

AGENCY FINANCIAL REQUIREMENTS

Amount of Funding Requested:

Have you received funding for this program from United Way of Walworth County or any other United Way?
Yes___ No___ If so, whom? _____

Are there other sources of funding that you receive? _____

Are there other agencies in Walworth County that provide a similar service? If so, whom? _____

Do you collaborate with them? Yes___ No___ If so, how? _____

How long has the program been in existence? _____

How many Walworth County residents does your program serve? When answering, do not duplicate. For example, individuals and or families are counted only once regardless of the number of times they utilize the program. _____

What are the qualification requirements for the recipients to receive program services?

Any other program details you wish to include?

ALICE: This acronym that stands for a revealed demographic: **A**sset **L**imited **I**ncome **C**onstrained **E**mployed. United Way unveiled the first ALICE report that showed 44% of Walworth County households are unable to afford life’s basic necessities. This exceeds the official federal poverty statistics. We are sharing this project data and looking for agency partners in order to assist our residents actively working in our county but still living paycheck to paycheck – one crisis away from severe poverty.

Are there ways your agency would be able to assist, or already assist, United Way of Walworth County in identifying ways to help this population? *We would like to actively participate in the ALICE project.*

The following MUST be included with your Application. Please feel free to include any additional information you feel would better outline your programs to us.

- ___ Most recent Financial Statement
- ___ Coming Year’s Budget
- ___ Copy of 501(c)3 Certificate**
***only attach if you are a new applicant*
- ___ Organization’s Brochure
- ___ Collateral Materials [optional]

MARKETING:

Do you utilize the United Way of Walworth County logo on your publications and/or Website? [i.e. brochures; power point presentations]

Have you participated in United Way sponsored or supported events? [i.e. RUN United; Day of Action]

CERTIFICATION:

In submitting this request, I certify that we meet the standards required for funding by United Way and, if selected as a participating agency, we will comply with the appropriate requirements if and/or when funding is awarded – including but not limited to – participating in United Way of Walworth County campaign fundraising and signature events to be determined.

Signature

Title

Date

Completed applications must be submitted by: **FEBRUARY 15, 2018**

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