

Back to Edit

### Eligibility - 2024 Community First Grant: Partner Application

#### 2024 Community First Grant: Eligibility Form

Please answer the following questions to determine your organization's eligibility to apply for a 2024 Community First Grant. For more information about what we look for in a grant partner, please click [here](#).

Will your project help broaden access to fresh, healthy food and/or nutrition education in your community? \*

- Yes
 No

We prioritize organizations that expand healthy food access and nutrition education in communities experiencing major barriers to healthy food access.

Is your organization locally led? Are members of your organization residents of the community you serve? \*

- Yes
 No

Not all team members, board members, and volunteers must be residents of the community you serve, but robust community representation is important.

Does your organization have strong community engagement? Does your organization request and use feedback from your community? \*

- Yes
 No

Does your work focus on long term food access or nutrition education? This grant will NOT be the best fit for food redistribution or produce donation programs. \*

- Yes
 No

We do not fund food redistribution or production donation programs, such as food banks or food pantries.

Is your program focused on serving adults and/or older youth (ages 16-22)? \*

- Yes
 No

This grant will NOT be the best fit for Programs primarily focused on children or based in schools. Our sister foundation, Whole Kids, offers a variety of grant programs that might be a better fit.

Are you willing to submit a final report to communicate your progress? \*

- Yes
 No

Grant partners will be required to submit a final report (a mid-year report will be optional).

US: Is your organization registered as a 501(c)(3) nonprofit or are you partnered with a 501(c)(3) nonprofit? Canada: Is your organization a registered charity or are you partnered with a registered charity? \*

- Yes
 No

We are only able to provide funds to 501(c)(3) registered nonprofit organizations or Canadian registered charities.

Save Draft Submit Form

Drafts may be visible to the administrators of this program.

Back to Edit

### 2024 Community First Grant: Partner Application

#### Section One: Organization Information

Organization Name \*

Limit: 300 characters

Official Address (If selected for a grant, this is the address we will include in the grant agreement) \*

Country

Address

Address Line 2 (optional)

City

State, Province, or Region

Zip or Postal Code

Website (or Facebook page/ Instagram/ etc. if you don't have a website) \*

Executive Director's Name \*

Executive Director's Email \*

Executive Director's Phone Number \*

Main Contact's Name \*

Main Contact's Email \*

Main Contact's Phone Number \*

Will your organization be using a fiscal agent? \*

Yes

No

Please select your organization type: \*

US: 501(c)(3) nonprofit or partnered with a 501(c)(3) nonprofit

CA: Canadian registered charity or partnered with a Canadian registered charity

#### Section Two: Application Questions

Please summarize your ORGANIZATION's main goals and activities. \*

Please tell us about your organization's fresh, healthy food access or nutrition education work. \*

Limit: 300 words

Please describe your proposed PROJECT and how it focuses on increasing long-term access to fresh health food or nutrition education. \*

Limit: 300 words

For the purposes of this grant, food rescue, redistribution and/or donation are considered to be short-term relief (not an increase in long-term access). Projects should not include efforts towards hunger alleviation, food rescue/redistribution or produce donation.

Please tell us more about the community you serve. What are the barriers to healthy food access and nutrition education that they regularly encounter? How does your project address these barriers? \*

Limit: 300 words

Does your project aim to serve a certain group of community members (senior citizens, veterans, families, etc.)? Please tell us more. \*

Limit: 300 words

We support both targeted and broad programs, but your response helps us better understand the scope of your project and ensure alignment with our mission (supporting the expansion of healthy food access and nutrition education for communities experiencing major barriers to healthy food access). Youth programs must target youth 16-22 (not young children).

Which category best describes the fresh, healthy food access PROJECT you are requesting funding for? Note: This does not need to be the best category that fits your organization's work OVERALL. \*

- Community Garden
- Urban Farm
- Agricultural Skills Development
- Farmers Market or Co-Op
- Pop Up Market or CSA
- SNAP Incentive Program
- Mobile Market
- Nutrition Education or Healthy Cooking Class
- Other

Does your organization practice any of the following? Please check all that apply. \*

- Regenerative Agriculture
- Hydroponics and/or Aquaponics
- Organic Farming
- Not Applicable

Why do we ask? We sometimes have the opportunity to connect organizations with other funders who provide in-kind support. This checklist helps us identify aligned projects. In addition, we are trying to better understand our partners' role in innovative farming practices. Note: This information will NOT be used to determine grantees.

Does your organization have a farm and/or garden? \*

- Yes
- No

Regardless of what project you're applying funding for, we are curious about any farming and/ or gardening practices by your organization. Note: This information will NOT be used to determine grantees.

Does your project earn income from the sale of produce or other activities? \*

- Yes
- No

This does not include grant funding or donations.

