General Program and Operating Grants

APPLICATION GUIDE | Healthcare Foundation of Northern Lake County

About this guide

Use this guide for question-by-question instructions, definitions, and examples. For Foundant account navigation and submission, consult the separate Foundant instructions. Applicants invited by HFNLC to request general operating support should also consult the supplemental instructions emailed privately by HFNLC staff.

Understanding Application Types

HFNLC uses different application pathways based on an organization's funding history and the program for which it is requesting support.

New Applicant: An organization applying to HFNLC for the first time or requesting funding for a program that has not previously received HFNLC support. This includes existing grantees proposing a new program.

Renewal After a Year Off: An organization returning after completing the required 12-month break under HFNLC's five-year funding policy. These applicants complete the same full application sections as new applicants.

Regular Renewal: An organization requesting continued funding for an existing HFNLC-supported program without the required funding break. These applicants complete a shortened application focused on organizational and program changes, accomplishments, and plans for the upcoming grant year.

General Operating Support: Available by invitation only. Invited organizations follow the appropriate application pathway and receive supplemental instructions from HFNLC staff regarding general operating support.

Choose the right pathway

Your application type is selected at the Letter of Inquiry (LOI) stage.

Color	Applies to	Sections
BLUE	New applicants, renewals after a year off, or a new program proposed by an existing grantee	Organization; Program; Budget; Attachments
GREEN	Regular renewal of an existing funded program	Organization for Renewal; Program for Renewal; Budget; Attachments
YELLOW	Everyone	Budget; Attachments

Regular renewals: It is important to review your last FULL application in Foundant, even if it was several years ago. This will help you accurately identify and describe changes to your organization and program since your last full application, rather than focusing only on changes from the past year.

BLUE | Organization — New / After a Year Off

Organizational Information

Character limit: 3000

Describe mission, history and founding year, main programs, and total organization-wide individuals served in the most recently completed fiscal year.

Guidance: Include all programs and locations, not just northern Lake County or the requested program.

What reviewers need: a clear picture of the whole organization. Include when it was founded, why it exists, its main services, and the total number of individuals served in the last completed fiscal year. Use the organization-wide count even if some work takes place outside northern Lake County.

Example: Founded in 2008, our organization provides food assistance, employment coaching, and family support at three sites. During FY2026, we served approximately 2,400 individuals across all programs.

Organizational Achievements

Character limit: 1000

Describe two or three significant achievements in the most recently completed fiscal year.

Guidance: Include strategic-plan milestones, important industry recognition or accreditation, program improvements, leadership and operations, partnerships, or financial progress. Explain why each matters; it need not relate to the requested program.

Choose two or three accomplishments that demonstrate meaningful progress, rather than listing every activity. Strong examples include completing a strategic-plan milestone, receiving an important accreditation or industry award, improving service access, developing a significant partnership, or strengthening financial or operational systems.

Explain the result and its importance: "We completed our strategic plan's goal of opening an evening clinic, increasing access for working adults." Recognition and awards are useful when you explain what they signify. Achievements may concern the entire organization and need not be related to this request.

Organization Staffing

Character limit: 750

Report full- and part-time paid staff as of December 31, changes in staffing, turnover rate for the previous calendar year, and reasons for unusually high turnover.

Guidance: Provide counts of full-time and part-time PAID employees as of December 31. Explain whether staffing changed significantly during the year and why. If turnover was unusually high, describe relevant circumstances and any steps taken to stabilize staffing.

To calculate annual turnover: divide the number of employees who left during the calendar year by the average number employed during that year, then multiply by 100. Example: 3 departures ÷ 18 average employees × 100 = 16.7%. Do not use the year-end headcount in place of the average unless they are the same.

BIPOC Representation

Report percentage identifying as Black, Indigenous, or People of Color as of application date. Executive Leadership Team = paid executives/senior managers; Other Paid Staff = paid employees excluding executive leadership; Board of Directors = current voting board members. Categories are mutually exclusive. Enter N/A for leadership and staff if there are no paid employees, but report board representation. Calculate number identifying as BIPOC / total in group × 100.

These are three SEPARATE, non-overlapping groups: (1) Executive Leadership Team means paid executive and senior management staff, such as the CEO or Executive Director; (2) Other Paid Staff means paid employees NOT included in executive leadership; (3) Board of Directors means current voting board members.

Calculate each percentage using the number of people identifying as BIPOC in that group divided by the total number in that group, multiplied by 100. *Example: 4 of 10 voting board members = 40%. Report as of the application date. If the organization has no paid staff, enter N/A for the first two fields; still complete the board field.*

Community Voice and Equity

Character limit: 1500

How does the organization incorporate community perspectives into decisions, programs, or practices? Give one example of input influencing a decision, change, or reduction of an access barrier.

