



2008-09 INTERNATIONAL FUND FOR SEXUAL MINORITIES

FUNDING GUIDELINES & APPLICATION

DEADLINE FOR RECEIPT OF APPLICATION is 6pm EDT

CYCLE 1: Monday, 1 September 2008

CYCLE 2: Monday, 2 February 2009

Applications by email are encouraged.

ABOUT ASTRAEA & THE INTERNATIONAL FUND FOR SEXUAL MINORITIES

Astraea Lesbian Foundation for Justice works for social, racial and economic justice in the U.S. and internationally. Our grantmaking and philanthropic advocacy programs help lesbians and allied communities challenge oppression and claim their human rights. Since our founding in 1977, our mission has been based on an enduring commitment to feminism, progressive social change and an end to all forms of exploitation and oppression.

Astraea's International Fund for Sexual Minorities was established with a donor-directed grant through the Heinrich Böll Foundation and with the initial efforts of the International Gay & Lesbian Human Rights Commission (IGLHRC). The creation of this Fund acknowledges the growing global movement for the human rights of sexual minorities and the well-documented need to support groups that enhance the lives of lesbian, gay, bisexual, transgender, and intersex (LGBTI*) peoples worldwide. **We recognize the limitations of Western definitions of trans and same gender-loving people and support indigenous expressions of these identities such as Two Spirit (Native American), Shamakhami (Bengali), Hijra (Hindi), etc.*

GENERAL GUIDELINES

Astraea's International Fund for Sexual Minorities supports groups, projects, or organizations working towards progressive social change which are led by lesbian, gay, bisexual, transgender, and intersex (LGBTI) communities and directly address oppression based on sexual orientation and/or gender identity/expression.

GROUPS THAT ARE ELIGIBLE TO APPLY – Please note that your group should meet ALL of the following criteria to be eligible for a grant. Groups, projects, and organizations that are eligible to apply are:

- **Based in Africa, Asia/the Pacific, Eastern Europe/Commonwealth of Independent States, Latin America/the Caribbean, or the Middle East.**
- **Led by and/or for LGBTI communities.** Non-LGBTI-led groups must demonstrate how they address LGBTI human rights issues and how they involve LGBTI's in organizational and programmatic decision-making.
- **Doing work towards social change, on issues affecting LGBTI people** and/or people who are penalized, persecuted or harassed for their gender identity, gender expression, and/or sexual orientation.
- Non-governmental organizations, not-for-profit groups, or the equivalent, with organizational **budgets of \$500,000USD or less.**
- Groups that have been **active for at least one year** at the time you send in your proposal. A group which has been active for less than one year may apply if you demonstrate your group's ability to sustain activities over the long-term and illustrate how a grant would help you to build your organization's capabilities.

FUNDING PRIORITIES – Applicants should meet the preceding eligibility criteria. Given limited funds, Astraea is unable to offer financial support to all groups that meet the above criteria. The following are additional factors that the International Fund Panel considers when reviewing applications and making funding decisions.

- Are directed by and targeted to lesbians/bisexual women.
- Are directed by and targeted to transgender and/or intersex communities.
- Led by/for LGBTI communities that are historically under-resourced within LGBTI communities (e.g. youth, elders, ethnic minorities, migrants/refugees, low-income people, people with disabilities, sex workers, etc.).
- Groups that have active participation and leadership from the communities most affected by issues that the group works on. Projects funded by Astraea embrace inclusivity and reflect the diversity of the geographic region in which they do their work.
- Demonstrate an understanding of the connections amongst different oppressions facing LGBTI peoples, and have a commitment to address other forms of oppression such as oppression based on class, race, ethnicity, age, physical and mental ability, gender, national identity, and religious affiliation.
- Develop leadership and build communities' capacity to achieve social change, particularly proposals that strengthen an organization's ability to organize. Organizing may be defined as activities that actively engage people affected by societal problems in the process of identifying and pursuing solutions.

- Works in alliance and/or builds coalition with other justice movement organizations (e.g. sex worker rights, human rights, etc.)
- Internal/external organizational practices reflect social justice principles (e.g. clear structures and processes for accountability to communities being served).
- Groups that are based in countries/locations that do not yet have significant LGBTI resources.
- Have limited access to traditional sources of funding.

