

Request Title Request Amount (drop-down) (\$7,500, \$10,000, \$15,000, or \$20,000)

Request Description (150 words) - A clear summary of what you will do, and accomplish, if this is funded.

Need for Funding/Opportunity (100 words) - Describe the need or opportunity (or both) you will be addressing with this funding.

People to Benefit (100 words) - While "all New Mexicans" is a perfectly acceptable description (some activities do have a very broad impact), if there are specific populations or groups that will be affected by the project, describe who they are.

Beneficiary Participation (100 words) - How are people who will be most affected by and/or who will benefit from this request involved?

NNMHGG Focus (100 words) - Describe how funding your request promotes the health and wellness of the people of Los Alamos, Rio Arriba and Northern Santa Fe counties.

Activities to be Funded (200 words) - Describe the activities this funding will support.

Collaboration (100 words) - Describe any partnerships or collaboration that will be involved in accomplishing your purpose.

Resource Leveraging (100 words) - Identify any additional resources (funding, personnel, infrastructure, support, etc.) you plan to leverage to advance your work.

Outcomes and Impact (150 words) - Describe up to three important changes or accomplishments you expect to achieve, and what difference they will make during and immediately after the grant period, and whether any longer-term differences may result.

Outcomes and Measurement (100 words) - Discuss how you will know you have achieved the important changes or accomplishments you have identified, what measures you will use to track your achievement during the grant period, and how you will report your accomplishments at the end of the grant period.

Long Term Impact (100 words) - Identify any possible changes or other evidence that might indicate your work has made long-term differences (impact) after the grant period ends.

Sustainability (100 words) - Discuss how this work will be sustainable after the grant period; or, if this is a finite project, how you will support continuing impact after the project ends.

Geographic Focus of Activities - Describe the geographic location(s) where funded activities and work will be done- where staff will work, where people will be involved and things will happen during the grant period. Explain why this geographic focus best serves the purposes of the funding.

Geographic Range - Primary *(Range: Where Work Happens) - Why are there so many lookalike [Geography sections?](#) (dropdown)

Click [here](#) to view the map.

Statewide' is not offered as an option because this should describe where activities are taking place. Few non-government nonprofit organizations in New Mexico are capable of sustaining primary activities in all 33 counties at the same time.

* Geographic Range – Primary - Note the county or area where the most activity will take place during the term of the grant. (dropdown)

Budget Table (*Project*) - Please click on the button below to complete the budget table. When the table opens, you may drag the window larger to see more of the table at once.

Note: there are two Income columns to distinguish Projected & Committed Funds (place the amount you're requesting from Con Alma in the 'projected' column)

Expenditures

Note: there are two Expenditure columns (total project budget) & (amounts you're requesting from Con Alma)

Attachments (upload): Organization Current Annual Budget - Attach the most current operating budget for the entire organization. Do not include your audited financials.

Grant Communications - The person completing this application form is currently the 'Primary Contact' for this grant request. The email address of the Primary Contact will receive all communications related to the application, including whether the form needs additional information and whether review activities need to be scheduled.

* Grant Communications - If the application is approved, the Grant Communications Contact will receive emails about requirements and reports, including due dates and deadlines. Is the Primary Contact for the application process the person who should receive these communications? (If a development staffer, volunteer/contract grant writer or other person who will not be involved in the activities funded by the grant is managing the application process, select 'no'.)

Additional/Alternate Grant Communications Contact - If your request is approved and you wish an additional contact person to be cc'd on grant communications, provide their name and email here:

Authorization - By completing the fields below, the applicant certifies that the submission of this funding application and budget information has been authorized by the organization's Chief Executive and/or Board of Directors.

* Name of Person With Authorization Authority / Title & Date

The individual with fiduciary authority to bind the organization to execute contracts or agreement.