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**Pathways Home Application**

**Note: Applications MUST be submitted in our online portal prior to the deadline in order to be considered for funding. This template is *only* to assist organizations in working on questions ahead of time outside of the portal. Please leave sufficient time to copy and paste your answers from your template into the online portal before the due date.**

**IMPORTANT:** If this is your first time applying for a Greater Twin Cities United Way funding opportunity, please begin by registering for a grant portal account. You will need this account to access the online application. [Click here to register.](https://junction.gtcuw.org/Nonprofit/Pages/RequestGrantsAccess.aspx) It may take up to 2 business days to receive access to the application.

Before starting your application, please review the Pathways Home RFP Guidelines [here.](https://junction.gtcuw.org/Nonprofit/FundingOpportunities/Pages/Pathways-Home-.aspx)

Thank you for applying for the Pathways Home RFP. We look forward to learning about your work.

**Important Information for Partnerships**

Pathways Home applicants may apply as a single organization or as a partnership. For partnerships, please select one organization to be the "Lead Organization". The Lead Organization will fill out the application on behalf of the partnership. Except where indicated, the Lead Organization should fill out the questions below on behalf of the full partnership, not their individual organization.

If funded, the Lead Organization will receive grant funds on behalf of the partners. Please review this RFP's eligibility before selecting your Lead Organization to ensure they meet all criteria.

**All applications are due Thursday, January 26th at 4pm.**

**Application Eligibility**

In order to be eligible to receive funding under this RFP, organizations or partnerships must meet the following criteria. Please check the boxes to certify that your organization or partnership meets these criteria:

* Your organization or Lead Organization is a 501c3 nonprofit organization or has a fiscal sponsor is a 501c3.
* Your organization or partnership works with foster youth and/or young adults transitioning from incarceration as defined in this RFP.
* Your organization or partnership serves at least 50% of individuals that have incomes at or below 200% of the Federal Poverty Guidelines.
* Your organization or partnership will focus its efforts within Hennepin and/or Ramsey counties for this grant program.
* Your organization or lead organization’s budget for the current fiscal year is $250,000 or higher

If you have questions or special considerations related to these criteria, please contact us at [rfp@gtcuw.org](mailto:rfp@gtcuw.org) to determine your eligibility.

Organization Legal Name *(If applying as a partnership, please enter the Lead Organization name)*

Are you applying as a single organization or a partnership? (check one)

* Single Organization
* Partnership

Basic Organization(s) Information

Organization Information

* (Optional) Fiscal Sponsor Name
* EIN
* Administrative Address
* Phone
* Website

Name, Title, Email, and Phone for each of the following contacts:

* Organization Primary Contact (CEO, Executive Director, Co-Director or President)
* Additional Organization Primary Contact (Optional)
* Proposal Primary Contact (If different from the organization primary contact; this individual will be the primary contact person for questions and email notifications throughout the application period)

What population will your organization or partnership serve with this grant (check all that apply):

* Foster Youth: youth between the ages of 16 and 25 who were in foster care at age 16 or older.
* Young Adults Transitioning from Incarceration: Young adults between the ages of 18-25 who have transitioned out of adult incarceration in the last year

For Partnerships Only

List of Partners

* Please provide the following contact information on all of the members of your partnership: Organization Name, Main Contact, Title, and Email

Narrative questions

1. Briefly describe your organization or lead organization's (for partnerships) history and mission.  
   Recommended Word Limit: 500 words

**1 a. PARTNERSHIPS ONLY** Tell us about your partnership. What is the history of your partnership—how long have you worked together and on what? How will you work together toward the goals of Pathways Home?  
*Recommended Word Limit: 500 words*

1. Describe your organization or partnership’s programs and services for foster youth and/or young adults transitioning from incarceration. How are these programs and services designed and offered to meet their specific needs and prevent homelessness? *Recommended Word Limit: 500 words*
2. As you look at the next few years, what is your organization or partnership’s vision for trauma-sensitive, culturally responsive programs and services that prevent homelessness for foster youth and/or young adults transitioning from incarceration?   
   *Recommended Word Limit: 500 words*
3. Phase One of the Pathways Home initiative is an 18-month program where funded partners commit to programmatic and organizational change, participation in a Community of Practice and other activities.