FUNDING EXCLUSIONS. Astraea’s International Fund generally does not provide support for the following:

- Individual projects (e.g. graduate research, fellowships, etc.)
- Organizations with strong leadership from only 1 individual
- Private business or profit-making efforts (including business development)
- Projects that are based in or sponsored by a university, college, or other academic institution
- International organizations proposing projects with local partners
- Groups whose sole purpose is to generate income or to provide charity to individuals, direct social service projects, research projects, or one-time events that are not part of, or linked to, ongoing social change organizing strategies.
- Efforts that endorse candidates for public office (incl. political parties and election campaigns)
- Capital campaigns, endowments, or deficit financing
- Organizations with budgets of over \$500,000USD

FUNDING LEVEL & TYPES OF SUPPORT

The maximum size grant from Astraea’s International Fund panel is \$10,000USD. In the past, the average grant size has ranged from \$2,000 - \$6,000USD. Organizations that meet Astraea’s eligibility criteria and priorities for funding are encouraged to apply for general support.

- **General Support:** Organizations may apply for general support, including expenses such as salary and rent, equipment, training, and staff needs that help build the management and programmatic capacity of the group to carry out its work.
- **Project Support:** Organizations or groups that meet our guidelines may apply for a specific project or for program support.

REVIEW PROCESS

- Applications are reviewed and discussed by the International Fund Grants Panel, with participation from the International Fund Advisory Board and Astraea staff. Comments on applicants are also accepted from Astraea’s institutional partners.
- All applicants are notified by email of funding decisions within **five months** after the application closing date.

CONDITIONS OF A GRANT

- ✓ Groups awarded a grant will receive a written term of agreement. A progress report is due within 6 months of grants made, and a final report is due within a year of the grant.
- ✓ A group may receive only one grant from the International Fund panel in a 12 month period. However, there is no limit to the number of consecutive year grants an organization may be awarded. A group may also consider applying to other Astraea funding programs.
- ✓ Grants will only be made to non-governmental organizations and/or projects which meet *in form and spirit* of the criteria which are used in determining non-taxable 501(c)(3) status in the United States of America, i.e. organizations operated for charitable or educational purposes.
- ✓ Grants can only be made to the bank account of the organization. **Astraea does not make grant payments to the account of an individual.**

SUBMISSION & APPLICATION INSTRUCTIONS

Applications may be submitted in any language, as long as the language is indicated. Do not submit proposals in plastic or spiral binders, covers or notebooks. Incomplete proposals may not be considered for funding. **The submission of excessive amounts of paper is discouraged.** While we expect you to follow all application instructions and answer questions in full, please provide the information in the most concise way possible. For example, if your organization carries out many activities, it may not be necessary for us to know of every single activity you carried out in the past year or are planning under this request. If you have any questions about completing this application or questions once you receive a decision notification, please email: grants@astraeafoundation.org.

Submit all materials to: **International Fund • Astraea Lesbian Foundation for Justice • 116 E. 16th St., 7th flr • New York, NY 10003, USA** AND/OR grants@astraeafoundation.org

Application Instructions – All complete applications should include:

1. **Astraea’s International Fund Cover Sheet.** **The enclosed cover sheet must be completed in full – including the application checklist.** Please use only the space provided. Do not answer, "see attached proposal" to any of the questions. Be sure to complete the checklist of proposal materials. Applications without completed cover sheets may not be considered for funding.
2. **Proposal Narrative.** Please respond to all questions. This section should not exceed 6 pages.
3. **Financials.** You may use the sample budget sheet, or provide your own financials. Please include:
 - *Most recent organizational income/expense statement.* This financial statement should reflect ACTUAL funds received, and expenses during your most recently completed fiscal year (including all projects and all operating/administrative expenses). Please make sure to give total figure, as well as a breakdown by major categories of income and expense. Indicate start/end dates of your fiscal year, and currency of the statement (if other than \$USD).
 - *Projected organizational budget (income and expenses) for the current fiscal year.* Be sure to provide total figures for income and expenses, as well as a breakdown by major categories. Indicate start/end dates of your fiscal year, and be sure to convert each line of the budget to \$USD. Please also let us know what the currency exchange rate you are using is. If a grant would be used in the coming year, please also provide a budget for the upcoming year.
 - *If requesting project support,* you should provide income/expense statement for the project for the most recent year, and anticipated income/expense budget for the project in the current year. If a grant would be used in the coming year, please also provide a budget for the upcoming year.
 - List your group’s *major sources of funding,* and please provide status of your request with each prospective source. Include name of funding source, amount requested, and status of each request.
4. **Required attachments.** Please submit all required attachments.
 - List of Board, staff, or other organizational governing body. Please include names, positions/titles for each person, and summary of diversity characteristics for overall.
 - Letters of support (2-3). Signed letters of support should be submitted from individuals outside your organization, who you collaborate with or those familiar with your work. *At least two should be from within your country.*
 - List of 3 references. Please provide a list of individuals (different from those who provide letters of support), who are familiar with your organization’s work, but are not members of your organization. Please include: name, mailing address, phone number, email address, affiliations, and how this individual is qualified to speak about your organization’s work. *At least one of these should be from within your country.*
 - Confirmation of charitable/non-governmental status. Please provide a copy of your charitable/non-governmental organization registration letter, **or** one copy of a letter from your fiscal sponsor – on its letterhead, indicating that it is a nongovernmental organization who has agreed to serve as your fiscal/financial sponsor. The NGO registration letter for your fiscal sponsor’s organization should be included. If you are unable to provide either of these, please provide an explanation for why this is the case, and why your organization does meet *in form and spirit* the criteria which are used in determining non-taxable 501(c)(3) status in the United States of America, i.e. organizations operated for charitable or educational purposes.

