**GREY MUZZLE GRANT APPLICATION 2024**

**ORGANIZATION INFORMATION**

Name:

Employer Identification # (EIN):

Address:

City; State; Zip:

Phone Number:

Email:

Website:

Contact Person:

Title:

Phone:

Email:

Are you:

( ) An open admission shelter

( ) A limited admission shelter

( ) A rescue

( ) Other:

What geographic area do you serve?

Current organization budget

Total organization revenue from the most recent 990:

Total organization expenses from the most recent 990:

If there is more than a 10% difference between your revenue and expenses, please explain why. Please explain regardless of whether your expenses are 10% more than your revenue or 10% less than your revenue.

Please indicate the current number of board members, staff, and volunteers:

\_\_\_\_\_\_\_\_ Board Members

\_\_\_\_\_\_\_\_ Staff

\_\_\_\_\_\_\_\_ Volunteers

**ANIMAL STATISTICS**

Please provide the following information for the previous year (2023):

Total number of animals:

Total number of dogs:

Total number of **senior (age 7 and up)** dogs:

Please provide the following information for dogs **currently** in your care:

Number of dogs currently in your care:

Number of **senior** **(age 7 and up)** dogs currently in your care:

Does your organization currently participate in Shelter Animals Count?

If not, please note that Grey Muzzle grantees will be required to participate in Shelter Animals Count, submitting basic data on animals in your care.

**HOUSING**

Please indicate the types of housing arrangements for dogs in your care:

**MEDICAL SERVICES**

Do you have onsite veterinary staff? If so, how many?

What routine intake medical services do you provide?

Please explain how you handle any out-of-the-ordinary medical and/or dental expenses, including emergency services?

**CURRENT PROGRAMS**

Do you have an adoption program? ( ) Yes ( ) No; If Yes, please provide a brief description.

Do you have a foster program? ( ) Yes ( ) No; If Yes, please provide a brief description.

Do you have a hospice or home care program? ( ) Yes ( ) No; If Yes, please provide a brief description.

Do you have a prevention/intake diversion program to help keep pets in their homes? ( ) Yes ( ) No; If Yes, please provide a brief description.

Please describe any other programs you provide in addition to the above:

**Program DesCription**

**Please answer the following questions about the program for which you are seeking Grey Muzzle funding.**

1. For what type of program are you ***primarily*** seeking funding (**please check only one**):

* Medical
* Dental
* Hospice
* Seniors for Seniors adoption program
* Therapy dog training
* Keeping senior dogs in their homes (prevention/intake diversion)
* Other (please describe)

If you will be providing additional types of programs with this funding, please check all that apply:

* Medical
* Dental
* Hospice
* Seniors for Seniors adoption program
* Therapy dog training
* Keeping senior dogs in their homes (prevention/intake diversion)
* Other (please describe)

1. What grant funding amount are you requesting from The Grey Muzzle Organization?
2. Approximately how many senior dogs do you anticipate serving under this grant?
3. Have you received a grant from The Grey Muzzle Organization previously? ( ) Yes ( ) No

If Yes, please list the date(s) and amount(s) of previous grants from The Grey Muzzle Organization.

a. If you currently have a Grey Muzzle grant, what percent of the grant do you have remaining?

1. Is this a new program or a supplement to an existing program?

a. If this is a new program, what groundwork has taken place to prepare to implement the program?

1. Please state the need you are trying to address. How do you know this issue requires attention? (What evidence/data do you have that it is a problem? Please provide data and/or information specific to your community or locality.)
2. How will your proposed program address the problem?Discuss the resources required to carry out the program, the activities the program entails, and the intended outcomes*.*
3. What staff or other resources from your organization are required to implement the program? Who specifically in your organization will be responsible for identifying senior dogs who will benefit from this grant?
4. Grey Muzzle values and encourages collaboration. What other organizations or entities will you partner with to implement this program, and what specifically will you do with those organizations?
5. How does your organization proactively promote diversity, equity, and inclusivity within your organization and in your work with the community?
6. Please describe how you will specifically measure your progress toward addressing the need you identified in Question 6 and the measurable results you intend to achieve. (Note: Please describe measurable results and your plan to track that data. Examples of measurable results can be found on our Grant Q & A page at http://www.greymuzzle.org/grants/faqs.)
7. How will you sustain the program when Grey Muzzle funding ends?
8. Please briefly describe your financial management practices, including who manages your organization’s revenue (i.e., volunteer or paid staff), the type of software or system used, and who will manage this grant.

**OPTIONAL QUESTIONS**

Grey Muzzle is interested in compiling national data that can illustrate trends in needed services for senior dogs. The following questions will help us assess whether collecting this type of data would be feasible without placing an undue burden on grantees. We welcome your honest input, and **the following questions have no impact on how your grant application will be evaluated.**

1. How likely is it that you could share three years of data comparing senior (7 or older) and non-senior dogs (under 7 years old) based on the following metrics?

* Intake numbers (broken down by stray, owner surrender, and transfer in from another organization)

Very likely Likely Unsure Unlikely Very unlikely

* Intake diversion/prevention (i.e., number of dogs you returned to owner or otherwise helped to remain in their homes)

Very likely Likely Unsure Unlikely Very unlikely

* Outcome numbers (broken down by adoption, euthanasia, return to owner, transfer out to another organization, and hospice/long-term foster)

Very likely Likely Unsure Unlikely Very unlikely

* Average length of stay

Very likely Likely Unsure Unlikely Very unlikely

* Average cost of care

Very likely Likely Unsure Unlikely Very unlikely

2. How much time do you think it would take your team to compile and report three years of data for senior dogs versus non-senior dogs on the metrics listed above?

Up to 3 hours 4-6 hours More than 6 hours

**Attachments to Application**

The following documents must be attached in order for your application to be considered.

* Mission Statement
* 501(c)(3) Letter
* IRS Form 990
* Current Operating Budget for Organization (Note: This is your organization’s overall annual budget.)
* Program Budget (Note: This is the budget that shows how you will allocate the funding you are requesting from Grey Muzzle. Please use the GMO budget template)
* Euthanasia Policy

**PERMISSION**

I hereby permit The Grey Muzzle Organization to make inquiries about this organization to help evaluate the grant application.

Signature: Please Print Name:

Title:

**Evaluation Criteria**

**Programmatic Evaluation Criteria**

1. The need for the program is clearly demonstrated and supported, whenever possible, with data.
2. The program model is clearly articulated. That is, the resources needed to implement the program, the program activities, and the program outcomes are clearly articulated and logically connected.
3. There is evidence of adequate staff, infrastructure, and groundwork to carry out the program as planned.
4. There is evidence that the organization will work collaboratively with other organizations.
5. There is evidence that the organization has thought honestly about disparities that exist within their organization and community and is taking steps to address those disparities.
6. There are measurable outcomes and a plan to collect related data.
7. The plan to sustain the program beyond Grey Muzzle funding is clear.

**Budget Evaluation Criteria**

1. It is clear how the funds will be used.
2. The amount requested is consistent with and reasonable concerning the number of dogs who will be helped.
3. Costs are sufficiently justified.
4. There is evidence of adequate staff and infrastructure to manage the grant funds and provide financial oversight.