



## *Community Contributions Program in Rochester*

### **Priorities, Process and Instructions**

Mayo Clinic is a not-for-profit organization with the primary mission of patient care. As a private trust for the public good, Mayo Clinic is dedicated to giving back to its local community through its Office of Community Relations. Mayo Clinic partners with others to ensure that:

- Community investments align with its mission to advance patient care, research and education
- Our community is a welcoming, vibrant and healthy environment
- Our community is an environment that attracts and sustains a diverse Mayo Clinic workforce to provide the best patient care

Mayo Clinic considers requests from registered 501(c) (3) organizations in Olmsted County, Minnesota, for funding support for new and ongoing programs that support the above goals. These may include:

- human services
- education and workforce development
- youth enrichment\*
- diversity and inclusion
- the arts and cultural enrichment
- capital campaigns and multi-year grants (considered as Mayo Clinic financial resources allow)
- community events\*\*

Mayo Clinic asks that organizations request funding no more than once per calendar year. Mayo Clinic support generally limits funding to no more than 20 percent of an organization's operating or capital budget.

# Our Priorities

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## **Priority is given to efforts that demonstrate one or more of the following:**

- Address significant and emergent needs within our community
- Serve the underserved in the communities where we do business. Underserved populations are those experiencing health disparities, having difficulty accessing social safety support services or are at risk of not receiving adequate medical care as a result of being uninsured or underinsured due geographic, language, financial or other barriers. (See guidelines for poverty defined by the U.S. Department of Health and Human Services: <http://aspe.hhs.gov/poverty/13poverty.cfm>.)
- Improve health and wellness of the individuals and communities we serve
- Enable long-term community capacity building and sustainability
- Demonstrate partnership building and collaboration

## **Mayo Clinic's Community Contributions Program does not provide funding for:**

- Endowments
- Organizations that re-grant funds to organizations that Mayo Clinic is already supporting directly
- Financing for sole purpose of organisational debt relief
- Religious or political activities
- Walks, runs, golf tournaments, bike rides\*

[\*Mayo Clinic occasionally sponsors these types of community events as part of targeted marketing efforts to raise awareness about Mayo Clinic in key service areas. These are not supported through Mayo Clinic's Community Contributions program.]

- Programs and projects that limit participation for reasons of race, sex, age, religion, national origin, marital status, color, creed, sexual orientation, gender identity and expression, disability (physical and mental), genetic information, veteran status, and status with regard to public assistance.
- Programs or projects benefiting a specific individual

## **Matching Funds**

As part of its grant award, Mayo Clinic may include a requirement for the organization to raise matching funds before Mayo funds are disbursed. If a matching grant is awarded, the proceeds from an annual gala or fundraising event cannot be used to meet the match requirement. The intent of a matching grant is to encourage the organization to reach out to a broader range of funding organizations, businesses and/or individuals to raise new sources of funding. The organization will be asked to provide evidence of matching funding before the Mayo funds are disbursed.

## **A Note about Capital Gifts**

Mayo Clinic is committed to partnering with community groups to help build strong foundations for the future — in programmatic as well as capital initiatives. Mayo will consider capital campaigns and multiyear gifts as financial resources allow.

- Mayo Clinic will not serve as the primary funding source for a capital project, but as a partner with other contributors.
- Mayo Clinic gifts for capital projects may be given as matching funds to best leverage other sources of support.
- Capital gifts will only be distributed when physical construction is in active process, or funds are needed to secure services or materials.
- If a capital project is not completed as planned, or if intended purpose for the capital gift changes from the originally presented use, any unpaid Mayo pledges will become null and void, and any funds already received must be reimbursed fully to Mayo Clinic.
- Requests for capital projects involve a more rigorous review process. Please contact us by phone or email prior to submitting your request for a capital project so that we can ensure that the project meets the basic requirements for consideration.