PROPOSAL NARRATIVE QUESTIONS (Your narrative should not exceed 6 pages)

- A. ORGANIZATIONAL DESCRIPTION.** Please tell us about:
- How and why did your organization start? What is your organization’s mission/primary purpose?
 - Describe your organization’s most significant accomplishments to date, and outline current programs and activities
 - Describe your constituency? How does your constituent demographics relate to the diversity of your geographic region?
 - Your organization’s local, regional, national, and/or international context
 - Values – Describe the guiding values of your organization, and how your work promotes diversity and addresses inequality, oppression and discrimination within your organization, as well as the larger society.
- B. REQUEST SUMMARY.** Describe the work for which you are requesting funds.
- How much are you requesting from Astraea? What would this grant be used for?
 - What do you seek to achieve during the grant period? Describe your strategy and workplan (specific objectives and activities) for achieving your goals over the next year. Provide a timeline for the grant period, and indicate key projected milestones and activities.
 - How does your work address and change the underlying or root causes of problems that your organization works on?

- *If you are applying for project funding*, describe why you decided to pursue this project, and whether it is a new or ongoing part of your organization. How is your project timely?
- *If you are applying for renewed support*, describe how your organization or project has changed over the past 2 years, and how these changes have impacted your goals for the coming year. How has grant money from Astraea affected your organization's capacity? How have you been able to leverage past grants?

C. COMMUNITY INVOLVEMENT, ORGANIZATIONAL STRUCTURE & COLLABORATIONS

- Describe your leadership, membership/constituency, AND those most affected by the issues you seek to address with this project. (Please specify characteristics including geographic location, sexual orientation, gender, gender identity/expression, class, race, ethnicity, national identity, culture, age, physical and mental ability, and religious/spiritual affiliation).
- Describe how your organization works (including who the primary leadership body is) and how decisions are made
- Is your leadership representative of your constituency? Why or why not?
- How are your members, constituency, and those most affected by the issues you work on involved in the design, implementation and evaluation of your work? (For instance, if you serve LGBTI youth, how are youth involved in the leadership of the organization/project?)
- What leadership, if any, will be developed through this request?
- If you are not a lesbian-specific organization/project, what is the involvement of lesbians in the organization, and how is lesbian leadership supported? If you are not a trans/intersex-specific organization, what is the involvement of transgender and/or intersex people in the organization, and how is their leadership supported?
- Coalitions/collaborations -- Please list local, regional and/or national organizations, groups, programs with whom you interact or will interact for this project – formally or informally. Who do you work with most closely, and how does this cooperation increase the effectiveness of your work?

D. EVALUATION & MEASURING SUCCESS

- *Impact*: What is the intended short term and long term impact of each year's activities that would be funded by this grant – both within the organization and within the community/region? Please be specific about social change impact.
- *Evaluation*: Describe the ways in which you will measure the success of your activities. In relation to the goals/objectives laid out above, what are your criteria for success? Who will be involved in the evaluation? How will evaluation results used?

E. FINANCES

- Describe your fundraising plan and challenges. What is your long-term plan for sustaining the organization?
- Have you approached other sources to support your proposed work? What is the status of those requests?
- How would your work be impacted if you raise less funds than you project? What would you prioritize if you raise less funds than you have projected?

