Caring for Colorado FOUNDATION

Youth Health and Well-Being: Part 1 Application Questions

Part 1 Application Questions

ORGANIZATIONAL PROFILE

Organization Name:
Legal Name:
Tax ID:
Tax Class:
Address 1:
Address 2:
City:
County where primary office is located (drop-down selection):
State/Province (drop-down selection):
Zip code:
Organization Phone:
Website Address:

ORGANIZATION INFORMATION

Organization Total Annual Budget:
Fiscal Year End Date:
Does the organization have an approved anti-discrimination policy?
Number of Part-time Staff:
Number of Full-time Staff:
Guidance: Include the number of paid full-time and part-time staff in the entire organization, not just the proposed work.

CONTACT INFORMATION

Executive Director Information

Guidance: The executive director/CEO listed in the application will receive an email acknowledging receipt of Part 1 submission within one business day.

First Name:
Last Name:
Title:
E-mail:
Address 1:
Address 2:
City:
State:
Postal Code (Zip):
Office Phone:
Direct Phone:

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Project Primary Contact (if different than ED)

***Guidance**: The primary project contact will be notified via email about the next steps in the review process.*

Primary Contact First Name:
Primary Contact Last Name:
Primary Contact Suffix:
Primary Contact Title:
Primary Contact Address (enter Address, City, State, Zip if different from Organization address):
Primary Contact Email:
Primary Contact Office Phone:
Primary Contact Direct Phone:

Select Caring for Colorado Priority:

☐Youth Health and Well-Being

Select Focus Area:

☐Supporting Young People
☐Strengthening Families
☐2GEN: Supporting Young People and Strengthening Families
☐Building Youth-Centered Communities

Select the strategies on which your application will focus:

***Guidance:** We encourage you to select only 1-2 strategies that most align with your organization's core work or that meet an emerging need in your community. The number of strategies selected does not affect the likelihood of receiving funding. Select only the strategies for which you plan to report on if your application is funded.*

The online form saves all strategies selected. If you change focus areas, please remove any strategies you selected in other focus areas.

Supporting Young People

Young people (ages 9-25) have the opportunity to:

☐ Cultivate healthy, supportive relationships and social networks with peers, near-peers, and trusted adults.
☐ Explore their values, interests, and goals.
☐ Contribute in meaningful ways to others and their community.
☐ Make good decisions and establish positive health behaviors.

Strengthening Families

Parents and caregivers *of young people (ages 9-25)* have the opportunity to:

☐ Strengthen family bonds and cultivate healthy parent/ caregiver-adolescent relationships.
☐ Deepen their knowledge of adolescent development and parenting strategies that support young people's health and well-being.
☐ Develop meaningful social connections with other parents, caregivers, and advocates.
☐ Access concrete support, especially in times of need. *

**This strategy must accompany at least one other strategy from the focus area.*

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Building Youth-Centered Communities

Young people (ages 9-25) have the opportunity to:

- ☐ Receive youth-centered healthcare.
- ☐ Be safe from interpersonal, family, and community violence.
- ☐ Successfully transition into adulthood.
- ☐ Access inclusive, safe spaces designed to foster social connections and promote positive health outcomes.
- ☐ Experience coordinated systems of care — especially for those with complex needs who seek services across multiple systems — that are informed by young people and their families.

2GEN: Supporting Young People and Strengthening Families

***Guidance:* Only use this Focus Area if you are serving young people ages 9-25 AND their parents/caregivers.**

Young people (ages 9-25) have the opportunity to:

- ☐ Cultivate healthy, supportive relationships and social networks with peers, near-peers, and trusted adults.
- ☐ Explore their values, interests, and goals.
- ☐ Contribute in meaningful ways to others and their community.
- ☐ Make good decisions and establish positive health behaviors.

Parents and caregivers *of young people (ages 9-25)* have the opportunity to:

- ☐ Strengthen family bonds and cultivate healthy parent/ caregiver-adolescent relationships.
- ☐ Deepen their knowledge of adolescent development and parenting strategies that support young people's health and well-being.
- ☐ Develop meaningful social connections with other parents, caregivers, and advocates.
- ☐ Access concrete support, especially in times of need. *

**This strategy must accompany at least one other strategy from the Strengthening Families focus area.*

Does your organization or proposed work meet the eligibility criteria for this funding opportunity?

***Guidance:* Focus Area eligibility criteria are based on the proposed work in the application, not the total population served by an organization.**

ELIGIBILITY FOR SUPPORTING YOUNG PEOPLE AND STRENGTHENING FAMILIES:

1. **The proposed work serves a minimum of 75% of young people who live on low incomes (at or below 260% of the federal poverty level, 80% Area Median Income, or TANF eligible).**
   ***Guidance*: Income data can be self-reported by young people or families and does not require formal documentation.**
   ☐Yes
   ☐No

OR

2. **Proposed work explicitly centers one of Caring for Colorado's priority populations.**
   ***Guidance:* By selecting this option, you are confirming that your organization or proposed work is created by and for one of Caring for Colorado's priority populations, with at least 90% of young people or families served identifying with that specific population. Multiple priority populations cannot be combined to meet the 90% threshold.**
   ☐Yes
   ☐No

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ELIGIBILITY FOR BUILDING YOUTH-CENTERED COMMUNITIES:

1. **The proposed work serves one or more of the following counties: Alamosa, Archuleta, Baca, Bent, Conejos, Costilla, Crowley, Custer, Delta, Fremont, Garfield, Huerfano, Kit Carson, Lake, La Plata, Las Animas, Lincoln, Logan, Mesa, Montezuma, Montrose, Morgan, Otero, Phillips, Prowers, Pueblo, Rio Grande, Saguache, Sedgwick, Washington, and Yuma.**

☐Yes

☐No

OR

2. **The proposal is from a School-Based Health Center that provides comprehensive, equitable healthcare to young people (ages 9-25).**

☐Yes

☐No

Is this a general operating request?

