2025 Fall Grant Cycle

*Richard M. Schulze Family Foundation*

# Downloading a .doc version of this document for practice/preparation

For your convenience, .doc and .pdf versions of this LOI form are available on the [Resources for](https://www.schulzefamilyfoundation.org/grants/resources-for-grant-writers/) [Organization Grant Writers](https://www.schulzefamilyfoundation.org/grants/resources-for-grant-writers/) landing page on our [website.](http://www.schulzefamilyfoundation.org/) Downloading this document will allow you to create a draft with aligned word counts that you can then copy and paste into this form when you are ready.

# Letter of Inquiry (LOI) Overview

The Fall 2025 grant cycle LOI opens on **April 7, 2025**.

The LOI deadline is **April 25, 2025**.

\*\*NOTE: **All LOIs will be reviewed after the submission deadline of April 25, 2025.**

**Requestors will be notified of the next step in the funding process, via email, on May 2, 2025.**

**BEFORE PROCEEDING, PLEASE CAREFULLY READ THE FOLLOWING:**

**We accept LOIs with initiatives in our three focus areas: Education, Human Services, and Health & Medicine. Please see below for areas that require an invitation to submit an LOI and areas that we do not fund.**

**Invitation only:**

* Disease-specific organizations
* Mental health prevention and early intervention services for children and adolescents
* Higher educational and postsecondary institutions
* Individual, high-performing private and charter K-12 schools
* Organizations outside of our geographic priority areas

**If you have not received an invitation from the Foundation as described in the bullet points above, please do not start or submit an LOI.**

**We do not fund:**

* Addiction and substance abuse recovery
* Performing and fine arts organizations
* Biomedical research
* Debt retirement
* Endowments
* Environmental causes
* For-profit businesses
* Government agencies
* Hospice care
* Individuals (except through our scholarship programs)
* Labor organizations
* Lobbying, advocacy, or political campaigns
* Mental health providers other than those focusing on prevention and early intervention services for children and adolescents
* Neurodegenerative diseases
* Publicly funded K-12 schools with the exception of charter schools
* Sectarian religious causes
* Special events or conferences
* Sports or athletic organizations

# Letter of Inquiry

Answers to the questions that follow have a character limit for our reporting purposes. Please be concise in your answers. If you feel the need to share more than the space provided allows, an opportunity to do so is made available at the end of this LOI via document upload. If you are using a [Draft/Prep version](https://www.schulzefamilyfoundation.org/grants/resources-for-grant-writers/) of this form from our [website,](http://www.schulzefamilyfoundation.org/) you can copy/paste your draft answers here.

## Project/Program Name\*

Please name the specific program for which you'd like funding.

*Character Limit: 100*

## Organization History\*

Please provide a brief history and description of your organization.

*Character Limit: 2000*

## Organization Changes\*

Has your organization experienced any of the following since the last application or grant from RMSFF? (Select all that apply.) If your organization has experienced changes, please complete our [Update Grantee Contact Information](https://www.schulzefamilyfoundation.org/grants/resources-for-grant-writers/update-grantee-contact-information/) form. If there are no changes, don't complete the change form.

**Choices**

Merger or name change (please complete Update Contact Information form) Change in relevant leadership (please complete Update Contact Information form) No Changes (do not complete Update Contact Information form)

## Project/Program Description\*

Please provide a description of the project or program for which you seek funding. **Note:** RMSFF recognizes the need for personnel and personnel expenses. It is not our intention, however, to make annual grants for the sole purpose of funding new permanent positions. RMSFF does, on occasion, provide general operating support grants. If a grantee chooses to use some or all of those funds to defray personnel expenses, the Foundation has no objection.

*Character Limit: 2500*

## Use of Funds Requested\*

Describe, in no more than two to three sentences, how the funds requested would be used.

*Character Limit: 500*

## Demographics: Race/Ethnicity\*

How would you describe the race and ethnicity of the primary beneficiaries of your services/programs? (Select all that apply.)

**Choices**

African American/African/Black Asian/Asian American European American/White Hispanic/Latino

Native American/American Indian/Indigenous No group accounts for more than 50% of total

## Demographics: Income\*

How would you describe the income level of the primary beneficiaries of your services/programs? (Choose ONLY ONE from the drop-down menu.)