**Astraea Lesbian Foundation for Justice
International Fund For Sexual Minorities
Application Cover Sheet (2008-2009)**

Organization Name **Year Founded**

Mailing Address

City **State** **Country** **Postal Code**

Telephone **Fax** **E-Mail** **Web Site Address**

Name of Contact Person #1 **Title**

Contact Person #1 - Telephone **Email**

Name of Contact Person #2 **Title**

Contact Person #2 - Telephone **Email**

Organization Name of Fiscal Sponsor (Non-governmental organization to receive grants funds if other than organization listed above)

Address

City *State* *Country* *Postal Code*

Contact Person/Title *Telephone*

Type of Request	Astraea Grant Request:	\$ _____ USD	Organization's Fiscal Year
<input type="checkbox"/> General Support	Organizational Budget (current year)	\$ _____ USD	Starting Month: _____
<input type="checkbox"/> Project Support	Total Project Budget (if applicable):	\$ _____ USD	Ending Month: _____

Have you previously applied to Astraea? Yes No

If Astraea has supported your work, please indicate the years: _____

Have you submitted a final report for your last grant?

ORGANIZATION'S PRIMARY ISSUE AREA (if multi-issue, choose top 3)	ORGANIZATION'S PRIMARY STRATEGY (if multi-strategy, choose top 3)
<input type="checkbox"/> Legal/civil rights <input type="checkbox"/> Human rights <input type="checkbox"/> Economic justice <input type="checkbox"/> Peace & Justice <input type="checkbox"/> Racial justice <input type="checkbox"/> Immigrant Rights <input type="checkbox"/> Anti-violence <input type="checkbox"/> Anti-police brutality/prisons <input type="checkbox"/> Spirituality/faith <input type="checkbox"/> Culture <input type="checkbox"/> Family Rights <input type="checkbox"/> Feminism <input type="checkbox"/> Disability Rights <input type="checkbox"/> Cancer <input type="checkbox"/> HIV/AIDS <input type="checkbox"/> General health <input type="checkbox"/> Other health issues <input type="checkbox"/> Ageism <input type="checkbox"/> Youth <input type="checkbox"/> Elders/seniors <input type="checkbox"/> Homophobia <input type="checkbox"/> Transphobia <input type="checkbox"/> Intersex Issues <input type="checkbox"/> Other (specify): _____	<input type="checkbox"/> Advocacy <input type="checkbox"/> Community Organizing <input type="checkbox"/> Education <input type="checkbox"/> Direct services <input type="checkbox"/> Research <input type="checkbox"/> Publications <input type="checkbox"/> Media <input type="checkbox"/> Film/video <input type="checkbox"/> Theater <input type="checkbox"/> Other Culture (specify): _____ <input type="checkbox"/> Leadership development <input type="checkbox"/> Technical assistance <input type="checkbox"/> Other (specify): _____

Organization Name

Name of Project

Organization Structure

of Paid staff: ____ Full-time ____ Part-time

of Volunteers: ____ Core Volunteer Leaders ____ Other Active Volunteers **# of Members** (not incl. staff/volunteers): ____

Geographic reach

Geographic area(s) served: _____

____ Town/City/Village-wide ____ Regional (within 1 country) ____ National ____ Other (specify): _____

Summarize the mission/goal of your organization. IF you are requesting project support, also summarize the goal of your project.

Briefly describe your grant request (how you will use the grant, if awarded):

Summarize specific work accomplished in the past year.

Describe the composition and size of your leadership, board, staff, volunteers, membership and constituency.

(Give specific numbers & percentages for gender, sexual orientation, age, disability, ethnicity, religious affiliation, or other relevant areas of diversity)

THIS IS THE END OF THE COVER SHEET FORM ONLY. PLEASE SEE THE GUIDELINES AND APPLICATION DOCUMENT, AVAILABLE IN .PDF FORMAT ON OUR WEBSITE. THE NARRATIVE QUESTIONS INCLUDED THERE ARE A REQUIRED PART OF YOUR PROPOSAL.

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Application Check-list for:

Organization Name: _____ Project Name (if applicable) _____

Application submitted by: ___ Email ___ Postal Mail Date of submission: _____

Please indicate which materials are being submitted with this application package. If any materials are being submitted under separate cover, please indicate.

REQUIRED FOR International Fund for Sexual Minorities GRANT APPLICATIONS

Your complete application must be received by the cycle deadline for your proposal to be reviewed. Please review guidelines for email/postal mail submission instructions.

