

# 2027 Women to Women Giving Circle

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*Illinois Prairie Community Foundation*

## *Information For Applying for a Grant from IPCF/Women to Women Giving Circle*

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Please read the following information before beginning the grant application.

IPCF's Women to Women Giving Circle Grants are open to nonprofit programs and projects that focus on improving life for women and children in Central Illinois. The specific focus for 2027 grants is for programs offering assistance/solutions for women and children facing insecurities with housing, food, transportation and/or childcare. Funding may support a new or existing program; applicants are encouraged, but not required, to collaborate with another nonprofit organization on the grant program

- Grant funding is for the period of **January 1, 2027 through December 31, 2027**; programs seeking funding must occur during that timeframe
- **Submission deadline is September 30, 2026 at 5:00 p.m. (Central)**; this online grant system automatically closes all applications at the 5 p.m. deadline, whether they are in progress or not; no applications will be accepted after the submission deadline.
- You may not apply for the exact same program in any other IPCF grant cycles or categories; your organization may apply in multiple grant categories if the applications are for distinctly different programs and fit the criteria listed for the specific grant category
- Women to Women Giving Circle Grants awarded in 2026 ranged from \$4,000-\$15,000; applicants may not request a grant for more than \$20,000
- Women to Women will fund programs for **up to two** consecutive grant cycles (funding is not guaranteed in second year); after that, program should have the ability to become self-funded or find alternate funding sources
- Program must primarily serve residents of McLean, DeWitt, Livingston or Logan counties; programs do not have to serve all four counties
- Applicants must have tax-exempt status under Section 501(c)(3) of the Internal Revenue Code, operate under a fiscal sponsor that is a 501(c)(3) organization, be a local unit of local, county, state or federal government or be a tax-exempt religious organization as recognized by the IRS
- Program must be operated and organized in such a manner that no applicable anti-discrimination laws are violated; program must not proselytize for a particular religion or cause
- Organizations that have received past grants from Illinois Prairie Community Foundation must be current on all grant Final Reports
- Executive Director, CEO or President of the Board of an organization applying must approve the application

***Criteria Given Greatest Consideration***

- New programs and those offering creative and innovative solutions to address the identified need by building on proven practical methods; programs that have received repeated past funding will receive less consideration
- Has potential to be on-going and self-sufficient beyond the time of funding
- Utilizes clear methods of measuring and reporting results with emphasis on objective, quantifiable measurements
- Is cost effective and includes a complete and clear budget

***What Is Not Funded***

- Capital improvements or expenditures (*for example: vehicles, new windows for facility, copy machine for office or a walk-in freezer for a food bank*)
- Non program-related expenses (*grant committees prefer not to fund personnel expenses, however stipends to engage a qualified professional from another entity to conduct a program is allowed*)
- Sponsorship of events
- Annual fundraising events and expenses
- Conference or continuing education expenses
- Scholarships (*funding to further an individual's education for college or university is not allowed, however a sliding scale or needs-based financial assistance to participate in a program is allowed*)
- Endowment campaigns

***What's Next?***

Grant applicants will be notified of the outcome of their grant request by early January

- Organizations awarded grants will be sent a link to a Grant Agreement on this grant portal; the Executive Director, CEO or President of the Board of your organization must approve the agreement which outlines conditions and requirements for accepting the grant award
- Grant awards will be distributed beginning in January 2027 after receipt of the completed grant agreement

***Other Expectations***

- Chosen applicants will be asked to make a 10-minute oral presentation to the Grants Committee and other Women to Women members in late October to mid-November (date and location TBD). The person responsible for managing the program (along with other relevant staff members or volunteers) should make the presentation.

- A representative of the organization and one or two participants of the program, if feasible, are expected to attend and speak at the Women to Women Summer Celebration in **June 2027**.

IPCF regrets that not all projects can be funded. A denial should not be viewed as a negative reflection on an organization or program, but rather a result of the number of applications received and the amount of funding available.

**Questions?** Contact Michele Evans, Program Manager, Illinois Prairie Community Foundation, 309-662-4477 or [mevans@ilpcf.org](mailto:mevans@ilpcf.org).

