Community Impact & Innovation Grants Guidelines & Application Details



Fall 2025

Our mission is to unite people and mobilize resources to build better lives and stronger communities.

Our vision for Chester County is a community where all residents have opportunities to achieve a vibrant and healthy quality of life.

Chester County United Way (CCUW) is requesting proposals for Community Impact and Innovation Grants that address issues related to financial stability and self-sufficiency for individuals and families. CCUW remains focused on serving ALICE (Asset Limited, Income Constrained, Employed) and addressing the needs of disadvantaged and at-risk individuals and families in Chester County by funding effective and targeted programs and services.

Only applicants with a *primary mission* to relieve food insecurity, stabilize housing, and/or provide mental/behavioral health services will be considered. In very limited cases, proposals for basic needs may be considered where the services are clearly defined, unduplicated, and of immediate need in the community. Please review the following guidelines carefully to ensure that your program or service is aligned before you submit your application.

Eligibility

Eligible organizations must:

- Provide programs/services that are fully aligned with CCUW priorities and address the needs of ALICE
- Serve primarily Chester County residents and have full-time local physical presence and programming
- Have current 501c3 status or similar tax-exempt status
- Register with the State of Pennsylvania, Bureau of Charitable Organizations (as required)
- Respond to CCUW inquiries regarding proposal details and complete reporting requirements

Eligible applicants must complete and submit the application in its entirety. Deadline for submission is 4:59 PM on Tuesday, October 14, 2025. No exceptions will be made. No late or incomplete applications will be accepted. Note: You will not be able to save and return to the application. Please save the prompts and your responses, and return to the application to submit the information. Decisions will be announced in early December.

Community Impact Priorities

Prior to each funding cycle, the target population, priorities and outcomes are reviewed and may be modified. Such modifications may result in a previously funded program or service no longer aligning with CCUW priorities. This is not an indication of the importance or quality of services, but rather targeted approaches to meaningfully impact the most immediate and emerging needs of the community.

Successful applicants will be able to measure and demonstrate outcomes related to financial stability and basic needs such that individuals and families receive:

- Food assistance
- Transitional shelter or permanent housing placement
- Assistance that otherwise stabilizes housing (i.e. home repairs, eviction prevention, aging in place modifications, unique programs that fill gaps in services, etc.)
- Legal assistance
- Mental/behavioral health services
- Clearly defined and unduplicated basic need provisions

Review & Award Process

CCUW offers a competitive grant using a zero-based funding model, open to both new and returning applicants. Funding decisions are made without consideration of past awards and are based solely on a thorough review and justification of each request. The Community Impact Council is made up of community volunteers and Board members and has sole discretion over all funding decisions. Recipients must submit periodic financial and outcome reports which are reviewed and may affect future funding.

Acknowledgment

Organizations submitting a grant proposal to CCUW acknowledge the following:

- Submission of any grant proposal is not a guarantee of funding
- All grant awards are at the sole discretion of the Community Impact Council and will be dependent in part on apparent or emerging community needs at the time of evaluation
- No Community Impact & Innovation Grant will exceed \$50,000
- CCUW retains the right to request information regarding the utilization of any grant awarded, and that all
 grant funds must be used for the terms as outlined in the submitted application unless a request to use the
 funds otherwise is submitted to and approved by the Council
- All information presented as part of the application process is true and accurate to the best of the applicant's ability

APPLICATION OUTLINE

Organization Information

- General Organization Information:
 - Name
 - Address
 - City, PA Zip
 - Phone
 - o EIN
 - CEO or ED Name
 - o ED Email
 - Name of person completing application
 - o Email
 - Phone
- Total number of clients served by organization in the most recent program year (Indicate if calendar year or fiscal year)
- Client Demographics (Optional)
 - Income range of clients
 - Age of clients
- Total number of full-time employees

Proposal Details

As briefly but completely as possible, please provide responses to the following. *Please limit narrative responses to 500 words.*

Mission Statement - Provide the mission statement of your organization.

Program or Service Description - Describe the program or service for which you are applying and how it contributes to meaningful change in your community. Describe the expected use and impact of the grant and how it will be demonstrated and/or measured.

Social Innovation - Explain any innovative approaches to program delivery or any differentiating factors that make your program or service unique. Please note any similar or duplicative programs in Chester County.

Total Amount Requested	\$
(Note: The CI Grant maximum is	\$50,000. Historically, the average grant amount has not exceeded \$20,000)

Request Justification - Provide a specific quantifiable justification for the amount requested. DO NOT include a statement of need but rather a calculation, budget reference, or other numerical evidence to support the dollar amount of your request.

Geographic Area – Please indicate whether you serve **all** or **part** of Chester County. List your top 5 service area zip codes and client counts from each.

Top 3 Funders – Please list the 3 largest funding sources for your organization and indicate what percentage (%) of your overall organizational budget those funds represent. Include United Way if applicable.

Projected Outcomes

Select the objective(s) below most closely aligned with the program/activity/services for which you are applying. Please note: performance reporting will require you to report against any outcomes selected here.

Individuals receive assistance to stabilize condition

Access to food assistance

Food pantry

On-site meal service

Meal delivery

Legal assistance

Basic needs (MUST BE clearly defined, aligned with the needs of ALICE, unique and unduplicated in Chester County, and display a high level of measurable impact)

Specify here:	
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JUCCITY HOLE.	

Individuals gain or maintain stable housing

Temporary or transitional housing or shelter

Permanent housing placement

Housing and home-buyer support services

Eviction prevention

Landlord mediation

Financial assistance

Home repairs / climatization that allow residents to maintain current living option

Individuals gain access to health services

Mental / behavioral health services (i.e. individual counseling, group therapy, pediatric treatment)

Collaboration and Partnership – Please share an example of a collaboration or partnership that strengthens or expands the outreach of any programs/activities/services described above.

Required Documents

Operating Budget
Program Budget if applicable
IRS 990 (or reference to a current Guidestar profile)