

Ohio State Bar Foundation Racial Justice Initiative

Before You Begin

Important information

A letter of intent or pre-submission conference is REQUIRED to be eligible to submit a grant application for the Ohio State Bar Foundation's Racial Justice Initiative. If you need more information, please visit www.osbf.org/RacialJustice to review updated initiative information or contact Tiffany Patterson at 614.487.4483 or tpatterson@osbf.net.

Grant applications must be submitted via this online application and will be reviewed in phases. The next deadline is March 15, 2021. requests must be submitted by 5:00 pm. Applications submitted after the deadline will be considered for the next phase, pending availability of funds and continuance of the initiative.

This initiative will conclude when dedicated funds are expended or at the direction of the OSBF's Board of Trustees. The Foundation cannot fund all grant applications and cannot meet the time constraints of some applications. Further, the Foundation may award limited or partial grants, and may pay grants in installments.

Be sure to add mail@grantrequest.com to your address book to ensure you receive our communications.

Organization Information

About the Organization

Name of Requesting Organization

Address

City State ZIP Code
 - Select One -

County

Website

Area Code and Telephone Number

Example: xxx-xxx-xxxx

Area Code and Facsimile Number
Example: xxx-xxx-xxxx

Tax ID

Tax Status (Required, if available)
<None>

Date of Incorporation

Organization Type

If other selected, please describe

Organizational Background

Provide a brief history of your organization along with its mission. Provide an overview of the organizations commitment and previous efforts to improve racial equity and justice. Describe current programs offered, the populations served, principal geographic area of service and an estimate of numbers served during the last year. Describe all affiliations.

Key Contacts

Head of Organization

Prefix First Name Middle Initial Last Name
- Select One -

Suffix
<None>

Title E-mail

Office Phone

Contact for this Request

No Check here if same as Head of Organization

| | | | |
|--------------------------|------------|----------------|-----------|
| Prefix - Select One - | First Name | Middle Initial | Last Name |
| Suffix <None> | | | |
| Title | E-mail | | |
| Office Phone | | | |

Proposal Information

Proposal

Project Title

Request Amount Project Start Date

Project End Date

Is Partial Funding Acceptable?

How would partial funding affect the project?

List other person(s) or organization(s) from whom/which funding has been or will be sought, and amount sought from each:

Is funding and/or completion of the project contingent on funding from other sources or dependent on certain conditions?

If the answer to the above is yes, identify the other funding sources, the detail of the funding requested and/or granted by other sources, and/or the detail of the conditions:

State the date the Foundation's response is needed

State the reason(s) the Foundation's response is needed by this date.

Has this request been authorized by the applicant's governing board?

When was the request authorized by the applicant's governing board?

Board Resolution/Statement

If the request was authorized by applicant's governing board, upload a board resolution or pertinent statement from board minutes.

To upload: click the Browse button, locate the document on your computer, select it; when you return to this page, click Upload.

If the request was not authorized by the Governing Board, please explain.

Has the applicant submitted a letter of intent or completed the required pre-submission conference with OSBF staff?

Date of pre-submission Conference

The mission of the Ohio State Bar Foundation is to promote the pursuit of justice and the public understanding of the rule of law throughout Ohio. The purpose of this grant initiative is to specifically address and support projects concerning systemic racism that hinder the pursuit of justice and public understanding of the rule of law for the historically marginalized communities of color in Ohio. Discuss how the proposed project conforms to the mission of the Foundation and addresses this initiatives purpose.

Project Description

The OSBF's Racial Justice Initiative aims to support projects that specifically identify, address and challenge systemic racism which hinders the pursuit of justice and public understanding of the rule of law for historically marginalized communities of color in Ohio.

As with all OSBF grantmaking programs, proposals submitted for the Racial Justice Initiative must have a strong connection to our mission. Promoting the pursuit of justice and understanding of the rule of law are centric to the OSBF's purpose and funding decisions for all grant programs.