### ***Glossary of Terms for This Grant:***

- **Program** refers to the specific project for which you are requesting funding, not the overall organization.
- **Goal** refers to the program's purpose or intended outcome
- **Objective** refers to targets that will move the program toward the stated goal (some grant applications call these outcomes). They should be SMART (specific, measurable, achievable, relevant and time-bound). *For example, "Sixty of 70 children will learn about the environment by the end of the six-month school garden program" or "After three weeks, 65 of 70 children will report that the program is fun and they want to continue learning new things about the environment."*
- **Activities** refer to planning and direct service activities that will be used to reach the objectives.
- **Measurement** refers to methods and metrics that will be used to determine if the objectives have been achieved. *For example, pre- and post-program questionnaires, achievement test, program evaluations, reports from teachers and parents or interviews with participants.*
- **Collaborating Partner** is another organization that is providing help in delivering the program. *For example, it IS a collaboration if your organization and other organization are each providing staff to offer a joint program; it is NOT a collaboration if you are using an outside facility to offer the program unless their staff is also involved in delivering the program.*
- **Operational Budget** refers to the operating budget for the entire nonprofit organization, not just the program for which the organization is requesting funding
- **Program Budget** (tables within the application) refers to ALL of the income and expenses related to the program that is requesting funding (*NOT just the amount requested in the application*)

### ***Requirements of This Grants System:***

The system uses **character** counts for text questions (includes spaces and punctuation); the system will display remaining characters as you enter text. You will NOT be able to submit the application if any question exceeds the limit. Questions with an asterisk (\*) require a response. You will NOT be able to submit the application if you do not answer any required question.

### **Instructions Confirmation\***

Please confirm that you have read the above information and understand the requirements for applying.

#### **Choices**

I confirm

## Organizational Information

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### GuideStar Organization ID

Character Limit: 100

### Year Organization Founded\*

What year was your organization founded?

Character Limit: 100

### Organizational Budget\*

What is the annual overall budget for your organization (NOT just the grant program).

#### Choices

\$0 - \$100,000

\$100,001 - 250,500

\$250,001 - \$500,000

\$500,001 - \$1,000,000

More than \$1,000,000

### Geographic Area Served\*

Indicate the primary geographic area this program will cover. While anyone could attend your program, what area do you realistically serve?

*To be eligible for this grant, the program must be available to residents of McLean, DeWitt, Livingston or Logan counties. However, the program does not have to be offered in all four counties. Click all counties where the program will occur.*

#### Choices

Bloomington-Normal

Greater McLean County (beyond the Twin Cities)

DeWitt County

Livingston County

Logan County

## Program Overview

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### Program Name\*

Character Limit: 200

### Amount Requested\*

How much are you requesting from the Women to Women Giving Circle for this grant?

*The total amount available to grant for ALL programs is \$60,000. Multiple grants are awarded and typically range from \$3,000 to \$20,000. Please do not request more than \$20,000.*

Character Limit: 20

### Program Description\*

Provide a brief summary of the program that includes its overall goals and the community need that it will address.

*Be concise - you will have a chance to expand on it later in the application.*

*Character Limit: 375*

### Relation to Grant Cycle Focus\*

How does this program relate to the stated focus of this year's Women to Women Giving Circle grants?

*The 2026 focus is on programs offering assistance/solutions for women and children facing insecurities with housing, food, transportation and/or childcare.*

*Character Limit: 500*

### Target Population\*

Provide a specific description of the target population.

*Character Limit: 500*

### Number of People Served\*

How many people do you expect to participate in the program?

*Character Limit: 6*

### Program Director\*

Who will direct and who will conduct the program?

*Please include a brief description of their qualifications.*

*Character Limit: 375*

### Collaborating Partner(s)\*

Is this program a collaboration with another organization?

**If a collaboration**, what is the other organization and how will they be working with you on this program?

**If not a collaboration**, did you explore possible partnerships for this program? If not, why not? If you did explore partnerships, what factors influenced your organization's decision not to pursue them?

