- Proposal Contact
- CEO/President/ED
- Secondary Contact
- Does this grant include a Fiscal Sponsor?

Add New
Making an Application Selection

To begin, please select the type of application you will be using. If you are unsure, please contact Grantmaking Operations at 303-953-3800 or access our website for more information on our current open funding opportunities (which use the Standard Application) or our Rapid Response funding. Following your application choice, please select your desired focus from the Funding Type drop down. As you complete your application, ensure your answers address any specific criteria related to the area in which you are applying.

- I am Applying For
  - Standard Application
  - Rapid Response Funding

Proposal Information

Project Title

Please complete the application information.
Making an Application Selection

▼Full Application

To begin, please select the type of application you will be using. If you are unsure, please contact Grantmaking Operations at 303-953-3500 or access our website for more information on our current open funding opportunities (which use the Standard Application) or our Rapid Response funding. Following your application choice, please select your desired focus from the Funding Type drop down. As you complete your application, ensure your answers address any specific criteria related to the area in which you are applying.

I am Applying For

Funding Type

Proposal Information

Please complete the following fields.

Project Title

Proposal Summary (A maximum of 200 characters)

Type of Support: please select one

Funding Opportunity - Amplifying Health Advocacy
Funding Opportunity - Capital Infrastructure - Intergenerational Physical Activity
Funding Opportunity - Capital Infrastructure in Support of Team-Based Comprehensive Primary Care
Funding Opportunity - Out of School Time Physical Activity
Funding Opportunity - Supporting Coloradans in Recovery through Peer Support Services
Funding Opportunity - Supporting Healthy Minds and Youth Resiliency
Other
Responsive - Housing Programs
Responsive - Primary Care Workforce
Responsive - Young Adult Resiliency
Providing Application Information

**Full Application**

To begin, please select the type of application you will be using. If you are unsure, please contact Grantmaking Operations at 303-954-3500 or access our website for more information on our current open funding opportunities (which use the Standard Application) or our Rapid Response funding. Following your application choice, please select your desired focus from the Funding Type drop-down. As you complete your application, ensure your answers address any specific criteria related to the area in which you are applying.

**I am Applying For**  
Standard Application

**Funding Type**  
Funding Opportunity - Capital Infrac

**Proposal Information**

**Project Title**

**Proposal Summary** (A one- to two-sentence description of your proposal) 800 Character Limit

**Characters left for field: 800**

**Type of Support:**  
please select one

**Organizational / Project Budget**

For general operating requests, enter your total organizational budget for Total Project Budget. If using a fiscal sponsor, enter the Total Organization Budget for the sponsored organization/project (not the fiscal sponsor).

- **Total Organization Budget**
- **Total Project Budget**
- **Total Amount Requested**
- **Funding Term (Months)**
Providing Application Information

Geographic Area Served - Click on the '+' button to add at least one of the counties the proposed work will specifically serve, or select 'Colorado Statewide' from the list, as applicable.
Providing Application Information

Age Group - Please select the primary age group(s) targeted by your proposal. Please select at least one. If you do not know what percentage of the age groups are targeted, press the "X" to close the window that appears.

Add Age Group - Please select the age group(s) targeted by your proposal.

Edit Percentages

- All ages: 50%
- Older Adults (55+): 50%

Evenly Distributed %
Total - 100%

Update Percentages
Organization Information

- Please share the mission statement and a brief history of your organization.
- Provide a brief overview of your organization’s current programs, activities and strategic plan.
- What is your board’s role in fundraising, governance and strategic planning?
- Who are your key partners and how do you work with them?

Current Mission Statement

(To edit, please save the application and access this field by going to the ORGANIZATIONS tab of the portal and selecting UPDATE ORGANIZATION CONTACT INFORMATION. If you do not have access to edit this section, email grants@coloradohealth.org with either your updated mission statement or with a request for moderator editing rights to your organization.)

5,000 Character Limit

Characters left for field: 5000
Cornerstones

Cornerstones are the foundation upon which the Colorado Health Foundation's work is based, and that we expect to see reflected in the work of our partners. In the sections below, describe how your organization and your proposal will address each cornerstone.

Health Equity: We do everything with the intent of creating health equity.
- What specific health inequities is this work addressing?
- How will these proposed activities address those inequities?

Low Income: We serve Coloradans who have low income and have historically had less power or privilege.
- Please describe the people that your organization seeks to serve. Include socioeconomic information, as well as demographic or any other information that you think is important.
- Please share with us any other information you use (e.g., needs assessments, census data, etc.) to help you understand the context, needs or perspectives of the low income people or community you plan to serve.

