



## How to Apply

Use these links to begin the process in our online system.

- [Collaboration and Community Engagement](#)
- [Policy and Advocacy](#)
- [Systems and Best Practices](#)
- [Momentum Fund](#)

Please submit by 4 p.m. on the relevant [due date](#).

Please note the following:

- Organizations may submit only one letter of intent (LOI) at a time.
- **Multi-year proposals will be considered.**
- **An organization can only hold one active grant at a time.**

(Emergency COVID-19 support is exempt; organizations that received this funding can apply through a grant program in 2021.) If your organization is currently funded through one of the grant programs listed above, you may apply for new funding if the next grant would begin after your current grant ends. If you have questions, contact your community investor.

- Once a grant has been awarded, organizations will be expected to submit an **interim report** each year of the grant and a **final report** at the conclusion of the grant. All reports are submitted online through our CyberGrants system.

[Learn more about individual grant programs.](#)

**Step 1 – Click on the link above that corresponds to the grant program you are interested in.**

**Step 2 – Register and create your secure online account OR log into your existing account.**

**First time users:** Create an account log-in and password to register for online access.

Correspondence will be sent to the email address provided; please monitor your spam/junk mail folders.

**Returning users:** Log in using your existing account. If you need to reset your password, click “Forgot your password?” The re-set email may be routed to your spam/junk folder.

### **Step 3 – Complete required information**

On the Welcome Page, select “Start a New Application.”

Please confirm you are working in the form for the grant you seek.

For technical questions, click on “Need Support?”

If we have any questions regarding your submission, one of our community investors will contact you. We will provide status updates as noted in the [Due Dates](#) section.

### **Step 4 – Next-step notifications**

We will inform you of next steps or funding decision via email. You will be notified by the dates indicated in the [Due Dates](#) section.



## Preview Form

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This is an example of the application questions with which you will be presented. It is recommended that you compose the answers to the paragraph questions in a word processing program and then cut and paste that text into the online application.

## Organization Information

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Please be sure to read the instructions for each question. This section focuses on information for your organization.

\* Legal name  
(Text)(100 character maximum)

Instructions:

- As listed with the IRS.

\* Address  
(Text)(100 character maximum)

Instructions:

- 

\* City  
(Text)(50 character maximum)

Instructions:

\* State  
(Single-Select List)

Instructions:

- (Not Applicable)
- Alabama
- Alaska
- American Samoa

- Arizona
- Arkansas
- Armed Forces  
Africa/Canada/Europe/Middle East
- Armed Forces Americas (except Canada)
- Armed Forces Pacific
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi
- Missouri
- Montana
- Nebraska
- Nevada
- New Hampshire

- New Jersey
- New Mexico
- New York
- North Carolina
- North Dakota
- Northern Mariana Islands
- Ohio
- Oklahoma
- Oregon
- Palau
- Pennsylvania
- Puerto Rico
- Rhode Island
- South Carolina
- South Dakota
- Tennessee
- Texas
- Utah
- Vermont
- Virgin Islands
- Virginia
- Washington
- West Virginia
- Wisconsin
- Wyoming

\* Zip

(Text)(20 character maximum)

Instructions:

## Contact Information

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Match your primary contact information or create a new contact. This information will be used for primary contact for all grant related information and correspondence. As the primary contact for this organization, you can make changes to the profile. *Note: it is important to keep information as timely as possible.*

\* First Name (Primary Contact)

Instructions:

(Text)(40 character maximum)

\* Last Name (Primary Contact)

(Text)(40 character maximum)

Instructions:

\* Title

(Text)(255 character maximum)

Instructions:

\* Email Address

(Text)(100 character maximum)

Instructions:

\* Telephone

(Text)(30 character maximum)

Instructions:

## Request Information

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Instructions:

\* Focus area

(Single-Select List)

- Collaboration and Community Engagement
- Policy and Advocacy
- Systems and Best Practices

• We make larger investments in opportunities to promote healthy aging through three focus areas:

• Collaboration and Community Engagement: supporting large-geographic, multi-sector community work

• Policy and Advocacy: planning, convening and/or engaging in activities to affect change

• Systems and Best Practices: improving or building systems.