*Character Limit: 750*

## Program Details

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### Program Starting Date\*

The program must take place between January 1, 2027, and December 31, 2027. What is the start date of the program?

*If the program is already under way, enter the date it began.*

*Character Limit: 10*

**Program End Date\***

What is the expected end date of the program?

*If the program will be ongoing, December 31, 2027, is the date by which the money, if awarded, must be expended.*

*Character Limit: 10*

**Program's Intended Purpose/Outcome\***

What is the program's purpose or intended outcome?

*Character Limit: 750*

For the following questions, identify 2-3 objectives of the program. There may be more than that, but choose the ones you feel are most important in reaching the purpose/intended outcome.

**Objectives\***

Please identify the most important objectives of the program.

*Character Limit: 750*

**Proposed Activities for Objectives\***

List both planning and direct services activities that will be used to reach the objectives above.

*Character Limit: 750*

**Objective Impact/Measurement\***

What methods and measurements will you use to determine if the objectives have been achieved (how will you know if this program has been successful)?

*Character Limit: 750*

## *Program Rationale*

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**New/Existing Program\***

This program is:

**Choices**

Existing program

New program for our organization that has been used elsewhere

A brand-new pilot program that has not been done before

**On-Going or One-Time Program\***

Will the program be on-going or offered only one time?

**Choices**

On-Going Program  
One-Time Program

## *Existing Program Questions*

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### **Existing Program Progress\***

Since this is an existing program, please discuss your progress already achieved toward the stated goal.

*Character Limit: 750*

### **Existing Program-Why Continue?\***

Why is it important to continue this existing program?

*Character Limit: 750*

### **Existing Program Funding\***

As an existing program, how long have you received funding for this program, from whom, and in what amount(s)?

*Character Limit: 750*

### **Existing Program-Previous IPCF Grant\***

Has this existing program received a grant from the Women to Women Giving Circle in the past?

*If so, please indicate when and in what amount.*

*Character Limit: 750*

## *Pilot Program Question*

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### **Pilot Program-Why Will This Program Succeed?**

Please list your assumptions and/or research as to why this pilot program is likely to lead to the stated goal.

*Character Limit: 750*

## *New Program Questions*

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### **New Program-Why Choose This Program?\***

Since this is a new program, why are you choosing to offer this program? What other organizations are doing similar work or conducting similar programs? How is your program different?

*Character Limit: 750*

### New Program-Success\*

Why do you believe this new program can be conducted successfully?

*Character Limit: 750*

## On-Going Program-Sustainability

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### Sustainability of Program\*

Since this program is intended to be on-going, what are the plans for sustaining it financially after the grant period?

*Character Limit: 750*

## Program Funding

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### Applied for Other Grants?\*

Have you applied for other grants to support this program?

#### Choices

Yes

No

### Other Sources of Funding\*

Aside from grants, are there other anticipated sources of support for this program such as in-kind gifts, special events or fundraisers?

#### Choices

Yes

No

### Partial Funding\*

If we are not able to fully fund this program, would you accept partial funding?

*Will the program continue if you are not awarded the entire requested amount?*

#### Choices

Yes

No

### Loss of Funding\*

Has your organization lost funding recently? If so, please explain how that loss has impacted this program.

*Character Limit: 750*

## *Other Grants*

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### **Info About Other Grants\***

Since you have applied for other grants for this program, to whom have you applied, in what amount, and when is a decision expected?

*Character Limit: 750*

## *Other Sources of Funding*

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### **Describe Other Funding Sources**

Please provide details about other anticipated sources of funding for this program (such as in-kind gifts, special events or fundraisers)..

*Character Limit: 750*

## *Impact of Partial Funding*

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### **Partial Funding Changes\***

If you receive partial funding, how will the program be impacted? What might be eliminated or changed? Please be specific.

**Examples:** *We would have to adjust the number of people served in proportion to the funding received OR we would not be able to provide a meal to participants at our weekly program.*

*Character Limit: 750*

## *No Partial Funding*

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### **Explanation of No Partial Funding**

If you will not accept partial funding, please detail why and whether this program will proceed if you do not receive full funding.

