

## Walmart Foundation State Giving Application Preview

Preview Form	
This is an example of the application questions with which you will be presented. It is recommended that you compose the answers to the paragraph questions in a word processing program and then cut and paste that text into the online application.	
Contact Information	
Please select or enter the contact information for the Grant Preparer, President/Executive Director, and/or Public Relations contact for this request.	
<b>*First Name</b> (Text)(40 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Enter the contact's first name.</li> </ul>
<b>*Last Name</b> (Text)(40 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Enter the contact's last name.</li> </ul>
<b>*Contact Title</b> (Text)(255 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Enter the contact's title.</li> </ul>
<b>*Address</b> (Text)(100 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Enter the contact's address.</li> </ul>
<b>*City</b> (Text)(50 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Enter the contact's city.</li> </ul>
<b>*State</b> (Single-Select List of U.S. states including Puerto Rico and Virgin Islands)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Enter the contact's state.</li> </ul>
<b>*Zip</b> (Text)(5 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Enter the contact's zip.</li> </ul>
<b>*Telephone</b> (Text)(30 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Enter the contact's telephone number starting with the Area Code.</li> </ul>
<b>*E-mail Address</b> (Text)(100 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Enter the contact's e-mail address. <b>Please ensure the accuracy</b> of this email address as it will be used for correspondence.</li> </ul>
<b>*Contact Type</b> (Single-Select List) <ul style="list-style-type: none"> <li>• Board Member</li> <li>• Development Staff</li> <li>• Executive Director</li> <li>• Primary Contact</li> <li>• Public Relations</li> <li>• Trustee</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Select the contact type that best describes the contact's role.</li> </ul>
<b>*Contact's Role</b> (Single-Select List) <ul style="list-style-type: none"> <li>• Employee</li> <li>• Contractor</li> <li>• Volunteer</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Please choose the item that best describes the contact's relationship to the organization.</li> </ul>
Organization Profile	
<b>Official Name</b> (Text)(100 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Name associated with specific tax ID in the IRS business master file.</li> </ul>
<b>*Legal Name</b> (Text)(100 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Enter the organization's legal name.</li> </ul>
<b>AKA Name</b> (Text)(100 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Enter the AKA Name of the organization (if applicable).</li> </ul>
<b>*Address</b> (Text)(100 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Enter the organization's mailing address.</li> </ul>
<b>*City</b> (Text)(50 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Enter the organization's city.</li> </ul>

## Walmart Foundation State Giving Application Preview

<p><b>*State</b> (Single-Select List of U.S. states including Puerto Rico and Virgin Islands)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Enter the organization's state.</li> </ul>
<p><b>*Zip</b> (Text)(5 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Enter the organization's zip code.</li> </ul>
<p><b>*Telephone</b> (Text)(30 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Enter the organization's telephone number.</li> </ul>
<p><b>*Organization Mission</b> (Paragraph)(2000 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Provide the organization's mission statement.</li> </ul>
<p><b>*Facebook</b> (Text)(500 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Enter the organization's Facebook page (Enter N/A if not applicable)</li> </ul>
<p><b>*Twitter</b> (Text)(500 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Enter the organization's Twitter handle (Enter N/A if not applicable)</li> </ul>
<p><b>*Website Address</b> (Text)(100 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Enter the organization's website address (Enter N/A if not applicable)</li> </ul>
<p><b>Request History</b></p>	
<p><b>*Previous Funding</b> (Yes/No)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Has the organization ever received funding from the Walmart Foundation State Giving Program?</li> </ul>
<p><b>Previous Funding Date</b> (Date)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Enter the date that funding was received.</li> </ul>
<p><b>Previous Funding Amount</b> (Currency)(20 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Enter the previous funding amount.</li> </ul>
<p><b>Previous Funding Description</b> (Paragraph)(2000 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Briefly describe the funded project and how Walmart Foundation State Giving funds were used.</li> </ul>
<p><b>Program Information</b></p>	
<p>Please complete the fields below with information regarding the program for which the organization is requesting Walmart Foundation State Giving funds.</p>	
<p><b>*Program Title</b> (Text)(255 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Enter the title of the proposed program.</li> </ul>
<p><b>*Program Focus Area</b> (Single-Select List)</p> <ul style="list-style-type: none"> <li>Hunger and Healthy Eating</li> <li>Career Opportunity</li> <li>Other</li> </ul>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Select the Focus Area that best fits the proposed program.</li> </ul>
<p><b>*Program Focus Category</b> (Single-Select List)</p> <ul style="list-style-type: none"> <li>Career Opportunity</li> <li>----Job Training</li> <li>Hunger and Healthy Eating</li> <li>----Charitable Meals</li> <li>----Benefits Enrollment</li> <li>----Nutrition Education</li> <li>Other</li> <li>----Education</li> <li>----Health and Human Services</li> <li>----Sustainability</li> <li>----Small Business Support</li> <li>----Arts and Recreation</li> </ul>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Select the Focus Category that best fits the proposed program. Find the Focus Area value you selected in the question above and then select a value from those given beneath that heading.</li> </ul>
<p><b>*Program Subcategory</b> (Single-Select List)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Select the Subcategory that best fits the proposed program. Find the</li> </ul>