Community-informed: We are informed by the community and those we exist to serve.
- How does your organization engage with the community it serves?
- How did feedback and input from the community you plan to serve contribute to the proposed work?
Proposal Information

Proposed Activities
If applying through a funding opportunity, please continue to refer to and clearly demonstrate within the application how you meet the criteria listed in the funding opportunity that you are applying under. Individual criteria for each funding opportunity can be found on our website.

- For the proposed work, describe what you will do and how you will do it.
- What is the timeline for this work and what are the major milestones that will ultimately lead to your desired results?
- What evidence have you used to decide that this approach may be effective in addressing the issue you are tackling?

10,000 Character Limit

Characters left for field: 10000

Method for Tracking Your Impact

- Thinking of the health inequities you described above, what is the specific impact you are hoping to have through your grant activities?
- If your program provides direct services, how many unique individuals do you expect to serve?
- How will you know whether this work has been successful in achieving what you hoped it would?

5,000 Character Limit

Characters left for field: 5000

Financial Information

- What are the major funding sources for your organization and for the work you are proposing?
- If this is a collaborative effort or partnership, who are the partners contributing to the project?
- What is the long-term funding strategy for this proposed work?

5,000 Character Limit

Characters left for field: 5000
Required Documents for All Applications

• Line-item budget form
• Budget narrative
• Board of directors list
• Key staff list
• Organization’s current annual operating budget
• Organization’s most current financial statements
• Organization’s most recently completed audited financial statements
# Line-Item Budget Form

**Organization Name:**

**Proposal Title:**

<table>
<thead>
<tr>
<th>Proposal Revenue</th>
<th>Year 1</th>
<th>Total Project Budget</th>
<th>Year 2</th>
<th>Year 3</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Colorado Health Fdn Request</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td>Government Grants</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td>Foundation Grants</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td>Individual Support</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td>Corporate Support</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td>Special Events</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td>Earned Revenue</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td>Contract Revenue</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td>In-kind</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td><strong>Total Revenue</strong></td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Proposal Expenses</th>
<th>Year 1</th>
<th>Total Project Budget</th>
<th>Year 2</th>
<th>Year 3</th>
<th>Total</th>
<th>Request to The Colorado Health Foundation</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Direct Costs</strong> (each item to be detailed in budget narrative)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>General Operating</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program/Project</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personnel</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Programming/Project Costs</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administrative costs related to program</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Capital</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total Direct Costs</strong></td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Other Costs</strong> (each item to be detailed in budget narrative)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consultants</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fiscal Sponsor’s Fee (if applicable)</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Indirect Costs (reserved for universities) – max 10% (if applicable)</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total Other Costs</strong></td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>GRAND TOTAL COSTS</strong></td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
</tbody>
</table>

*Please fill in amounts only for year(s) for which you are requesting funding.*

*The Colorado Health Foundation*
Uploading Your Attachments

1. For required documents, please locate your required document type and select the (+) icon below.
2. Click “Add files” to search through your computer’s files to find the document, as you would an attachment for an email.
3. A window into your computer browser will appear. Select the document(s) you wish to upload for this requirement. Double click the document.
4. The document will be added to the component, then select “Start upload” to attach the document to the application.
5. Once the upload starts, wait until it reaches 100% before closing the upload window.
6. Your document has been uploaded and now will display in the Application Documents section.

If you are unable to include documents electronically, please contact Grantmaking Operations to make arrangements for an alternative submission at 303-953-3600, toll-free: 877-225-0839 or email: grants@coloradohealth.org.

- Line Item Budget Form
- Budget Narrative
- Board of Directors
- Key Staff List
- Fiscal Sponsor Agreement (if Applicable)
- Fiscal Sponsor’s Audited Financial Statements (if Applicable)
- Current Annual Operating Budget
- Current Financial Statements
- Audited Financial Statements

The Colorado Health Foundation™
Submitting Your Application

- In order to submit the application, you must first save it.
- To access a saved but not yet submitted application, you’ll find it under “In Progress” in the Grant Requests section of your Grantee Portal.
What to Expect After You Apply

• Once your application has been submitted, you will receive an email confirming receipt
• As needed, a Foundation staff person may be in touch with you to discuss your proposal and to follow up with any additional questions
• Sometimes program officers will schedule an on-site visit so they can meet you in person and further discuss proposed activities
• The review process for most grants takes approximately four months. For rapid-response grants, we strive to make a decision within 30 days
• You will be notified as soon as a decision is reached
• At any point during the process, please do not hesitate to reach out to your assigned program officer or our grantmaking operations staff with questions or concerns
Questions?

CONTACT ME FOR MORE INFORMATION

Sara Guillaume
Senior Director of Grantmaking Operations
303-953-3600
sguillaume@coloradohealth.org