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**2025 Request for Grant Applications**

**Topic: Caregiving for Aging Adults**

***$25,000 Grant - Unrestricted Funds***

**In 2025, the Seacoast Women’s Giving Circle will consider applications from organizations that support Unpaid Caregivers of Aging Adults. Successful organizations will provide information and education, access to services or resources, mental health support, respite care or advocacy.**

**Applicants must:**

* Be an approved 501(c)(3) tax-exempt organization
* Impact constituents from some or all of the following Seacoast towns of NH and Maine: Seabrook, Hampton, Hampton Falls, North Hampton, Rye, Portsmouth, Greenland, New Castle, Newington, and Kittery

**The following organizations are generally NOT eligible for support:**

* Religious or faith-based programs or organizations
* Politically partisan organizations or programs
* Organizations that discriminate in any way

**Seacoast Women’s Giving Circle Priorities:**

* Improving quality of life on the Seacoast
* Serving the socio-economically underprivileged
* Fostering independence and self-reliance
* Addressing emerging needs and issues
* Providing long-term solutions
* Investing in the expansion of existing organizations rather than the  
  creation of new ones

**TIMELINE**

**Monday, January 27, 2025: Applications due end of day, by 5:00pm.**

By April 8, 2025: Grant recipients notified

May 7, 2025: Celebration for 2025 grant recipients

Summer 2025: Funds distributed

**GRANT AMOUNT**

We are accepting applications for unrestricted funding grants of $25,000.

**2025 GRANT APPLICATION**

Please ensure all required documents of the *2025 grant application* are included. We accept documents in Word or PDF format. Applications are considered only when all components of the grant application are submitted, using the current year’s application.

Please email completed grant application (summary and narrative) and attachments (A and B) to: **give.swgc@gmail.com**

**\_\_\_Grant Application and Narrative**

**\_\_\_Attachments A, B**

**ORGANIZATION OVERVIEW**

**Please provide the following information:**

| Name of organization |  |
| --- | --- |
| Legal name (if different) |  |
| Organization Federal Tax I.D. # |  |
| Organization address |  |
| Phone number |  |
| Website address/social media addresses |  |
| Year founded |  |
| Executive Director’s name |  |
| Number of paid staff (full and part time) |  |
| Number of volunteers |  |
| Size of Board of Directors |  |
| Contact person for this application (Name, title, phone, email) |  |
| How did you learn about this grant opportunity? |  |

**NARRATIVE**

The total length of the narrative section should not exceed 3 pages in size 12 font and should answer the following questions.

1. What is your organization’s mission/vision statement?
2. How does your organization address this cycle’s topic: Supporting Unpaid Caregivers of Aging Adults?
3. How does your organization address the SWGC priorities?

* Improving quality of life on the Seacoast
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1. Tell us about how your organization collaborates with other organizations and/or the community you serve?

1. How does your organization impact constituents in SWGC’s catchment area (Seacoast towns of: *Seabrook, Hampton, Hampton Falls, North Hampton, Rye, Portsmouth, Greenland, Newington, New Castle, and Kittery*)?

Please include anything else you would like us to know.

**ATTACHMENTS - REQUIRED**

**Please clearly label all attachment files with your organization’s name and provide:**

**A.** Your organization’s most recently filed 990 Form as well as income statement, balance sheet, current operating budget, and breakdown of organizational revenue sources for past fiscal year (include any Federal, State, Corporate or Individual giving).

**B.** Board of Directors list, including length of service.