## Walmart Foundation State Giving Application Preview

<ul style="list-style-type: none"> <li>● Job Training</li> <li>● ----Training - Women</li> <li>● ----Training - Veterans</li> <li>● ----Training - General</li> <li>● Charitable Meals</li> <li>● ----Food Distribution</li> <li>● ----Congregate Meals</li> <li>● ----Home Delivered Meals</li> <li>● ----Capacity Building</li> <li>● Benefits Enrollment</li> <li>● ----SNAP Enrollment</li> <li>● ----WIC Enrollment</li> <li>● Nutrition Education</li> <li>● ----Cooking Skills</li> <li>● ----Shopping Skills</li> <li>● Education</li> <li>● ----K-12 Education</li> <li>● ----College Access and Success</li> <li>● ----Literacy</li> <li>● ----Mentoring/Tutoring</li> <li>● ----After-school/Summer learning</li> <li>● Health and Human Services</li> <li>● ----Dental Care</li> <li>● ----Vision Care</li> <li>● ----Disease Awareness/Prevention</li> <li>● ----Immunization Programs</li> <li>● ----Medical Transportation</li> <li>● ----Health Screening</li> <li>● ----Fitness</li> <li>● ----Crisis Support</li> <li>● ----Other Basic Needs</li> <li>● Sustainability</li> <li>● ----Sustainable Agriculture</li> <li>● ----Recycling</li> <li>● ----Energy Reduction</li> <li>● ----Conservation</li> <li>● Small Business Support</li> <li>● ----Training and Support</li> <li>● Arts and Recreation</li> <li>● ----Arts Education</li> <li>● ----Museum Programs</li> <li>● ----Community Beautification Projects</li> <li>● ----Parks/Playgrounds</li> </ul>	<p>Focus Category value you selected in the Program Focus Category question above and then select a value from those given beneath that heading.</p>
<p><b>*Unmet Need/Problem Statement</b> (Long Paragraph)(32500 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>● Briefly define the problem or issue the program is designed to address. Why is it important? How does the problem/issue affect the target population? What is the organization's plan to address the problem/issue?</li> </ul>
<p><b>*Fund Use</b> (Paragraph)(150 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>● Provide a brief narrative of how funds will be used, if awarded.</li> </ul>
<p><b>*Program Description</b> (Paragraph)(2000 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>● Provide a brief synopsis of what the proposed program will achieve.</li> </ul>
<p><b>*Primary Target Population</b> (Paragraph)(2000 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>● Describe the target population for the proposed program.</li> </ul>