CYCLE 1: Monday, 1 September 2008

CYCLE 2: Monday, 2 February 2009

- ___ 1. **International Fund Cover Sheet** (this 5-page form, including this check-list)
- ___ 2. **Proposal Narrative** (Sections A, B, C, D, E)
- ___ 3. **Charitable/NGO Registration** OR Fiscal Sponsor letter and FS NGO Registration OR description of how organization meets in form and spirit the criteria used in the U.S. for determining non-taxable 501©3 status (i.e. organizations operated for charitable or educational purposes)
- ___ 4. **List of Organizational Leadership**, such as Board of Directors (with a brief description of each)
- ___ 5. **List of Staff** (indicate whether paid or unpaid, with a brief description of each)
- ___ 6. **Organization's Financials** (Besides the organization's financials listed below, if this is a project request, please include project financials for most recent year and current year. If applicant organization is a project of a parent organization, most recent year actuals and current year budget must be included for all the years listed as well)
- ___ 7. **Organization's finalized income/expense statement from the most recent past year** (please indicate start and end dates of your fiscal year)
- ___ 8. **Organization's current year working budget** with income and expense details
- ___ 9. **Organization's projected (estimated) budget**, if you are requesting to fund next year's operation.
- ___ 10. **TWO In-Country Letters of Support**, on letterhead and signed, from two people outside your group
- ___ 11. **A list of THREE References** (with name, affiliation, contact information, and how they know of your work (those listed as references must be different from those in letters of support)
- ___ 12. If you have received funding from Astraea before, **progress reports** of past grants are required

- ___ **OPTIONAL** — 1 additional Letter of support, if desire
- ___ **Other Optional Materials** (such as publication, news clippings, photos): _____

ASTRAEA FOUNDATION SAMPLE Budget Sheet (optional, you may use other formats)

Organization _____ Fiscal year begins (month/year): ____/____ ends (month/year): ____/____

Conversion rate: Local currency name: _____ Local currency Amt _____ = \$1USD

	Last Fiscal Year – Financial ACTUAL/FINAL	Current Fiscal Year Budget – Projected/Estimated	Last Fiscal Year – Financial ACTUAL/FINAL for the specific project	Current Fiscal Year Budget – Projected/Estimated for the specific project
INCOME (+)			<i>For Project Funding Request:</i>	<i>For Project Funding Request:</i>
Foundation Grants				
Government Fees/ Grants				
Special Events				
Business/ Corporate Contributions				
Membership Dues				
Other Individual Contributions				
Fees for Services				
<i>Other (list):</i>				
1.				
2.				
TOTAL INCOME				

EXPENSES (-)				
Salaries/Wages				
Fringe (payroll taxes, health insurance, etc.)				
Consultants/ Professional Fees				
Rent				
Utilities (gas, electricity)				
Equipment				
Telephone/internet				
Supplies				
Postage/mailings				
Printing/copying				
Travel - local				
Meetings/conferences				
Subscriptions/ memberships				
<i>Other (list):</i>				
1.				
2.				
TOTAL EXPENSES				
Excess Revenue (Expenses ==				
Opening Balance				
Closing Balance				

Required Material for International Fund Application

DEMOGRAPHICS CHART for _____ (Organization name)					
	Board Members / Core Leadership	Paid Staff	Active Volunteers	Members	Constituency/Audience/ Target Population
Total Number in Each Category----->					
Demographics By Gender Identity <i>Please estimate the # (not percentage) in each category below.</i>					
Women (including Trans & Intersex, if applicable)					
Men (including Trans & Intersex, if applicable)					
Trans/Gender Queer/Gender Non-Conforming					
Intersex					
Self Identify _____					
Demographics By Sexual Orientation					
Lesbian					
Gay Male					
Bisexual					
Queer/ Self Identify _____					
Straight Ally					
Demographics By Age					
18 and younger					
19-24					
25-39					
40-59					
60 and older					
Demographics By Ability					
Physical Disability					
Mental/Cognitive/Intellectual Disability					
Hearing Impaired/Visually Impaired					
Other Demographics Characteristics					
Prisoner/Former Prisoner					
Immigrant/Refugee					
Religious Minority					
Single Parents					
Parent of LGBTIQ Children					
Child of LGBTIQ Parents					
Living with HIV/AIDS					
Low-Income/ Poor					
Other Demographics Categories That Are Important To Your Organization (if not listed above)					
1)					
2)					
Demographics by Race/Ethnicity <i>(Please indicate relevant race/ethnicity demographics related to your organization and the region)</i>					
1)					
2)					
3)					