



Exit

- 1 Message from the President & CEO 2 Instructions 3 Applicant Information 4 DCA Contract Request 5 Required Attachments 6 Review My Application

You can review the information you've provided so far and make necessary modifications here. If you're satisfied with the contents of the application, click **Submit** to forward your application for consideration. If you're not ready to submit your application yet, click **Save & Finish Later**.

Message from the President & CEO

[Printer Friendly Version](#) | [E-mail Draft](#)

◆ Required before final submission

July 29, 2016

Dear Building Healthy Communities Partner,

The California Endowment (The Endowment) remains committed to diversity and inclusion and believes that collecting diversity data from our prospective and current grantees is important. Through a letter in 2014 we shared our values on diversity and inclusiveness; informed you of a transition to mandatory data collection and explained how the data collected would be used.

Since we first posted my letter, we have received good feedback about collecting diversity data and the barriers or challenges in sharing that information with The Endowment. Your comments have allowed us to re-think our strategy and approach.

Based on your feedback, we will continue to collect diversity data on a voluntary basis with the intent of supporting a growing effort in the field of philanthropy to have uniform and simple data standards by using GuideStar as a third party repository.

Starting August 1, 2016 prospective grantees will be encouraged to provide demographic data about staff and board using GuideStar Diversity Data Profile. Detailed instructions are provided on the next page as well as resources explaining how this information is posted and displayed. Should you have questions, please contact our Grant Operations Department at (800)449-4149 for assistance.

Thank you for your commitment to building a healthy and inclusive California, and for sharing critical information to support our mission. Your information is very important to us to be effective as stewards of a public trust and to continually strive to meet the needs of diverse communities that ultimately benefit from our collective efforts.

Sincerely,

Robert K. Ross, M.D.

President and CEO

Instructions

◆ Required before final submission

The California Endowment's online DCA application reflects our commitment to a greener workplace and a smaller carbon footprint. By conducting contract and related funding activities electronically, we are able to reduce the amount of paper and postage used and increase the efficiency and transparency of our review processes. We only accept DCA contract requests via our online system.

GuideStar

We require nonprofit applicants to have their current organizational profile available through the GuideStar program. If you are a for-profit entity or an individual, please move on the next section, Application Information. The Endowment requires a Bronze level profile to obtain the necessary information. We encourage to share your organization's demographic data about staff and board using GuideStar Diversity Data Profile.

GuideStar is an online database unaffiliated with the Endowment that collects key information about nonprofit organizations (e.g., board of directors, IRS Form 990) and posts the information on its website so that it is readily available to funders and the general public. There is no charge to participate; any nonprofit can update its profile free of charge.

Please visit GuideStar for more information: <http://www.guidestar.org/rxg/update-nonprofit-report/index.aspx>

- [How to Enter Required Information on GuideStar](#)
- [Collecting Demographic Information on GuideStar](#)

Universities, government agencies and for-profit companies are not required to complete the GuideStar requirement, but must provide a valid Taxpayer Identification Number (TIN), Employer Identification Number (EIN) or Social Security Number (SSN).

Application

After completing or updating your GuideStar registration, you may begin filling out the Endowment application that follows this page. Please be sure to enter all of the information requested to ensure timely review of your application. Fields marked with a red diamond are required. Questions with a blue "i" icon provide additional information or examples. A red check mark indicates fields where you can spell check your text. See legend below.

If you would like to complete your application later, click on the "Save & Finish Later" button located at the bottom of each page. The system will ask you to enter an e-mail address and select a password. You should write down your password for future reference.

Should you have difficulty submitting this request electronically, please contact our Grant Operations Department at 1-800-449-4149.

Applicant Information

◆ Required before final submission

◆	= Required field
i	= Click for example / more info
✓	= Spell check

Applicant Information

◆ Applicant Name (Sole Proprietor or Organization) Subdivision

◆ Mailing Address

◆ City ◆ State ◆ Zip Code

◆ Phone Web Site

◆ Taxpayer/Employer Identification Number or Social Security Number Annual Budget

Are you a Minority-Led Organization, defined as one whose:

- staff is 50% or more minority;
- board is 50% or more minority; AND
- mission statement and charitable program aim to predominantly serve and empower minority communities?