## Walmart Foundation State Giving Application Preview

<p><b>What state is this request for?</b> (Single-Select List of U.S. states including Puerto Rico and Virgin Islands)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>•</li> </ul>
<p><b>*Area Served</b> (User-Defined List)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>• Enter the county or counties served by proposed program one at a time and click the "Add to List" button after each entry. If you serve all counties in a state then simply enter "All counties".</li> </ul>
<p><b>*Desired Results</b> (Paragraph)(2000 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>• Identify the major program goals and outcomes. What are the anticipated benefits for the target population and the impact the organization expects to achieve as a result of the proposed program?</li> </ul>
<p><b>*Program Sustainability</b> (Paragraph)(2000 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>• Briefly describe how the proposed program will be sustained and/or integrated into the organization's work if Walmart or its Foundation is unable to support the program.</li> </ul>
<p><b>*Organizational Budget</b> (Currency)(20 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>• Enter the organization's total operating budget.</li> </ul>
<p><b>*Program Budget</b> (Currency)(20 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>• Enter the total program budget.</li> </ul>
<p><b>*Requested Grant Amount</b> (Currency)(20 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>• Enter the dollar amount you are requesting for this project. The dollar amount requested must be \$25,000 or greater.</li> </ul>
<p><b>Budget Breakdown</b></p>	
<p><b>Please complete the following section based on the budget for the proposed program.</b></p>	
<p><b>*Program Budget Items</b></p> <ul style="list-style-type: none"> <li>• Personnel Costs</li> <li>• Materials and Supplies</li> <li>• Other Direct Costs</li> <li>• Indirect Costs</li> </ul>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>• Please enter the requested amount of each item below. <ul style="list-style-type: none"> <li>• Personnel Costs: Total amount of program-related personnel expenses including: compensation, benefits, insurance, etc. <b>Compensation (including benefits, insurance, etc.) is limited to 50% of any single program-related position.</b> You may request funds for multiple positions.</li> <li>• Materials and Supplies: Total of all program-related supplies and materials.</li> <li>• Other Direct Costs: Total of all other program-related direct costs.</li> <li>• Indirect Costs: Total of all non program- related expenses including: non program-related staff, shared supplies, rent, occupancy, utilities etc. <b>Indirect costs cannot exceed 10% of total request amount.</b></li> </ul> </li> </ul>
<p><b>*Explanation of Personnel Costs</b> (Paragraph)(2000 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>• Please list the positions, amounts and percentage of total compensation for each position included in the above Personnel Costs total. <b>Compensation (including benefits, insurance, etc.) is limited to 50% of any single program-related position.</b> The request may include funds for multiple positions.</li> </ul> <p><i>Example:</i> Program Manager- \$25,000 (50% time) Executive Director- \$25,000 (50% time)</p> <p><b>If the organization is not requesting support for Personnel Costs, enter N/A.</b></p>

## Walmart Foundation State Giving Application Preview

<p><b>*Explanation of Materials and Supplies</b> (Paragraph)(2000 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Please provide a line-item breakdown of all items included in the above Materials and Supplies total.</li> </ul> <p><i>Example:</i> Books - \$5,000 Computers - \$5,000</p> <p><b>If the organization is not requesting support for Materials and Supplies, enter N/A.</b></p>
<p><b>*Explanation of Other Direct Costs</b> (Paragraph)(2000 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Please provide a line-item breakdown of all items included in the above Other Direct Costs total.</li> </ul> <p><i>Example:</i> Travel - \$3,000 Staff Training - \$2,000</p> <p><b>If the organization is not requesting support for Other Direct Costs, enter N/A.</b></p>
<p><b>*Explanation of Indirect Costs</b> (Paragraph)(2000 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Please provide a line-item breakdown of all items included in the above Indirect Costs total. <b>Indirect Costs cannot exceed 10% of total requested amount.</b></li> </ul> <p><i>Example:</i> Rent - \$4,000 Electric - \$2,500</p> <p><b>If the organization is not requesting support for Indirect Costs, enter N/A.</b></p>
<p><b>Demographics</b></p>	
<p>Please provide specific information regarding the populations served by the program for which the organization is requesting Walmart State Giving funds.</p>	
<p><b>*People Served</b> (Number)(15 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Enter the projected number of unduplicated individuals served as a result of this funding request. An individual who receives more than one service should only be counted once for this question.</li> </ul>
<p><b>*Gender</b></p> <ul style="list-style-type: none"> <li>Male</li> <li>Female</li> <li>Unknown/Unreported</li> </ul>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Enter the number of people in each gender type that the organization plans to serve as a result of this funding request. <b>The total must equal the number entered in the People Served field above.</b></li> </ul>
<p><b>*Age Group</b></p> <ul style="list-style-type: none"> <li>Unknown/Unreported ages</li> <li>Children (0-12)</li> <li>Youth (13-18)</li> <li>Adults (19-24)</li> <li>Adults (25-55)</li> <li>Mature (56+)</li> </ul>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Enter the number of people in each age range that the organization plans to serve as a result of this funding request. <b>The total must equal the number entered in the People Served field above.</b></li> </ul>
<p><b>*Ethnic Background</b></p> <ul style="list-style-type: none"> <li>African American or Black</li> <li>American Indian or Alaskan Native</li> <li>Asian and Pacific American Islander</li> </ul>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>Enter the number of people of each ethnic background that the organization plans to serve as a result of this funding request. <b>The total must equal the number entered in the People Served field above.</b></li> </ul>