**Choices**

Very Low Income (below 200% federal poverty level, up to 50% AMI, free & reduced lunch) Low Income (up to 80% AMI)

Moderate Income (up to 100% AMI) All Income Levels

Unknown

## Demographics: Geography\*

What is the geographic reach of your core services and programs? (Check all that apply.)

**Choices**

Anoka County (MN) Carver County (MN) Dakota County (MN) Hennepin County (MN) Ramsey County (MN) Scott County (MN) Washington County (MN) Charlotte County (FL) Collier County (FL) Glades County (FL) Hendry County (FL)

Lee County (FL)

## Demographics: Other

If there are other key traits (age, gender, cultural group, housing status, etc.) that describe the primary beneficiaries of your programs and services, please note them here.

*Character Limit: 1000*

## Impact\*

What impact will this program have on the community served?

*Character Limit: 1500*

## Timeline\*

Please provide the timeline for the program. **Note: Our Board will make funding decisions in mid-September 2025. The grant term will run from September 18, 2025, to September 17, 2026.**

*Character Limit: 1000*

## Focus Area of Request\*

Please identify the Foundation's focus area of your LOI request.

**Choices**

Education

Health & Medicine Human & Social Services

**What SINGLE category best describes the grant request you're proposing?\*** Please indicate the service category that best describes the majority of the grant you're proposing. Choose ONLY ONE. Detailed category descriptions can be found [here](https://www.schulzefamilyfoundation.org/what-we-support/focus-areas/).

**Choices**

Adult Education & Workforce Development Programs (Education)

Children’s & Family Services (Human & Social Services) Disability & Special Needs Services (Human & Social Services) Diseases, Disorders, and Disciplines (Health & Medicine)

Domestic Violence Support & Prevention (Human & Social Services) Early Childhood Programs & Services (Education)

Food Banks, Food Pantries, & Food Distribution (Human & Social Services) Homelessness, Shelter, & Crisis Services (Human & Social Services) Housing (Human & Social Services)

Mental Health (Human & Social Services)

Multipurpose Human Service Organizations (Human & Social Services) Patient & Family Support (Health & Medicine)

Scholarship & Financial Support (Education) Special Education (Education)

Treatment & Prevention Services (Health & Medicine)

Youth Development Programs & Services (Human & Social Services) Youth Education Programs & Services (Education)

Other

## Other Classification

If you chose Other in the list above, please provide a brief description of the request you're proposing.

*Character Limit: 250*

## Funding Requested\*

What funding amount would you seek if your organization is moved forward to the application phase for a grant associated with this LOI?

\*Please know that it is uncommon for the Foundation to fully fund any program. If you do not have a funding history with the Foundation, we suggest keeping your request at $15,000 or below.

*Character Limit: 20*

## Fundraising Goal\*

What is your total fundraising goal for this program?

*Character Limit: 100*

## Additional Information (Optional)

Feel free to upload a document you believe would be helpful to the Foundation's staff in reviewing and understanding your program. Please upload only one document.

*File Size Limit: 25 MB*

**Thank you!**

**All LOI submissions will be reviewed after the April 25, 2025 submission deadline. Requestors will be notified of the next step in the funding process, via email, on May 2, 2025.**

## We would like to learn more about how you heard about this grant opportunity.

Please select one or more sources from the list below.

**Choices**

Advertisement (Online, Print, etc.) Another Grantee or Recipient Colleague or word of mouth Conference or Event

Online Search (Google, Bing, etc.) Professional Association or Network RMSFF LinkedIn page

RMSFF Website Social Media Other

## If you selected "other," please explain.

*Character Limit: 250*

#  RMSFF Administrative Information

## Program Officer

**Choices**

Allar, Berit Church, Lisa M. Dienhart, Mark C. DiMercurio, Ana Dunker, Barb J.

Friederichs, Marla J. Geier, Mary Beth Halverson, Linda Hamburger, Jill Hoeppner, Steve A. Kraft, Brian T.

Lee, Dave

Otto Phillips, Sheila Webster, Kelly Q. Zumwinkle, Mike P.