Optional: We know many partners have taken their cooking classes, gardening workshops, and other work online. If you would like to share any links, please list them here.

Please tell us how you would spend a \$9,000 USD/ \$12,000 CAD grant from the Whole Foods Market Foundation and how these expenses would help you reach your fresh, healthy food access goals. \*

Limit: 300 words

There is no limit on the amount that may be used for overhead and ongoing expenses. We want to support your goals and invite you to let us know how the funding could be best put to use in your work!

How will this work impact the local community in ways besides fresh, healthy food access? \*

Limit: 300 words

What is the proposed timeline for your project? \*

Limit: 300 words

Are your leaders, employees, and volunteers members of the community you serve? Do you have a community advisory board or steering committee? Do your leaders have lived experience facing barriers to healthy food access? \*

Limit: 300 words

How does your organization request and use feedback from the community you serve? \*

Limit: 300 words

How will you measure the success of your fresh, healthy food access work? \*

Limit: 300 words

If your Whole Cities grant application is approved, is there anything that would prevent you from starting your fresh, healthy food access work? \*

- Yes
- No

Optional: Is there anything else you would like us to know?

Optional: We love spreading the word about our partners' great work in our social channels, website, and newsletters. Please list the handles/ website that WFMF may use to share photos and content in our communication and educational materials.

We'll be sure to tag you and/or give you photo credit.

### Section Three: Required Documents

Please use the table to tell us how you would use \$9000 USD\* in funding from Whole Foods Market Foundation. Please do not use commas or dollar signs. \*



	A	B
1	Line Item	Amount
2		
3		
4		
5		

6		
7		
8		
9		
10		

\*Canadian partners, please fill out the form using USD estimates.  
There is no limit on the amount that may be used for overhead and ongoing expenses. We want to support your goals and invite you to let us know how the funding could be best put to use in your work!

Please upload your most recent Form 990: \*

- Upload a Form 990
- If you do not submit a Form 990, please complete an Organizational Financial Statement

Please upload your IRS 501(c)(3) Determination Letter (US) or Notification of Registration Letter (CA). If you will be partnering with a fiscal agent, please upload their IRS 501(c)(3) Determination Letter. \*

Upload a file. No files have been attached yet.

Acceptable file types: .pdf, .doc, .docx, .jpg, .jpeg, .png

Please upload 5-10 media released, 1mb+ photos of your organization's work in action. \*

Select up to 10 files to attach. No files have been attached yet. You may add 10 more files.

Acceptable file types: .jpg, .jpeg, .png

#### Media Release Policy

If your application is selected, Whole Foods Market Foundation would like to share the good news publicly! By submitting this application, your organization gives Whole Foods Market Foundation and third-party supporters (such as supplier donors, Whole Foods Market, Amazon, Team Members, etc.) of the Foundation permission to share information such as a description of your project, how Whole Foods Market Foundation's funding is contributing to its success, any photos you send us, and your logo (we'll share our logo with you too). We share information on our website and social media accounts as well as through Whole Foods Market's marketing and press offices. Any images, videos, and multimedia submitted in this application or during progress reports, should be original content for which you own exclusive rights to display, share, reproduce and authorize use by Whole Foods Market Foundation and third-party supporters. In the event that Whole Foods Market Foundation or hired freelancers capture original photos or videos of your location, project or volunteer events, we will have all parties agree and sign a release form. See example [here](#).

Please check the box below to agree to Whole Foods Market Foundation's Media Release Policy. \*

- I agree

#### Whole Foods Market Community Connections Participation Agreement

Whole Foods Market (WFM) has a long-standing practice of building relationships and supporting communities through volunteer initiatives. To strengthen these efforts, WFM developed Community Connections, a companywide volunteer and team build program. If selected for a 2024 CFG grant, community partners that agree to participate in the program will have their contact information included in the Community Partner Directory, a list of eligible organizations that WFM Team Members may choose from when considering a volunteer opportunity. **Community Connections is a Whole Foods Market program and participation is voluntary. Participation in the Community Connections program has no bearing on the status of this application for grant funding (this application is being administered through the Community First Grant Program, which is a Whole Foods Market Foundation initiative).**

Please check the box below to participate in the Community Connections Program. \*

- I agree
- I decline

If you select "I agree": WFM Team Members will have access to your contact information and may reach out to you to coordinate a volunteer event. WFM will reach out annually to confirm that you would still like to participate in the program and to verify that the contact information is up to date.

If you select "I decline": The Community Connections program is run by Whole Foods Market, not Whole Cities (a Whole Foods Market Foundation project), and participation in the program will have no impact on potential future support from the Whole Foods Market Foundation.

Drafts may be visible to the administrators of this program.