## Walmart Foundation State Giving Application Preview

<ul style="list-style-type: none"> <li>Hispanic or Latino</li> <li>Multi-ethnic</li> <li>White</li> <li>Unknown/Unreported</li> </ul>	
<b>Veterans</b> (Yes/No)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>Will the proposed program serve U.S. military veterans?</li> </ul>
<b>Veterans Served by Gender</b> <ul style="list-style-type: none"> <li>Male</li> <li>Female</li> <li>Unknown/unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>Please provide the total number of veterans served as a result of this funding request. This does not include military family members, only people who have served in the military themselves.</li> </ul>
<b>Veterans Served by Age Group</b> <ul style="list-style-type: none"> <li>Adults (18-34)</li> <li>Adults (35-55)</li> <li>Mature (56+)</li> <li>Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>Please provide the number of veterans served in each age group as a result of this funding request. This does not include military family members, only people who have served in the military themselves.</li> </ul>
<h3 style="color: #0070C0;">Program Metrics</h3>	
Please provide additional detail on the projected impact of the proposed program by completing the fields below.	
<b>Service Type</b> (Multi-Select List) <ul style="list-style-type: none"> <li>Home Delivered Meals</li> <li>Congregate Meals</li> <li>Grocery or Food Distribution</li> <li>Benefits Enrollment</li> <li>Nutrition Education</li> <li>Cooking Skills Education</li> <li>Capacity Building</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>Please specify which service(s) the proposed program will provide to the organization's target population. To choose more than one service type, hold down Ctrl and click (Cmd and click for Apple computers).</li> </ul>
<b>Number of people served</b> <ul style="list-style-type: none"> <li>Children (0-17)</li> <li>Adults (18-59)</li> <li>Seniors (60+)</li> <li>Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>Please enter the projected number of people in each age range that will be served as a result of this funding request. Please note: the age ranges represented here are not the same as the age ranges in the Demographics section.</li> </ul>
<b>Congregate Meals</b> (Number)(15 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>Please provide the projected number of congregate meals provided as a result of this funding request.</li> </ul>
<b>Home Delivered Meals</b> (Number)(15 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>Please provide the projected number of home delivered meals the organization will provide through this funding request.</li> </ul>
<b>Federal Meal Reimbursements</b> <ul style="list-style-type: none"> <li>Child &amp; Adult Care Food Program (CACFP)</li> <li>School Breakfast Program (SBP)</li> <li>Summer Food Service Program (SFSP)</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>Please provide the projected number of meals that will be reimbursed through the organization's participation in any of the federal programs listed below.</li> </ul>
<b>Site/Location Types</b> <ul style="list-style-type: none"> <li>Schools</li> <li>Churches</li> <li>YMCAs/YWCAs</li> <li>Boys &amp; Girls Clubs</li> <li>Other Locations</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>Please enter the number of each type of site the organization intends to support as a result of this funding request. This does not include home delivered meals.</li> </ul>

## Walmart Foundation State Giving Application Preview

<b>Pounds of Food Distributed</b> (Number)(15 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Please provide the projected total pounds of food distributed as a result of this funding request.</li> </ul>
<b>Backpacks Distributed</b> (Number)(15 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• How many backpacks will be distributed as a result of this funding request?</li> </ul>
<b>Average meals per pack</b> (Number)(15 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Please provide the average number of meals contained in each take-home food pack.</li> </ul>
<b>Average Pounds per pack</b> (Number)(15 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Please provide the average number of pounds contained in each take-home food pack.</li> </ul>
<b>Number of Sites</b> (Number)(15 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Please provide the projected number of sites served as a result of this funding request.</li> </ul>
<b>Households Informed</b> (Number)(15 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Please provide the projected number of households given information on federal benefits as a result of this funding request.</li> </ul>
<b>Households Assisted with Application</b> (Number)(15 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Please provide the projected number of households assisted with application for federal benefits as a result of this funding request. If no households were assisted, enter 0.</li> </ul>
<b>Households Enrolled</b> <ul style="list-style-type: none"> <li>• Supplemental Nutrition Assistance Program (SNAP)</li> <li>• Women, Infants, and Children (WIC)</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Please provide the projected number of households enrolled in federal benefits programs as a result of this funding request. If no households were enrolled through this program, enter 0.</li> </ul>
<b>People Instructed</b> <ul style="list-style-type: none"> <li>• Up to 6 hours of instruction</li> <li>• More than 6 hours of instruction</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Please provide the projected number of people given instruction as a result of this funding request.</li> </ul>
<b>Vehicles (Capacity Building)</b> <ul style="list-style-type: none"> <li>• Refrigerated Trucks</li> <li>• Other vehicles</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Please enter the number of vehicles the organization plans to purchase as a result of this funding request. If the organization does not plan to purchase any vehicles, enter 0.</li> </ul>
<b>Vehicle Details</b> (Paragraph)(500 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Please provide details on the types of vehicles the organization plans to purchase as a result of this funding request. If the organization is not requesting support to purchase vehicles, enter N/A.</li> </ul>
<b>Equipment Details</b> (Paragraph)(500 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Please provide the details of equipment (type and number of units) that the organization plans to purchase with the use of this funding request. If the organization is not requesting support for equipment, enter N/A.</li> </ul>
<b>Number of people provided career/support services</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• How many people could receive career or support services as a result of this funding request? <b>An individual who may receive more than one service should only be counted once for this question.</b></li> </ul>
<b>Job Skills Program Length</b> (Number)(15 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• How long (in days) is the proposed program?</li> </ul>
<b>Job Skills Program Duration</b> (Number)(15 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• What is the anticipated average number of hours in jobs skills training programs that participants will receive as a result of this funding request?</li> </ul>

