Circle of Dreams Foundation Grant Application

Form version: October 2026

Before You Apply

Thank you for your interest in Circle of Dreams Foundation. We know small nonprofits have limited staff time, so we ask only for what we need to decide. We strongly encourage you to contact us *before you submit an application* so we can talk about whether your request is a good fit.

Eligibility. We do not fund capital requests, and we do not accept applications through a fiscal agent or fiscal sponsor. Please confirm all of the following before you start:

- ☐ We are a 501(c)(3) public charity applying under our own EIN, or another organization or individual doing charitable work that has spoken with Circle of Dreams Foundation before applying
- ☐ Our annual operating budget is under $5 million
- ☐ We currently have an executive director or a dedicated steering committee
- ☐ This is a request for general operating or program/project support

Which application to use.

If you are…	Use	Narrative length
Requests for up to $5,000	Short Application	2 pages
Requests for more than $5,000	Full Application	3 pages
A current or recent grantee (funded in the last 2 years)	Renewal Application	1–2 pages

How to submit. Email your application to info@CircleOfDreams.org with the files attached or mail it to Circle of Dreams Foundation, 3401 Ponderosa Dr., Ridgway, CO 81432.

We will verify your tax-exempt status ourselves using your EIN, so you do not need to send your IRS determination letter.

If you cannot provide any of the required items, include one sentence explaining why. A missing item will not disqualify your application.

Checklist

Submit these items in this order. You do not need to return this checklist.

Item	Short (up to $5,000)	Full (over $5,000)	Renewal
Section I: Summary Sheet (signed)	Required	Required	Required
Section II: Narrative	Questions 1–3, 2 pages	Questions 1–5, 3 pages	Renewal questions, 1–2 pages
A. Organization budget, current year	Required	Required	Required
B. Project budget (project requests only)	Required	Required	Required
C. Most recent Form 990 or year-end financial statements	Required	Required	Only if not sent last year
D. Sources of Income table	Required	Required	Required
E. Year-to-date income and expenses vs. budget	Not needed	Required	Not needed
F. Board list	Required	Required	Only if changed
G. Key staff list	Required	Required	Only if changed
H. Audit or annual report	Optional	Optional	Optional

Section I: Summary Sheet

Organization

	Response
Legal name of organization	
DBA (if applicable)	
Mailing address	
EIN	
Website	
Phone	
Year founded	
Mission statement	
Geographic area served by this request	
Number of employees (full-time / part-time)	

Contacts

	Response
Executive Director or CEO: name, phone, email	
Application contact, if different: name, title, phone, email	

Request

	Response
Application type (Short / Full / Renewal)	
Type of support (General Operating / Program or Project)	
Program or project name (if applicable)	
Amount requested	$

	Response
What the grant will be used for (2–3 sentences)	
How this request fits Circle of Dreams' priorities (2–3 sentences)	
Project dates (if applicable), from / to	

Finances

	Response
Current fiscal year end date	
Current year budget: income / expenses	
Most recent completed year: total revenue / total expenses	
Program-related expenses as a % of total revenues	%
Project budget (if applicable): income / expenses	

Budget figures should match Attachments.

Board and Volunteers

	Response
Number of board members	
Percentage of board members who contribute financially	%
Number of volunteers in the past 12 months	
Approximate volunteer hours in the past 12 months (if tracked)	

Certifications – please check to acknowledge.

- ☐ We are a 501(c)(3) public charity in good standing with the IRS, **or** we are another organization or individual doing charitable work, and we have spoken with Circle of Dreams Foundation before applying.
- ☐ **If we are not a 501(c)(3) public charity:** we will use any grant funds only for the charitable purposes described in this application, and not for lobbying, political campaigns, or anyone's private benefit. We agree to sign a grant agreement, keep a separate record of how the funds are spent, report in writing each year until the funds are fully spent, and return any funds not used as agreed.
- ☐ Our organization does not discriminate in its programs, staff, board, or volunteers. Organizations with a board have adopted a non-discrimination policy.
- ☐ The information in this application is true and correct to the best of my knowledge.