All focus areas should primarily address the needs of older adults.

If you are not sure what we mean by each category, [learn more here](#).

What focus area best fits or aligns with this request?

\* Project/program title

(Text)(255 character maximum)

Instructions:

• If you haven't named your project yet, we recommend a short name (five to ten words) that reflects your main objective.

\* Total project/program budget  
(Currency)(20 character maximum)

Instructions:

\* Requested cash amount  
(Currency)(20 character maximum)

Instructions:

\* Is this a multi-year request?  
(Yes/No)

Instructions:

Number of years requested  
(Number)(15 character maximum)

Instructions:

Instructions:

- 1) Program Budget by year  
E.g., Year 1: \$96,000 / Year 2: \$90,000

Total for all years should equal Total Program Budget.

Multi-year amounts  
(Paragraph)(350 character maximum)

- 2) Amount Requested by year  
E.g., Year 1: \$56,000 / Year 2: \$50,000

Total for all years should equal Total Amount Requested.

\* Target geographic area  
(Multi-Select List)

Instructions:

- Connecticut
- ----Statewide - CT
- ----Fairfield County
- ----Hartford County
- ----Litchfield County
- ----Middlesex County
- ----New Haven County
- ----New London County
- ----Tolland County
- ----Windham County
- Massachusetts
- ----Statewide - MA

- Please select the geographic area that is expected to benefit as a result of this request. To select more than one item, hold the CTRL key and select the relevant items. We fund projects impacting Connecticut, Massachusetts, New Hampshire and Rhode Island. As most MA organizations describe their work by region instead of county, please see [here](#) for how each region is defined; a list of cities and towns by region can be found [here](#) .

- ----Boston
- ----Central
- ----Metrowest
- ----Northeast
- ----Southeast
- ----Western
- Rhode Island
- ----Statewide - RI
- ----Bristol County
- ----Kent County
- ----Newport County
- ----Providence County
- ----Washington County
- New Hampshire
- ----Statewide - NH
- ----Belknap County
- ----Carroll County
- ----Cheshire County
- ----Coos County
- ----Grafton County
- ----Hillsborough County
- ----Merrimack County
- ----Rockingham County
- ----Strafford County
- ----Sullivan County

\* Target geographic area - detail  
(Paragraph)(500 character maximum)

Instructions:

- Please list any specific geographic areas (counties, municipalities, cities, communities, and/or neighborhoods) that will be impacted by this request.

## Program Information

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\* Alignment  
(Paragraph)(1000 character maximum)

Instructions:

- How does this request align with the selected focus area?

\* Program/project summary  
(Paragraph)(1000 character maximum)

Instructions:

- What are you trying to accomplish with program?

\* Community  
(Paragraph)(1000 character maximum)

Instructions:

- Please describe the community need(s). If providing data, please reference the source.

\* Action steps & timeline  
(Paragraph)(1000 character maximum)

Instructions:

- How will this program be implemented? Please outline main phases, actions steps and time frame.

\* Partners  
(Yes/No)

Instructions:

- Are there any other partners/organizations you are working with on this project?

Other partners in this project  
(Paragraph)(1000 character maximum)

Instructions:

- Who are the other partners and what are their roles?

\* Is this a new program?  
(Yes/No)

Instructions:

Instructions:

Past performance  
(Paragraph)(750 character maximum)

- Please state past performance/impact of this program.

\* Use of funds  
(Paragraph)(1500 character maximum)

Instructions:

- How will Tufts Health Plan Foundation funds be used?

\* Committed or pending support  
(Paragraph)(1500 character maximum)

Instructions:

- List committed or pending support for this program/project. Indicate current organization name, amount and status. Do not abbreviate funder names. (e.g., Tufts Health Plan Foundation - \$50,000 pending, XYZ company - \$10,000 approved).

## Metrics

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\* People Served

Instructions:

Instructions:

\* Outcomes  
(Paragraph)(1000 character maximum)

- What are the projected outcomes or outputs?

Instructions:

\* Evaluation  
(Paragraph)(750 character maximum)

- What are you measuring and why? How do you know program is working?

## [Need Support?](#)

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