**Example:** *Request is to purchase a piano for the music program and there is no other source of funding, nor can we only buy part of a piano, so this program will not proceed.*

*Character Limit: 750*

## Program Budget

There are 2 tables to complete with dollar amounts, brief explanations and brief justifications in this budget area. The next question on the application provides an opportunity to add additional information. ***All AMOUNT fields are required to have a number entered - enter a 0 if no amount for that item. All text boxes have a limit of 250 characters.***

The income and expenses must balance.

### INCOME

For income table, please include the following:

1. Total amount of your grant request
2. Monetary support from other sources (*amount and source*)
3. Any "in-kind" support (*list items or time donated and estimate a dollar value*)

| FUNDS AND RESOURCES                                  | SOURCE(S) | AMOUNT(S) |
|------------------------------------------------------|-----------|-----------|
| Amount Requested                                     |           |           |
| Amount Expected from Other Sources                   |           |           |
| In-Kind Contributions                                |           |           |
| Total Amount of Funds and Resources for This Project |           |           |

### EXPENSES

For the Expenses table, please include the following:

1. The dollar amount
2. How the amount was determined (*for example, \$400 in food - 40 box lunches from restaurant X at \$10 per lunch; \$1,000 in sheet music at \$5 per piece X 25 copies X 8 pieces*)
3. The connection to the project for each expense (*for example, to increase attendance, participants will be provided with lunch; band will be performing 8 new pieces as part of performances for children*)
4. Is the cost figured into the grant request?

| <b>FUNDS AND RESOURCES</b>                                       | <b>AMOUNT</b> | <b>HOW AMOUNT WAS CALCULATED</b> | <b>CONNECTION OF BUDGET ITEM TO PROJECT</b> | <b>REQUESTED IN GRANT? (Yes, No)</b> |
|------------------------------------------------------------------|---------------|----------------------------------|---------------------------------------------|--------------------------------------|
| <b>Materials or Supplies</b>                                     |               |                                  |                                             |                                      |
| <b>Food or Catering</b>                                          |               |                                  |                                             |                                      |
| <b>Travel or Transportation</b>                                  |               |                                  |                                             |                                      |
| <b>Facilities or Rooms Rental</b>                                |               |                                  |                                             |                                      |
| <b>Participant Gifts or Compensation</b>                         |               |                                  |                                             |                                      |
| <b>Equipment</b>                                                 |               |                                  |                                             |                                      |
| <b>Personnel (Grant Committees prefer not to fund personnel)</b> |               |                                  |                                             |                                      |
| <b>Other Project Expenses</b>                                    |               |                                  |                                             |                                      |
| <b>Total Amount of Expenses</b>                                  |               |                                  |                                             |                                      |

## Budget Further Details

Regarding the program budget, please provide details of any information requiring further explanation.

***For example, list specifics for a broad category such as supplies. 200 packages of crayons at \$3 each = \$600; 200 art notebooks at \$5 each = \$1,000; etc.***

*Character Limit: 750*

## Additional Budget Document

If you have additional documentation about your budget, please upload it here.

**To upload a document:** Click the Upload a File button below, browse to the location of the document on your computer, select the document and click Open.

*File Size Limit: 2 MB*

## Program Demographics

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This information will not figure into the grant selection process. Data collected here will provide Illinois Prairie Community Foundation staff with critical data to better serve the needs of our community, plus track our granting progress for our Board of Directors, grantees and community.

### Age Served\*

*You may select up to 4 options*

#### Choices

Infants (0-5)  
Children (6-13)  
Young Adults (14-18)  
Adults  
Seniors (65+)  
All Ages

### Ethnicity Served\*

*You may select up to 8 options*

#### Choices

African American  
Alaskan Native  
Asian American  
Caucasian/White  
Hispanic/Latino  
Multi  
Native American  
Native Islander or Other Pacific Islander  
Other

**Gender Served\***

*You may select up to 3 options*

**Choices**

Men

Women

Nonbinary/Nonconforming

All Genders

**Population Served\***

*You may select up to 6 options*

**Choices**

Developmentally Challenged

Economically Disadvantaged

General Population

LGBTQ

Physically Challenged

Veterans

Women & Children

## *Applicant Expectations*

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**Grant Presentations\***

If your program is selected:

1. You will be notified by mid-November 2026 and will be asked to prepare and deliver a 10-minute presentation about your program to the Women to Women Grants Committee and members in late November/early December (date to be determined). More details about presentations will be communicated as they are confirmed.
2. A representative of your organization will attend the 2027 Women to Women Summer Celebration in June to present a brief update on the progress of grant program.

