







Back to Edit

Section One: Organ	ization Information	
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Organization's Name *		
		Limit: 300 character
Organization Website *		
example.com		•••
If you do not have a website, pleas	se list your Facebook page or another social channel.	
Official Address *		
Country		
Select		•
Address Address Line 2 (optional)		
Address Line 2 (optional)		
City		
State, Province, or Region	Zip or Postal Code	
If selected for a grant, this address	s will be listed in the grant agreement.	
Mailing Address (if different	t from the official address)	
Country		
Select		v
Address		_
Address Line 2 (optional)		•••
Address Line 2 (optional)		
City		
State, Province, or Region	Zip or Postal Code	

xecutive Director's Email *	
email@example.com	
xecutive Director's Phone Number *	
Recutive Director's Finding Number	
_	
lain Contact's Name	
ease include a name, if not the same as the Executive Director.	
ain Contact's Email	
email@example.com	
ease include an email, if not the same as the Executive Director.	
lain Contact's Phone Number	
ease include a phone number, if not the same as the Executive Director.	
ill your organization be working with a 501c3 organization as your fiscal agent? *	
Yes	
) No	
Section Two: Application Questions lease summarize your organization's overall main goals and activities. *	
	Limit: 300 word
Please tell us about your organization's fresh, healthy food access or nutrition educ ccomplishments or success metrics (qualitative, quantitative, or both) you'd like to	
	Limit: 300 word
	t *
lease choose the ward(s) served by your fresh, healthy food access work in News	IrK: ·
North	
South	
East	
) Wast	
West	

Please choose the PROJECT category that best describes the fresh, healthy food access work for which you're applying. 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 and Healthy Cooking Class
Other
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.
Does your project earn income from the sale of produce or other activities? *
Yes
○ No
This does NOT include grant funding or donations.
Please tell us how you would spend the funding from Whole Cities and how these expenses would help your organization reach your fresh, healthy food access goals. *
Limit: 300 words
Note: We place no restrictions on how much of our grant funding can be used for overheard, ongoing expenses, and infrastructure such as purchasing land,
salaries and stipends.
We know that people power the work, and we want to support your work in whatever way best serves your goals.
Please provide a timeline for this work. *
Limit: 300 words
How will your organization measure the success of your fresh, healthy food access work funded by this grant? *
Limit: 300 words
How will this work impact the local community in ways BESIDES fresh, healthy food access?*

	Limit: 300 word
Are your organization's leaders, employees, and volunteers members of the community? Please elabora leadership is connected to the community. *	ate on how your
	Limit: 300 word
Do you have a community advisory board or steering committee? Please elaborate. *	
	Limit: 300 word
Will your organization be working with any other businesses, organizations, or individuals on this projec and their roles in your fresh, healthy food access project. *	t? Please list them
	Limit: 300 word
How does your organization request and use feedback from the community you serve? *	
	Limit: 300 word
Does your fresh, healthy food project serve a certain group of community members (senior citizens, vete Please elaborate on any certain groups served by your project. *	erans, families, etc.)?
	Limit: 300 word
We support both targeted and broad programs, but your response helps us better understand the scope of your project and ensul mission (supporting the expansion of healthy food access and nutrition education for communities experiencing major barriers to	_
f your Whole Cities grant application is approved, is there anything that would prevent you from starting food access work? *	g your fresh, healthy
Yes	
No No	
Optional: Is there anything else you would like us to know?	

Se	Section Three: Required Application Materials				
Plea	ase select	one of the following options: *			
	Upload a F	form 990			
	Complete an Organizational Financial Statement				
DI			*		
Plea	ase compl	ete the Funding Request Form. Please do not use comm	as or dollar signs.		
		А	В		
	1	Line Item	Amount		
	2				
	3				
	4				
	5				
	6				
	7				
	8				
	9				
	10				
Plea	se list the lin	e items for which you are requesting grant funds.			
	e: We place n	o restrictions on how much of our grant funding can be used for overfends.	neard, ongoing expenses, and infrastructure such as purchasing land,		
		d your IRS 501(c)(3) Determination Letter. If you will be parmination Letter. *	artnering with a fiscal agent, please upload their IRS		
		Choose File			
Uplo	ad a file. No	files have been attached yet.			
Acce	eptable file ty	pes: .doc, .docx, .pdf, .jpg, .jpeg, .png			
Plea	ase upload	d 5-10 media released, 1mb+ photos of your organization	's work in action. *		
		Choose File			
Sele	ct up to 10 file	es to attach. No files have been attached yet. You may add 10 more files.			
Acce	eptable file ty	pes: .gif, .jpg, .jpeg, .png			

Section Four: Additional Questions

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

	Regenerative Agriculture
	Hydroponics and/or Aquaponics
	Organic Farming
	Not Applicable
den	y do we ask? We sometimes have the opportunity to connect organizations with other funders who provide in-kind support. This checklist helps us atify aligned projects. In addition, we are trying to better understand our partners' role in innovative farming practices. Note: This information will NOT used to determine grantees.
Do	es your organization have a farm and/or garden? *
	Yes
	No
	ardless of what project you're applying funding for, we are curious about any farming and/ or gardening practices by your organization. Note: This rmation will NOT be used to determine grantees.
	ould your organization be interested in receiving free, one-on-one mentoring from local urban growers, Charmaine La tune and Tobias Fox? In previous years, Whole Cities has sponsored 16 hours of mentoring per grantee. *
	Yes!
	No, thank you
	ole Cities' Partner Summit
com	listen carefully to the feedback Newark community members share and reflect on opportunities we see to better support our grant partners. One of the most imon requests we receive is for more opportunities to connect with other organizations and learn new skills. With this in mind, we hosted a summit for grant
	ners in 2023. re thinking about hosting another summit in 2024. If we do, the event would be shaped by grant partners' answers to the following questions.
_	re hosted a summit for our 2024 Newark grant partners, would your organization be interested in attending?
	Yes!
	Yes! No, thank you
)) 	No, thank you
We	
We	No, thank you
∪ ○ We	No, thank you 're always eager to put volunteers in touch with our grant partners. Is your organization in need of volunteers?
Wh	No, thank you 're always eager to put volunteers in touch with our grant partners. Is your organization in need of volunteers? Yes
Wh	Ver always eager to put volunteers in touch with our grant partners. Is your organization in need of volunteers? Yes No Role Cities loves to amplify our partners' work in Whole Cities' and Whole Foods Market's channels. If additional photos dropy are needed, do we have your permission to obtain this content from your public facing channels (website, social,
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Whancetc	I're always eager to put volunteers in touch with our grant partners. Is your organization in need of volunteers? Yes No No No ECities loves to amplify our partners' work in Whole Cities' and Whole Foods Market's channels. If additional photos decopy are needed, do we have your permission to obtain this content from your public facing channels (website, social, to use in our channels with photo credit? Yes No w did you hear about this grant opportunity? Please check all that apply. An Email

A Flyer
Community Event
Word of Mouth
Local News
Other
Media Release Policy
If your application is selected, Whole Cities would like to share the good news publicly! By submitting this application, your organization gives Whole Cities, Whole Foods Market Foundation, and third-party supporters (such as supplier donors, Whole Foods Market, Amazon, Team Members, etc.) permission to share information such as a description of your project, how Whole Cities' 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 and Amazon'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 Cities and third-party supporters. In the event that Whole Cities 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.
Please check the box below to agree to Whole Cities' Media Release Policy. *
○ I agree
Save Draft Submit Form