Signature, Executive Director, CEO, or individual applicant: _____

Date: _____

Section II: Narrative

Short Application: Answer questions 1–3 in 2 pages or less.

Full Application: Answer questions 1–5 in 3 pages or less.

Renewal Application: Answer questions 6-9 in 2 pages or less.

Type your answers in the shaded boxes; they expand as you type. You may also answer in a separate document, labeling each answer with its heading.

1. ORGANIZATION AND PROGRAMS What needs does your organization address, and how did it come to do this work? Briefly describe your current programs, who you serve, and how many people you reached in the past year or the effect that your program had on the planet.

2. THE REQUEST What will this grant make possible?

- *Program or project requests:* describe the activities, who will benefit, and the timeline.
- *General operating requests:* describe how this funding will support your organization's work this year.

Section II: Narrative continued

3. RESULTS How will you know this funding was effective? Share one or two measures you will track and briefly describe if applicable what you accomplished or learned in the past year.

4. PARTNERS AND COMMUNITY *(Full Application only)* Who are your most important partners in this work? How does your organization include and reflect the community it serves, in its programs, staff, board, and volunteers?

5. LOOKING AHEAD *(Full Application only)* What are the biggest challenges and opportunities your organization faces over the next few years, and how are you preparing for them?

Section II: Narrative continued

For Renewal Applications only

You may refer to your Year End Grant Report where applicable to avoid duplication. Year End Grant Reports must be received before any new or renewal grants are funded.

6. RESULTS OF YOUR LAST GRANT What did our last grant accomplish? Share the measures you tracked and anything that went differently than planned.

7. WHAT HAS CHANGED What has changed in your organization since your last application (leadership, programs, finances, or the needs you see)?

8. THIS REQUEST What will this grant make possible, and how is it like or different from last time?

9. RESULTS AHEAD What one or two measures will you track for this grant?

Section III: Attachments

Label each attachment with the section and its letter (ex: Section III A. Organization Budget). Documents you already have are fine — no need to reformat them for us. If anything in your financial report that needs context (a deficit year, a one-time gift), add a short note.

A. ORGANIZATION BUDGET. Your operating budget for the current fiscal year, showing income and expenses.

B. PROJECT BUDGET *(program or project requests only).* Income and expenses for the project period, including other sources of funding.

C. MOST RECENT FORM 990 OR YEAR-END FINANCIAL STATEMENTS. Send whichever you have. If you file a 990-N (e-Postcard), send your year-end income and expense report instead. If you have an audit, you may send it, but an audit is not required. For renewal applications, only provided if you did not send last year.

D. SOURCES OF INCOME TABLE. Complete for your most recently completed fiscal year. Adjust categories to fit your organization.

Funding source	Amount	Percent of total
Government grants and contracts	$	%
Foundations	$	%
Businesses	$	%
Individual contributions	$	%
Events (including sponsorships)	$	%
Fees and earned income	$	%
In-kind contributions (optional)	$	%
Other	$	%
Total	**$**	**100%**

Section III: Attachments

E. TOP FUNDERS. List your top 3–5 institutional funders (foundations, businesses, government or individuals) for last year with amounts.

Funder (type or name)	Amount

E. YEAR-TO-DATE INCOME AND EXPENSES VS. BUDGET *(Full Application only, not needed for renewal applications)*. Your most recent report, from within the past three months. A balance sheet is not required but please include the amount of unrestricted operating cash currently available.

F. BOARD LIST. For each member: name, board office (if any), and occupation or affiliation, term dates. (*For renewal applications, only indicate changes from prior year)*

Name	Board office (if any)	Occupation or affiliation	Term start	Term end

G. KEY STAFF *(Full Application only, for renewal applications indicate only changes)*. Names, titles, and years with the organization for up to three key staff.

Name	Title	Years with organization

H. AUDIT OR ANNUAL REPORT *(optional)*. Please provide if available - a link is fine.