**Choices**

Agree

Disagree

**Grant Publicity\***

If you receive funding for this program, the expectations from the Women to Women Giving Circle are as follows:

1. Your organization and collaborating partner (if applicable) will announce the receipt of the grant from the Women to Women Giving Circle at Illinois Prairie Community Foundation through media release, organization website newsletter, social media, event program and/or signage.
2. You will include copies/screenshots of publicity and photos as part of your final report.

**Choices**

Agree  
Disagree

### Logo Use\*

If your organization receives funding, I/we grant permission to Illinois Prairie Community Foundation to use organization's logo in social media posts about the grant award.

*Upload logo below.*

#### Choices

Agree  
Disagree  
No Logo Available

### Logo Upload

Please upload your organization's logo. If you do not have a logo, please type "No Logo" in box below.

*Accepted file formats: JPEG, PNG, TIFF, EPS, PDF.*

**To upload a document:** Click the Upload a File button below, browse to the location of the document on your computer, select the document and click Open.

*Character Limit: 100 / File Size Limit: 5 MB*

## *Electronic Signature*

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Please affirm the following:

### Discrimination Statement\*

No person in the United States shall, on the basis of actual or perceived race, color, religion, national origin, sex, gender identity (as defined in paragraph 249(c)(4) of Title 18, United States Code), sexual orientation, marital or parental status, political affiliation, military service, physical or mental ability, or any other improper criterion, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity funded in whole or in part with funds made available by Illinois Prairie Community Foundation, and any other program or activity funded in whole or in part with funds appropriated for grants, cooperative agreements, and other assistance administered by Illinois Prairie Community Foundation.

#### Choices

Agree  
Disagree

### Fund Use Statement\*

Any funds received for this project/program will be used for the stated charitable purpose outlined in this application and in accordance with the terms and conditions enclosed in the Grant Agreement, including completion of the required reports by their deadlines.

### Choices

Agree  
Disagree

### IPCF Publicity Statement\*

We will publicize any grant received in accordance with the terms outlined in the Grant Agreement. The Women to Women Giving Circle and Illinois Prairie Community Foundation may also publicize this project/program and this grant, should this proposal be funded.

### Choices

Agree  
Disagree

### Other Funding Statement\*

Should this proposal not be funded at this time, my organization authorizes Illinois Prairie Community Foundation to share this proposal in its entirety with other potential funding sources at its discretion.

*(You are not required to agree and it will not affect grant selection process)*

### Choices

Agree  
Disagree

### Authorized Signature\*

**By typing my name and organizational title in the following space,** I certify that I am an authorized representative of the charitable organization named in this application. I further certify that this application is submitted with the full knowledge and consent of the organization's CEO, Executive Director, Board President or other person authorized to approve submission of this application.

*Character Limit: 250*

## Attachments

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Please upload the required documents indicated below.

**To upload a document:** Click the Upload a File button below, browse to the location of the document on your computer, select the document and click Open.

### IRS Letter of Determination of Tax Exempt Status\*

Please attach your organization's IRS Letter of Determination of Tax Exempt Status  
**Do not attach a copy of your organization's Illinois Sales Tax Exemption Certificate.**

*Accepted file formats: JPEG, PNG, TIFF, EPS, PDF*

If, due to the nature of your organization, you do not have an IRS Letter of Determination of Tax Exempt Status, attach a statement that you do not have the letter and why.

*File Size Limit: 2 MB*

### **Board of Officers and Directors\***

Please attach a list of your organization's board officers and directors.

*Accepted file formats: JPEG, PNG, DOC, DOCX, PDF, XLS, XLSX*

*File Size Limit: 2 MB*