If awarded funding, how will Pathways Home advance the vision you articulated in Question 3? Specifically, what services or models will your organization or partnership work to expand or improve that prevent homelessness for foster youth.  
*Recommended Word Limit: 500 words*

1. Tell us how your organization or partnership will ensure leadership, staff and strategy are aligned to the goals of this initiative and have the capacity to be successful.   
   *Recommended Word Limit: 500 words*
2. Describe your organization or partnership’s work in coalitions, advocacy or other systems change activities toward creating lasting change in the homeless prevention, criminal legal system, and/or foster care sectors.  
   *Recommended Word Limit: 500 words*

Pathways Home Outcome Measures

Pathways Home is a new initiative committed to systemic change, learning, and continuous improvement. Funded partners will work with Greater Twin Cities United Way to understand the impact of Pathways Home on the individuals they support, their organizations and the housing system. Please see the RFP for more information on evaluation activities.

*Required Outcome Measures*

Please tell us how many people your organization or partnership serves in a year and how many of those people are part of the target populations for Pathways Home.

If applying as a partnership, please provide data for your entire partnership.

* Total number of people served by your organization or partnership (fill in blank)
* What year is this data from? (drop down selection – 2020, 2021, or 2022)
* Of this total, how many of these people identify as Black, Indigenous, Latinx, Asian, Pacific Islander, and/or People of Color? (fill in blank)
* For how many of this total is the race/ethnicity unknown? (fill in blank)
* Number of foster youth\* (fill in blank)
* Number of young adults who have transitioned from incarceration\* (fill in blank)
* If you are unable to report on any of this data, please tell us why (narrative)

*\*Pathways Home population definitions*

*Foster Youth: youth between the ages of 16 and 25 who were in foster care at age 16 or older.*

*Young Adults Transitioning from Incarceration: Young adults between the ages of 18-25 who have transitioned out of adult incarceration in the last year*

Grantees will also be required to report on the outcome measures below over the course of the grant period.  Please indicate if your organization or partnership will be able to report on these measures (checkboxes).

* Number of foster youth and young adults transitioned from incarceration served
* Participant housing status at 6, 12, and 18 months of the program
* Number and types of referrals made to other services or organizations
* Information or descriptions of client referrals and partnerships
* Participant feedback on quality and effectiveness of services and supports

If you answered no to any of the above, what support might you need to report on this outcome measure? (narrative)

Financial Review

If your organization **is not currently** funded by United Way’s Community Investments RFP, please complete the questions and upload the attachments below. If your organization **IS** currently funded by United Way’s Community Investments RFP, you do not need to complete this section.

Organizations applying as a partnership should fill out all of the financial information for the Lead Organization.

Questions

* Organization's Fiscal Year (for example: (1/1-12/31, 7/1-6/30, etc.)(text box)
* What is your organization’s total operating budget for the current fiscal year?  
  *If you are applying as a fiscally sponsored project or a program or department of a larger institution (program within a university), please provide your fiscally sponsored project budget here.* (text box)
* [Optional: Fiscally sponsored groups only] Provide your fiscal sponsor's total annual operating budget for the current fiscal year. (text box)
* Year of your most recent audit: (text box)
* If required by law to complete an audit ([if your organization has a current budget of](https://www.councilofnonprofits.org/nonprofit-audit-guide/state-law-audit-requirements) $750,000 or more), your organization MUST have received an unqualified opinion, free of going concerns, on your most recent audit report. Your most recent audit opinion: (Select from menu of options)
* Did your most recent audit opinion include a Going Concern paragraph?
* *Organizations that answer “yes” will not be eligible for a grant under this RFP.*

Attachments

* Most recent audit or board approved financial statements from the previous fiscal year
* IRS Determination Letter
* W9 Form
* 2022 Form 990
* 2021 Form 990
* Current fiscal year budget

If you are unable to attach any of the information above, please explain why. \_\_\_\_\_\_\_\_\_\_