## **Requests for In-kind Goods or Services**

Mayo Clinic will consider requests for grants of in-kind services, supplies or equipment. However, Mayo Clinic prefers that organizations use local businesses, preferably a diversified business/vendor, to provide these goods and services. The Rochester Area Chamber of Commerce offers a list of diversity suppliers/vendors (<http://business.rochestermnchamber.com/list>) that can be used to identify available suppliers/vendors. Requests for in-kind goods or services should be accompanied by a bid from a local vendor whenever possible.

### **\*Additional criteria for youth enrichment**

Youth enrichment is defined as any educational or recreational program or activity outside of the formal educational system (K–12) that is designed for youth that enriches their health and development of skills and knowledge. This includes activities in the areas of academics, athletics, music, arts and culture. This does not include events specifically planned as celebrations, such as proms and graduation parties or athletic banquets. The enrichment activity or program must align to Mayo Clinic's mission.

Priority is given to youth enrichment programs or activities that:

- Enrich skill development and knowledge
- Enhance outreach and enrichment opportunities to underserved and at-risk youth
- Demonstrate collaboration and community sustainability
- Address significant and emergent needs of youth within the community (eg, educational deficiencies or targeted workforce development)

### **\*\*Additional criteria for events and community celebrations**

A community celebration is an event organized by a 501(3)c organization to celebrate and bring wider recognition to a group, culture, or geographic region. Examples include cultural heritage celebrations, veterans' recognition events, city/county/state festivals, neighborhood events, and arts festivals.

Priority is given to events and celebrations that:

- Serve a large group of people within the community
- Encourage and facilitate broad community understanding of diverse perspectives and inclusiveness
- Provide a clear purpose and objectives for the event, and describe plans to measure and report on success.

# Our Process

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## Timeline for Proposal Submissions

Mayo Clinic welcomes funding requests at any time however; funding decisions are made on a quarterly basis. An organization may only submit one grant request per calendar year.

- Requests will be reviewed within the following deadlines and review dates:

	<b>Submit Request By</b>	<b>Decision Date</b>
Quarter 1	November 30	February 28
Quarter II	February 28	May 31
Quarter III	May 31	August 30
Quarter IV	August 30	November 30

## Reporting requirements

Organizations that have received Mayo Clinic Community Contributions funding in the prior year(s) must provide a report on the outcomes of previously funded projects/program prior to being considered for new funding.

# Instructions

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## Application Procedures

Submit your grant request using the attached Application Form. Omission of any required documents or attachments means your application will not be considered until a complete request is supplied. A Required Document Checklist is provided to ensure a complete packet for submission and consideration.

Annual requests should include a prioritized description of all funding items requested for the year and may include items such as:

- General operating expenses of the organization
- Support for specific programs or projects such as a set of connected activities designed to have measurable impact/outcomes and defined progress
- Any fund-raising galas and/or recognition events, with accompanying support service needs for these events such as audio visual equipment, printing and photography needs. The support service needs should be identified and accompanied by a job bid from a local small business.
- Consulting/facilitation service needs such as strategic planning support, board training needs, etc.

We will contact you within two weeks to acknowledge our receipt of your request. A primary reviewer will be assigned to your request and may contact you with specific questions and/or to request additional information.

We may also ask for you to visit with our Community Contributions Committee to present and discuss your request in more depth. The Mayo Clinic Contributions Committee finalizes funding decisions on a quarterly basis. Final decisions and notification will not be made until after the award decision dates outlined above.

Mayo Clinic strongly encourages using the Charities Review Council (CRC) Accountability Wizard (<http://www.smartgivers.org/AccountabilityStandards09>) or verification that your organization has attended either the Rochester Area Foundation/United Way capacity development seminars for nonprofits.

## Request submission instructions and contacts:

Forward electronic requests for funding to:

[communityengagement@mayo.edu](mailto:communityengagement@mayo.edu)

To discuss a project prior to submitting a request, please contact:

**Susan Fargo Prosser**  
(507) 266-2618  
[fargoprosser.susan@mayo.edu](mailto:fargoprosser.susan@mayo.edu)

# Application Form

This form must be completed to have your submission reviewed by the Community Contributions Committee; incomplete applications will not be considered. Contact the Mayo Clinic Community Relations Program at (507) 266-2618 and/or [communityengagement@mayo.edu](mailto:communityengagement@mayo.edu) with any questions concerning the request form, document requirements or process. Please limit the completed request form to 8 pages.