☐Yes

☐No

Guidance: Applicant must select "No" if the proposed work:

1. *Is a project of a large institution such as a university, governmental department, or hospital.*
2. *Meets the eligibility criteria, but the overall organization does not.*

Has the organization previously applied for CFC funding?

☐ Yes

☐ No

If yes, Did the organization receive funding?

☐ Yes

☐ No

Guidance: This question helps us identify if you are a first-time applicant, a returning applicant, or a previous grantee. If you are unsure if your organization has applied or been funded in the past, please select "no."

Will a fiscal sponsor be used in conjunction with this proposal?

☐Yes

☐No

If yes: Select one of the prepopulated fiscal agents or select "Other"

If "Other," Please type the Full Name, Address, City, State, Zip, Full Name of the Primary Contact (Signs Contracts), and the Primary Contact's email.

PROPOSAL OVERVIEW

Proposal Title:

Guidance: Please limit to seven words and do not include your organization's name in the title.

Total Project/Program Budget:

Guidance: This is the total expenses for the proposed work. Required only when requesting Program/Project funding.

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Amount Requested:

Guidance: If you are requesting multi-year funding, please include the total amount. For example, if you are requesting $75,000 per year for three years, the request amount is $225,000.

ONE SENTENCE PROPOSAL SUMMARY

Guidance: Here are considerations for the Proposal Summary:

- *Format is brief and should not exceed 15 words.*
- *To start the description, use an active verb.*
- *Use keywords to add context, such as rural, urban, mental health, prevention, families, grandparents, youth/family leadership, etc.*

PROPOSAL DETAILS

Proposal Start Date:

Guidance: All proposal start dates should be July 1, 2027.

Desired Term in Grant Months:

Guidance: Please input 12, 24, or 36.

Annual Anticipated Number Reached:

Guidance: The value represents the estimated number of unduplicated individuals that will be served by the proposed work annually.

Describe how Anticipated Number Reached is calculated:

Guidance: Describe how the number listed above is calculated. For example, this project will serve an estimated 50 parents/caregivers in the Strengthening Families classes, and an estimated 150 middle school students in the after-school program.

Geographic Area Served:

Guidance: If your proposed work serves multiple counties that include both rural and urban counties, select the option that best defines the work. Your organization does not have to work in all 64 counties to be considered "statewide."

County or Counties Served by Project: (Option to add counties in the online application)

Age Group(s) Served by Proposed work:

Guidance: Please only select age ranges for the proposed work. Do not select every age group served by your organization.

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DEMOGRAPHICS

What percentage of the people you serve self-identify as a person of color?

Guidance: This question asks about the demographics of your entire organization, not just the proposed work in your application.

If "Do not track":

Select the primary reason for not tracking this information:

What percentage of the people you serve live with low income?

Guidance: This question asks about the demographics of your entire organization, not just the proposed work in your application.

If "Do not track":

Select the primary reason for not tracking this information:

Is serving or representing a specific community part of your organization's mission?

Guidance: This question asks about the demographics of your entire organization, not just the proposed work in your application.

☐Yes

☐No

Guidance: We recognize that many young people hold multiple, intersecting identities and may experience overlapping forms of inequity. However, explicit focus means that an organization was established to meet the unique needs of a specific population. It is very rare for any organization to select "yes" to more than two priority populations.

If yes, please answer the question below for each of CFC's priority populations.

Do at least 90% of the people served self-identify as: *(answer yes or no)*

- → **a person of color?**
- → **2SLGBTQIA+?**
- → **living with visible or invisible disabilities?**
- → **living with newly arrived, immigrant, or refugee families?**
- → **experiencing housing insecurity?**
- → **experiencing interpersonal or family violence or abuse?**
- → **experiencing the child welfare system?**
- → **being involved in the juvenile justice system?**
- → **experiencing family instability or separation due to parents or caregivers' involvement in the justice system?**
- → **being raised by grandparents or other family caregivers?**
- → **young parents (under 26 years old)?**
- → **Living with low incomes?**

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NARRATIVE QUESTIONS

1. **Tell us about your organization.**

   ***Guidance:** This question provides an opportunity to share your organization's overall work. You might include general history or background information, organizational priorities or goals, and/or how your mission aligns with the Focus Area you selected and our Grantmaking Guiding Principles.*

2. **Describe your proposed work and who it is designed to benefit.**

   ***Guidance:** This question provides an opportunity to describe the work you are proposing and who you intend to serve. Please tie your responses to the focus area strategies you selected above. Some guiding questions include: What will you do? How will you do it? Who will you reach? What do you hope to achieve?*