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| Chubb Charitable Foundation - Bermuda Application for Grant |

The Chubb Charitable Foundation – Bermuda focuses its charitable giving on clearly defined projects and programs with measurable objectives and outcomes that address the areas of education, the environment, and human services and help to enhance the vibrancy of the community. For more information about the Chubb Charitable Foundation – Bermuda, please contact [philanthropybermuda@chubb.com](mailto:philanthropybermuda@chubb.com).

Please complete submit this application to:

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| Chubb Charitable Foundation - Bermuda  Chubb Building  17 Woodbourne Avenue  Hamilton HM 08  Bermuda | Mailing Address:  PO Box HM 1015  Hamilton HM DX  Bermuda | O +441.299.9234  E philanthropybermuda@chubb.com |

**A. General Information**

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| Organisation Name: | Date: |
| Registered Charity Number: | Mailing Address: |
| Contact Name: | Title: |
| Telephone:  Fax: | E-mail: |
| Member of the Centre on Philanthropy? YES  NO | |

1. Brief history of the organisation:

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2. Mission of the organisation:

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3. Annual revenue sources (indicate dollar amounts and percentage of total revenue)

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| **SOURCE** | **Dollar Amount** | **Percentage of Total Revenue** |
| Government |  |  |
| Corporate |  |  |
| Foundation |  |  |
| Individual |  |  |
| Fees for Service |  |  |
| Membership Fees |  |  |
| Fundraising Events |  |  |
| Other - |  |  |
| TOTAL |  |  |

1. Please provide the following information from your most recent (audited) financial statements:

Financial Year:

Annual earned revenue: $      Annual operating expenses: $

**B. Specific Request**

5. Type of support requested:

Specific Project  General Operating  Capital Campaign  Endowment Fund  Other

Description:

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1. Amount requested: $
2. Start and end dates for this grant:

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8.Dates and amounts of previous Chubb Charitable Foundation - Bermuda grants:

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1. What community need(s) is your organisation addressing?

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10. Please describe in the below table or a separate document your:

* Goals
* Programmes and strategies to achieve the goals
* Number of people expected to benefit
* Intended outcomes of the program/strategies
* Proposed evaluation methodology

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| **Purpose of Grant** | **Related Goals** |
| Program / Project | Report on goals pertaining to the program / project |
| Capital Campaign | Report on goals pertaining to the capital campaign and its community benefit |
| Endowment | Report on goals pertaining to the endowment fund and its community benefit |
| General Operating Funds (Unrestricted) | Report on overall goals for the organisation |

***EXAMPLES ARE SHOWN BELOW – PLEASE COMPLETE THE FOLLOWING FORM***

|  | Goals | Strategies / Programs to Achieve Goal | Number of People to Benefit | Intended Outcomes of Strategies / Program | Measurement Methodology |
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| Goal 1: | PROGRAM EXAMPLE:  Advance the knowledge skills and performance of the Third Sector | 1. Hold a Fundraising workshop for charities (June 2006) 2. Rewrite and reprint the Ready! Set! Go! guide for charities (Sept 2006) 3. Hire Board Source to conduct Nonprofit Board development training (Nov 2006) | 1. ~30 charities that attend 2. All 400 registered charities 3. 3) ~40 charities that attend | 1. Increased knowledge and skills on fundraising in the Bermuda context 2. Increased accessibility to up-to-date information on setting up and running a charity in Bermuda 3. Increased knowledge on tools to effectively develop and manage your Board | 1. Workshop evaluation form and number of attendee 2. Number of website hits and annual member survey 3. Workshop evaluation forms and number of attendees |
| Goal 2: | CAPITAL CAMPAIGN EXAMPLE:  Create a language and learning based primary school and outreach centre to open in 2008 | Implement a capital campaign to raise $3M to purchase the Good School building and renovate it to suit the school and outreach program needs, and open in September 2008 | 60 students to attend school and their families | 1. Create a facility to encourage learning through creative methods 2. Attract 60 primary students (50% with learning needs) to attend the school in Sept 2008 3. Advance the learning and speech of all students | 1. On-time and budget completion of building 2. Number of students 3. Number of students to advance their speech and learning skills |
| Goal 3: | GENERAL OPERATING FUNDS  Keep students focused through a school based mentoring program | Matches students in school with volunteer mentors from the community, business sector and high school seniors who commit to spending one hour per week with a student in their school and who serve as additional role models and friends. | 400 students and 400 mentors | 1. Create 400 student/mentor relationships by June 2006 2. Increase student academic performance 3. Improve student attitude towards school 4. Improve student decision making skills | 1. Number of mentor/mentee relationships 2. Mentee survey |
| Goal 4: |  |  |  |  |  |
| Goal 5: |  |  |  |  |  |

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|  | **Goals** | **Strategies / Programs to Achieve Goal** | **Number of People to Benefit** | **Intended Outcomes of Strategies / Program** | **Measurement Methodology** |
| **Goal 1:** |  |  |  |  |  |
| **Goal 2:** |  |  |  |  |  |
| **Goal 3:** |  |  |  |  |  |
| **Goal 4:** |  |  |  |  |  |
| **Goal 5:** |  |  |  |  |  |

1. How were your goals and strategies/programmes developed?

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1. Do you have a strategic plan? Yes  No

If so, please attach a copy of the plan.

1. Have you approached other grant makers? Yes  No

If yes, please check appropriate categories:

Government  Individual  Corporate  Foundation  Other

1. Does your organisation employ or have a contract with a professional fundraiser(s)? Yes  No

If yes, please name the individual(s)

1. What are your organisation’s plans if total required funds cannot be raised?

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**C. Organisational Specifics**

1. Human Resources: Number of paid staff:

Number of Board members:

Number of volunteer staff (excluding board members):

Number of consultants currently engaged:

*Please attach a list of Staff, Board members and consultants to this application*

1. Do employees from Chubb participate as volunteers in your organisation at staff or board level?

Yes  No  If yes, please give name(s) and position(s) held:

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1. How often does your Board of Directors meet?
2. Has your organization received any type of accreditation or certification? Yes  No 
   1. If yes, please explain briefly:
   2. If no, are you in the process of applying for accreditation or certification? Yes  No
3. Is your organization in compliance with the Charities Act 1978? Yes  No 
   1. If no, please explain briefly:

**D. Attachments**

**Please submit the following with this application:**

* Most recent financial statements
* Current operating budget
* Project/Endowment/Capital campaign budget (if applicable)
* Current list of Board of Directors (including their positions on Board)
* Current list of paid staff (including consultants)