## 1) Required Documents

In addition to a thorough completion of the application, please use the following documents checklist to ensure all required documents are included along with your application form. These documents must be attached to the application form or emailed separately to [communityengagement@mayo.edu](mailto:communityengagement@mayo.edu).

## 2) Document Checklist

The following documents must be submitted with the completed Application Form. Mayo Clinic will not review requests until all documents are provided.

- Application Form
- Verification of tax-exempt status (IRS determination letter)
- W-9 identification number and certification
- Cover letter signed by organization's director and/or board chair summarizing the request on organization letterhead
- Report on the most recent outcomes of programs/activities if previously supported by Mayo Clinic
- List of officers and board members, with any known Mayo Clinic employees identified
- Copy of most recent 990 tax form
- Annual organisational operating budget, including all sources of funding
- Most recent audited financial statement
- Most recent annual report
- Optional: Letters of support or endorsements by partner organizations or experts (limit to 2)
- Optional: Consultant or subcontractor letters of support, if applicable
- Identification and details on any other additional Mayo Clinic support being sought or offered

### 3) Organization Overview

Organization name:

Request date:

Request title:

Amount requested:

Primary contact for this request (name, phone, and email):

Provide documentation of all support (cash and/or in-kind) that has been provided by Mayo Clinic (the Community Contributions Committee **or another part of Mayo Clinic such as media support services, the practice, education or research**) to your organization for any purpose/program over the past five years:

Will this require ongoing Mayo Clinic support and/or support from another organization outside of this request?

Identify (name) and list (amount(s) requested and/or secured from other organizations that have been approached to support this request.

#### **4. Program Activity Details**

Describe the program/activity that you are submitting for funding consideration.

What is the timeline for the activities related to this request?

How will you recognize Mayo Clinic for this contribution?

If the project is a capital request, please identify key milestones for progress over time. Generally, capital requests must be completed within five years of funding approval and three years of initial building activity.

#### **5. Community Responsiveness**

What is the current need related to this request and how was it identified?

## **6. Collaboration Efforts**

Are there other existing community efforts focused on this need? Who are the other community organizations? What are their roles in addressing the need? How are you collaborating with other organizations to address this need?

## **7. Participants/Clients — Target Population**

How many participants/clients will be served?

How will participants be identified and selected?

What efforts will be made to reach out to underserved or underrepresented populations (eg, Black, Latino, Native American, Asian, LGBTQI, veterans, disabled, economically disadvantaged)?  
(See definition on page 2.)

## **8. Goals and Outcomes**

If Mayo Clinic provided financial or in-kind support for this activity in the past, what progress has been made towards stated goals or outcomes? Please provide a detailed outcome report along with your submission requesting current funding.

What are the goals and expected outcomes of the current activities?

How is your program best suited to fulfil the goals as stated in this request?

Please complete the table below.

1. Identify at least three goals.
2. Describe how you will measure success and the expected outcomes of the proposed activities.
3. Please include what data sources you will use. Additional lines can be added, if needed.

	<b>Goal/Outcome</b>	<b>Metric/Measures of Success</b>	<b>Data Sources</b>
Example	Participants will gain readiness for Kindergarten	Number of program participants Kindergarten-ready	Program participants
1.			
2.			
3.			

## 9. Mission Alignment

How do the activities described above meet your organization's mission and vision?

How do the activities described above align with Mayo Clinic's mission?

*Mayo Mission: To inspire hope and contribute to health and well-being by providing the best care to every patient through integrated clinical practice, education and research. Mayo Vision: Mayo Clinic will provide an unparalleled experience as the most trusted partner for health care.*

## 10. Budget

What is the overall budget for the planned activities related to this request?  
(A separate document may be attached if that's easiest.)

What are the other sources of funding for the activities?

How will funding be sustained going forward?

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