Executive Director/CEO/President

Prefix ◆ First Name ◆ Last Name

◆ Title ◆ E-mail

Primary Contact for Request

Check here if same as Executive Director/CEO/President

Prefix ◆ First Name ◆ Last Name

◆ Title

Mailing Address

City State Zip/Postal Code

◆ Phone ◆ E-mail

Authorized Signer - An authorized signer is an individual who is authorized by the requesting individual or organization to sign legal documents and enter into contracts on behalf of the requesting individual or organization.

Prefix

<None> ▾

◆ First Name

◆ Last Name

◆ Title

◆ Phone

◆ E-mail

DCA Contract Request

◆ Required before final submission

◆	= Required field
ℹ	= Click for example / more info
✓	= Spell check

◆ Contract Manager

Please select the name of The Endowment staff person who commissioned this request.

<Select One> ▾

◆ Did you complete the GuideStar requirement? (Yes/No). If no, please explain.



◆ Please provide a short title for this DCA contract request. (8 words or fewer)

To see examples click here



Word count 0 of 8

◆ What is the total dollar amount of your request?

◆ How long is the term of this request?

(in whole months)

◆ Please describe the proposed project or service and provide a summary of the planned scope of work, including specific outcomes, deliverables (where applicable) and timeline. [150-250 words]



Word count 0 of 250

◆ Please describe the health need or opportunity that this proposed project or service will address. [50-150 words]



Word count 0 of 150

◆ How are you or your organization uniquely qualified to undertake this scope of work, complete it on time and within budget? [50-150 words]



Word count 0 of 150

♦ **If you or your organization previously received Endowment funding, please briefly describe the project or service and its results. [50-150 words](If no previous Endowment funding, please enter "n/a".)**

Word count 0 of 150

♦ **Geographical Area Served**

Please select the primary geographic level(s) that will be served by this request (multiple levels may be selected; your first selection is considered the primary code).

<Select One>	▼
<Select One>	▼
<Select One>	▼
<Select One>	▼
<Select One>	▼
<Select One>	▼
<Select One>	▼
<Select One>	▼
<Select One>	▼
<Select One>	▼
<Select One>	▼
<Select One>	▼
<Select One>	▼
<Select One>	▼
<Select One>	▼

♦ **Age Group**

Please select the primary age range(s) of the persons that will be served by this request.

<Select One>	▼
<Select One>	▼
<Select One>	▼

♦ **Race/Ethnicity**

Please select the primary race/ethnicity of the populations(s) that will be served by this request (multiple races/ethnicities may be selected; your first selection is considered the primary code).



<Select One>	▼
<Select One>	▼
<Select One>	▼
<Select One>	▼
<Select One>	▼

♦ **Certification**

By typing your name in the box below, I hereby certify that the information provided on and uploaded to this application is true, accurate and complete to best of my knowledge. I also understand that any false statements, information or omissions provided on or uploaded to this application may be grounds for disqualification from consideration or, if discovered after the contract begins, could result in The Endowment pursuing its legal remedies.

Required Attachments

◆ Required before final submission

◆	= Required field
	= Click for example / more info
	= Spell check

Please work with your Program Manager to complete the required four (4) attachments listed below.

◆ Budget

A budget itemizes all relevant costs and fees in connection with the project.

[Click here](#) to access the correct contract budget template.

No file chosen

◆ Scope of Work

A scope of work (SOW) defines, with specificity, the services and deliverables to be provided as well as the timing of performance.

No file chosen

◆ Budget Narrative

A budget narrative provides an explanation as to how the project will be funded, justification for the expenses, and how compensation was determined.

No file chosen

◆ Term Sheet

A term sheet provides an overview of the key contract elements (such as parties, compensation and terms).

[Click here](#) for the Term Sheet template.

No file chosen

Optional support documents can include, but are not limited to, Articles, business licenses, W-9 Forms, Insurance Certificates, or DBA Certificates.

Optional Supporting Document

Click the Browse button to locate your document. Then click "upload".

No file chosen

Optional Supporting Document

Click the **Browse** button to locate your document. Then click "upload".

No file chosen

Optional Supporting Document

Click the **Browse** button to locate your document. Then click "upload".

No file chosen