

BDFD 2026 Proposal Investigation Form

Welcome!

Please complete the following questionnaire to help us prepare for your site visit. This is a mutual learning opportunity—your responses will give us a deeper understanding of your organization and grant request, and the visit will offer you a chance to learn more about the Foundation and ask questions. Please keep answers concise, as we'll explore these topics further during the visit.

We appreciate your time and look forward to connecting with your team. If you have any questions while completing this form, please contact Angela Ballantyne, Grantmaking and Operations Associate, at angelab@bettyanddavisfitzgerald.org. Thank you!

Proposal Investigation

Organization Name:

Grant Request Type: *

Select one

- Capacity Building
- Capital
- Operating
- Program/Project

Request amount: *

Section I: Organizational Role & Context

1. Mission & Ecosystem Role: Briefly describe your mission and the role your organization plays in Georgia's education and/or mental health ecosystem. *

2. Current Conditions: What recent shifts in policy, funding, workforce, or community needs are shaping your work? How has your organization adapted or responded? *

Strategic Plan:

Please upload a copy of your organization's most current strategic plan, if available. (If you do not have a strategic plan, please see the next question.)

If your organization is working without a formal plan, briefly share your top three organizational priorities. (Optional)

Section II: Grant Request and Intended Impact

3. **Purpose of Request:** What is the purpose of this funding request, and how will it support your organization's current goals or priorities? *

4. **Population Served:** Who is the primary population or community that will experience change as a result of this work? *

5. **Intended Impact:** How does this work expand access or improve system functioning (e.g., workforce, coordination, policy, or service delivery)? *

6. **Intended Outcomes:** Which key measures do you use to understand progress? (How much did we do? How well did we do it? Is anyone better off?) *

7. **Equity Indicators:** What equity indicators or disparities are you aiming to shift? *

Section III: Capacity & Sustainability

8. **Positioning & Credibility:** What makes your organization well positioned to move this work forward now? This may include relationships, lived experience, community trust, policy influence, institutional role, data access, or strategic timing. *

9. **Leadership and Staff Demographics:** Describe the size and racial/gender composition of your board, executive director, and staff. *

10. **Organizational Leadership:** How does your organization's key leadership reflect the communities you serve in terms of lived experience, identities and expertise? *

Section IV: Financial Information

11. Fundraising Goal: What is the total cost of this effort, and what funding has already been secured?(For general operating support, include your annual fundraising goal and progress to date.) *

12. Please complete the information below with your last fiscal year's financial information.

Fiscal Year (e.g., June 30, 2024) *

Revenue *

Expenses *

Surplus/Deficit *

Operating Reserves (Unrestricted funds set aside for financial stability) *

Endowment, if applicable (Restricted funds for long-term sustainability)

13. Revenue Composition - Please estimate your revenue sources as percentages (total percentage should = 100%): Government; Foundations/Philanthropy; Corporate; Individual Donors; Earned Revenue/Contracts; Other (specify) *

Required Attachments

Current operating/organizational budget: *

P&L statement from the last fiscal year: *

Most recent audit:

If you do not have an audit, please include an explanation below.

Section V: Additional Information

14. Is there anything else you would like us to know? (Optional)

15. Please provide the name(s) and title(s) of those joining the site visit. *

16. If in person, please provide any information we may need to find you (i.e., physical address, parking, contact number, etc.).

Additional Attachments

If you have additional attachments you would like to include, please attach here.

Multiple File Upload

There is a maximum of 10 files that can be uploaded here.