Additionally, the OSBF encourages proposals which promote racial justice that:

- **Identify and address systemic biases**
- **Provide stable, replicable framework to eliminate systemic racism**
- **Educate the public or other external stakeholders**

- Collaborate with legal systems such as courts, law enforcement, corrections, and others
- And/or eliminate legal barriers for BIPOC collectively

At this time, the OSBF must discourage against proposals aimed at improving internal organizational issues with diversity, equity and inclusion or performing internal equitability assessments. While these tools provide meaningful insight and guide organizations toward equitable practices, OSBF grant funding is limited and cannot adequately sustain requests for internal organizational improvements.

Briefly summarize the proposal. Explain how the proposal will address systemic racism and/or promote racial justice for historically marginalized communities of color in Ohio. Outline the systems to be addressed and the expected long-term implications of the proposal.

Include a description of need for the project, socio-economic information for target population, specific goals and objectives, activities planned to meet goals and objectives, anticipated outcomes, anticipated challenges/difficulties, project timeline, qualifications of key personnel, methods of evaluation, collaborating organizations, linkages between the program and additional community resources. Describe the overall capability of applicant to conduct the project. Include a specific evaluation plan for the project's benefits and costs. Describe any data, written material, audio visual or other material that will result from this project.

Please Note: Copies of data, written materials, audio visual materials or other product developed as a result of the grant must be provided to the Foundation upon completion of project. The Foundation may reserve property rights, copyrights, and all other rights of reproduction with respect to any intellectual property produced or procured under this project.

Demographics/Authorization

Demographics

Program Area

Select the Program Area that most closely aligns with your request for funding.

OSBA District Served

You may select up to 5 Districts served directly by this request.

Please note, not all counties in a District must be served to be selected.

Geographical Area Served

You may also select up to 3 main counties served.

Population Served

You may select up to 5 populations directly served by this request.

If other selected, please describe

Age Group

You may select up to 2 Age Groups directly served by this request.

Ethnicity

You may select up to 3 Ethnic groups served by this request.

Signature of Authorized Person

By entering my name in the box below, I understand that potential grant applicants are required to submit a letter of intent OR schedule a pre-submission conference with the Foundation staff prior to completing this grant request. My signature certifies that a pre-submission conference or letter of intent has been completed as specified in the Ohio State Bar Foundation Grant Application procedures.

My signature certifies that the organization above currently has tax-exemption or other proof of status under Internal Revenue Code section 501 (c) (3), that it is not classified as "a private foundation" as defined under section 509 (a), or that I exercise authority on behalf of a qualified governmental agency.

My signature is made as one who is authorized to do so on behalf of the applicant organization.

Authorized Signer Authorized Signer Title

Authorized Signature Date

Attachments**Upload Attachments**

Upload the required documents listed below.

To upload a document:

- **Click the Browse button beneath the document name**

- **Browse the location of the document on your computer**
- **Select the document, then click OK**
- **You will return to this page**
- **Click the Upload button**

Please note, no file will be available unless you select Upload

Project Budget

Project Budget

Provide a detailed budget for the project: including anticipated expenses, details or narrative about how Foundation funds will be used, and anticipated income, including information about other sources approached for funding. Additionally, if the project is to continue beyond the grant period, what are the plans for funding the project upon termination of this grant?

Organizational Budget

Organizational Budget

Provide current year budget and proposed budget for project year(s) showing both income and expenses.

Organizational Budget Information - Audited Financial Statement
Required, if available.

Organizational Budget Information - Form 990
Required, if available.

Board of Trustees Listing

Board of Trustees Listing

Provide list of current board of trustees and their affiliations.

Board Diversity Statistics

Please help us better understand the diversity of your organization by providing a snapshot of the demographic makeup of your Board, leadership team or staff.

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| Organizational DEI Policy |
| Organizational Policy on Diversity, Equity and Inclusion |

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| Government Organization requirement |
| IRS Letter of Recognition IRS letter confirming status as a governmental unit or agency with EIN or Federal Identification Number listed. |

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| Optional Supporting Documents |
| Letters of Support (optional) Please no more than 2 letters of support. |
| Annual Report or Brochure (optional) Any readily available printed material about the organization. |
| Additional Document (optional) Any other document you wish to provide. |

SAMPLE