## Walmart Foundation State Giving Application Preview

<b>Job Training</b> (No input required)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Please provide the total number of individuals served through each of the following services. If an individual receives more than one type of service, count them once for each service type they will receive.</li> </ul>
<b>Average Job Placement Rate</b> (Number)(15 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• What is the anticipated average placement rate of those that complete training as a result of this funding request?</li> </ul>
<b>Adult Basic Education Enrollment</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• How many people does the organization plan to <i>enroll</i> in adult basic education services as a result of this funding request?</li> </ul>
<b>Occupational/Vocational Education Enrollment</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• How many people does the organization plan to <i>enroll</i> in occupational or vocational education services as a result of this funding request?</li> </ul>
<b>Soft Skills Training Enrollment</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• How many people does the organization plan to <i>enroll</i> in soft skills training services as a result of this funding request?</li> </ul>
<b>Adult Basic Education Completion</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• How many people does the organization anticipate <i>completing</i> adult basic education programs as a result of this funding request?</li> </ul>
<b>Occupational/Vocational Education Completion</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• How many people does the organization anticipate <i>completing</i> occupational or vocational education services as a result of this funding request?</li> </ul>
<b>Soft Skills Training Completion</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• How many people does the organization anticipate <i>completing</i> soft skills training services as a result of this funding request?</li> </ul>
<b>Job Training Credentials</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• How many people does the organization anticipate receiving credentials/certifications as a result of this funding request?</li> </ul>
<b>Job Placement Metrics</b> (No input required)	<b>Instructions:</b>
<b>Part-Time Positions</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Of those who will complete training as a result of this funding request, how many people does the organization plan to place in part-time positions?</li> </ul>
<b>Full-Time Positions</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Of those who will complete training as a result of this funding request, how many people does the organization plan to place in full-time positions?</li> </ul>
<b>Internships/Apprenticeships</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Of those who will complete training as a result of this funding request, how many people does the organization plan to place as interns or apprentices?</li> </ul>



## Walmart Foundation State Giving Application Preview

<b>Self-Employed/Entrepreneur</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Of those who will complete training as a result of this funding request, how many people does the organization anticipate becoming self-employed or entrepreneurs?</li> </ul>
<b>Temporary Employment</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Of those who will complete training as a result of this funding request, how many people does the organization plan to place in temporary employment positions?</li> </ul>
<b>Wrap-Around Services</b> (Checkbox List) <ul style="list-style-type: none"> <li>• WIC</li> <li>• SNAP</li> <li>• Childcare</li> <li>• Mental Health Services</li> <li>• Financial Literacy</li> <li>• Transportation</li> <li>• Housing Assistance</li> <li>• Emergency Food Supply</li> <li>• Earned Income Tax Credit</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Please check all additional services that may be provided to individuals receiving job training services as a result of this funding request.</li> </ul>
<b>Career Opportunity - Veterans</b> (Yes/No)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Will the proposed program provide U.S. military veterans with job skills training and/or placement assistance?</li> </ul>
<b>Veterans-Specific Metrics</b> (No input required)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Please provide the total number of veterans served through each of the following services. If a veteran receives more than one type of service, count them once for each service type they will receive.</li> </ul>
<b>Average Job Placement Rate - Veterans</b> (Number)(15 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• What is the anticipated average placement rate for veterans that complete training as a result of this funding request?</li> </ul>
<b>Adult Basic Education Enrollment - Veterans</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• How many veterans does the organization plan to <i>enroll</i> in adult basic education programs as a result of this funding request?</li> </ul>
<b>Occupational/Vocational Education Enrollment - Veterans</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• How many veterans does the organization plan to <i>enroll</i> in occupational or vocational education services as a result of this funding request?</li> </ul>
<b>Soft Skills Training Enrollment - Veterans</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• How many veterans does the organization plan to <i>enroll</i> in soft skills training services as a result of this funding request?</li> </ul>
<b>Adult Basic Education Completion - Veterans</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• How many veterans does the organization anticipate <i>completing</i> adult basic education programs as a result of this funding request?</li> </ul>
<b>Occupational/Vocational Education Completion - Veterans</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• How many veterans does the organization anticipate <i>completing</i> occupational or vocational education services as a result of this funding request?</li> </ul>

