

PETER & ELIZABETH TOWER FOUNDATION

2021 COVID-19 Response

Application Preview

(revised June 3, 2021)

Section One: Organization Information

- 1. Organization Name
- 2. Employer Identification Number (EIN)
- 3. Contact Person First Name, Last Name, Email Address, Phone Number
- 4. Signatory First Name, Last Name, Email Address
- 5. If we award your organization a grant, would you prefer a paper check or direct deposit?
- 6. If you would prefer a paper check, to what mailing address should we send it? (Please skip this question if you'd prefer direct deposit.)
- 7. What is your organization's annual budget?
- 8. What population(s) are you serving? (Please check all that apply)
 - People with intellectual disabilities
 - People with learning disabilities
 - People with mental health issues
 - People with substance use disorder
 - □ People experiencing homelessness
 - People who are incarcerated

NOTE: Unless you have made alternative arrangements, you <u>must</u> submit your application online via this link:

https://towerfdn.link/covid-19

- People with disabilities (other than intellectual disabilities or learning disabilities)
- Refugee and immigrant communities
- □ Communities of color
- 9. In what Tower Foundation county/counties do you <u>currently</u> provide services? (Please check all that apply)
 - □ Barnstable County, MA
 - Dukes County, MA
 - □ Essex County, MA

- □ Nantucket County, MA
- □ Erie County, NY
- Niagara County, NY
- 14. How would you characterize the community/communities you serve? (Please check all that apply): □ Urban. □ Suburban. □ Rural

Section Two: Diversity Information

The Peter & Elizabeth Tower Foundation is working to incorporate a deliberate diversity-equityinclusion (DEI) lens in its grantmaking practice. To help the Foundation understand more about the organizations and beneficiaries it supports, we are asking grant applicants to provide us with a better sense of how your organization's leadership, workforce, and governance reflect DEI. The Foundation will give preference to applications from organizations led by people of color and/or people with disabilities and that reflect the communities they serve. No organization will be excluded from consideration solely because it is not led by people of color and/or people with disabilities. The Foundation recognizes that DEI extends beyond race and disability. We have chosen to focus on these two characteristics in light of our focus on serving people with intellectual disabilities and learning disabilities, and in explicitly recognizing the profound inequities created as a product of a culture and institutions imbued with systemic racism.

	Yes	No
Staff		
Board of Directors		
People Served		

- 15. Does your organization currently collect demographic data about:
- 16. If your organization collects demographic data, please enter the number of individuals of each race/ethnicity for each role in the chart below to give us a sense of your organization's racial and ethnic diversity. (Continue to the next question if your organization does not collect this information.)

Race/Ethnicity (Please enter	Executive	Staff (excluding	Board of	People
numbers for each)	Director(s)	Executive Director)	Directors	Served
African American/Black				
American Indian/Alaskan Native				
Asian				
Hispanic/Latina/ Latino				
Native Hawaiian/Pacific Islander				
Middle Eastern/North African				
White				
Biracial/ Multiracial				
Total #				

- 17. Is your organization led by a person with a disclosed disability? \Box Yes \Box No
- 18. What additional information about your organization's diversity and inclusion practices would you like to share?

Section Three: COVID-19 Response

- 19. How have you adapted your services in response to the COVID-19 pandemic? How does your organization include/incorporate the norms; values and beliefs; and community context of the people and communities you serve into its services?. (1,000 word limit)
- 20. What needs and/or opportunities does your organization have as a result of the COVID-19 pandemic? (**500 word limit**)
- 21. What needs and/or opportunities do the people you serve have as a result of the COVID-19 pandemic (even if they're not things your organization can address)? (**500 word limit**)
- 22. How much money are you requesting? (Maximum request is \$25,000, but please only ask for what you need!)

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