## Walmart Foundation State Giving Application Preview

<b>Soft Skills Training Completion - Veterans</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• How many veterans does the organization anticipate <i>completing</i> soft skills training services as a result of this funding request?</li> </ul>
<b>Job Training Credentials - Veterans</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• How many veterans does the organization anticipate receiving credentials/certifications as a result of this funding request?</li> </ul>
<b>Part-Time Positions - Veterans</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Of those who will complete training as a result of this funding request, how many veterans does the organization plan to place in part-time positions?</li> </ul>
<b>Full-Time Positions - Veterans</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Of those who will complete training as a result of this funding request, how many veterans does the organization plan to place in full-time positions?</li> </ul>
<b>Internships/Apprenticeships - Veterans</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Of those who will complete training as a result of this funding request, how many veterans does the organization plan to place as interns or apprentices?</li> </ul>
<b>Self-Employed/Entrepreneur - Veterans</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Of those who will complete training as a result of this funding request, how many veterans does the organization anticipate becoming self-employed or entrepreneurs?</li> </ul>
<b>Temporary Employment - Veterans</b> <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Unknown/Unreported</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Of those who will complete training as a result of this funding request, how many veterans does the organization plan to place in temporary employment positions?</li> </ul>
<b>Wrap-Around Services - Veterans</b> (Checkbox List) <ul style="list-style-type: none"> <li>• WIC</li> <li>• SNAP</li> <li>• Childcare</li> <li>• Mental Health Services</li> <li>• Financial Literacy</li> <li>• Transportation</li> <li>• Housing Assistance</li> <li>• Emergency Food Supply</li> <li>• Earned Income Tax Credit</li> </ul>	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Please check all additional services that may be provided to veterans receiving job training services as a result of this funding request.</li> </ul>
<h3 style="color: #0070C0;">Donor Recognition</h3>	
<p>Please review the link below titled "Recognition Best Practices." Provide the information below to describe your donor recognition plan, should your proposal be selected to receive funding.</p> <p><i>Although corporations are not permitted, by law, to receive 'tangible benefits' as a result of their philanthropic giving, it is a best practice to receive 'intangible benefits' in the form of reputational marketing resulting from donor recognition.</i></p> <p style="text-align: center;"><b><u><a href="#">Recognition Best Practices</a></u></b></p>	
<b>*Donor Recognition plan</b> (Paragraph)(2000 character maximum)	<b>Instructions:</b> <ul style="list-style-type: none"> <li>• Describe how (if selected to be funded) support from the Walmart Foundation, the program, and its progress and results will be communicated and with whom.</li> </ul>

## Walmart Foundation State Giving Application Preview

Additional Information	
<p><b>*Other Potential Funders</b> (Paragraph)(2000 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>• List other potential funders and the requested level of support for the proposed program.</li> </ul>
<p><b>*IRS 990 Form</b> (File Upload)File Upload</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>• Attach a copy of the organization's most recent IRS 990 form.</li> </ul>
<p><b>*IRS Determination Letter</b> (File Upload)File Upload</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>• Attach a copy of the organization's IRS Determination Letter.</li> </ul>
<p><b>*Board of Directors</b> (User-Defined List)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>• Enter the name of each board member one at a time and click the "Add to List" button after each entry.</li> </ul>
<p><b>Associate Involvement</b> (Paragraph)(2000 character maximum)</p>	<p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>• List any Walmart or Sam's Club associates that currently serve on the organization's board of directors.</li> </ul>