Guidance: Describe how you listen, how feedback is used, and what changed. Example: families request weekend hours, so the organization adjusts scheduling.

Tell us HOW you hear from the people and communities affected by your work and HOW that input informs decisions. Methods can include conversations, surveys, resident advisory groups, participant feedback, or staff with lived experience.

Include ONE specific example: what people shared, what decision or practice changed as a result, and how that change addressed a barrier or made the work more responsive. *Example: families reported that weekday sessions conflicted with work; the organization added Saturday sessions*.

GREEN | Organization for Renewal

Organizational Number Served

Character limit: 250

Total people served across the organization in the most recently completed fiscal or calendar year.

Guidance: Include all programs and sites; identify the period. The program count is separate.

Report the total number of individuals served across ALL organizational programs and locations, not only people served through the program requesting renewal. Specify whether the number covers a fiscal or calendar year and the dates, if useful.

Organizational Changes

Character limit: 1000

Describe significant changes since the last application in leadership, staffing, programs, priorities, or communities served.

Guidance: Significant examples: executive transition, restructuring, new services, geographic expansion. Routine adjustments such as minor schedules, procedure changes, or ordinary replacement hires need not be included unless they materially affect operations. If none, say so.

Compare the organization with the last full application, which may have been submitted several years ago. Describe meaningful leadership changes, major staff restructuring, changes in strategy or service offerings, significant changes in community needs, or geographic expansion.

A routine operational adjustment is a minor schedule change, a small internal process improvement, or replacing a departing employee without materially changing capacity or direction. You do not need to report every routine adjustment. If there were no significant changes, say so plainly.

Organizational Achievements

Character limit: 1000

Describe two or three significant achievements in the most recently completed fiscal year.

Guidance: Consider strategic plan milestones, industry recognition, program results, capacity, collaborations, and financial or operational improvements. Explain why they matter.

Choose two or three accomplishments that demonstrate meaningful progress, rather than listing every activity. Strong examples include completing a strategic-plan milestone, receiving an important accreditation or industry award, improving service access, developing a significant partnership, or strengthening financial or operational systems.

Explain the result and its importance: "We completed our strategic plan's goal of opening an evening clinic, increasing access for working adults." Recognition and awards are useful when you explain what they signify. Achievements may concern the entire organization and need not be related to this request.

BLUE | Program — New / After a Year Off

Program Overview

Character limit: 2000

Describe the program, its purpose and goals, and how it addresses the selected HFNLC social drivers of health.

Guidance: Explain WHY the program exists and what it aims to achieve; detailed activities come next.

Focus on WHY the program exists: its purpose, the need it addresses, its intended goals, and the selected HFNLC social drivers of health. This should give someone unfamiliar with the program a clear understanding of what it is trying to accomplish.

Avoid a detailed activity schedule here; that belongs in Program Activities. *Example: The program helps uninsured adults establish regular primary care and addresses barriers related to healthcare accessibility and availability*.

Program Activities

Character limit: 3000

Describe activities and services, frequency, delivery locations, and timeline if applicable.

Guidance: Explain HOW it works: what participants receive, how often, and where in northern Lake County. Example: weekly workshops in Waukegan plus one-to-one care navigation.

Focus on HOW the program works. Describe the actual services, how often they occur, where they take place in northern Lake County, the length of services, and any key implementation phases or dates.

Example: Staff will hold weekly health education sessions in Waukegan and offer one-on-one community health worker support for appointments, referrals, and follow-up. Explain whether services are in person, virtual, mobile, or a combination.

Program Staffing

Character limit: 1500

Describe staffing structure, key responsibilities, and relevant qualifications.

Guidance: Include key paid roles, essential volunteers or contractors; no full resumes. Ensure related costs are appropriately reflected in the program budget.

Identify key positions, what each person does, and the qualifications or experience that prepare them for the work. Include contractors and volunteers only when they have a meaningful role in delivering the program.

You do not need to submit individual résumés. If staff time is included in the Budget Summary Worksheet, describe those roles here so the narrative and budget are consistent.

Data Collection and Evaluation

Character limit: 1500

Describe data tools, collection frequency, review process, and use for program improvement.

Guidance: Explain what is tracked, how and when, and how findings inform changes. Specific outcome targets belong in Measurement of Success.

Explain what information you collect, which tools you use (such as attendance records, surveys, referral logs, interviews, or case-management systems), when you collect it, and who reviews it.

Describe how you USE the information to make improvements. *Example: Staff review attendance and post-session surveys quarterly and adjust topics, language access, and session times. Save numeric performance targets for Measurement of Success.*

Program Partnerships

Character limit: 1000

Describe key partners and their contributions; if none, explain why.

Guidance: Focus on meaningful referrals, expertise, facilities, outreach, or coordinated delivery, not a long list of contacts.

Name partners that actively contribute to the program and explain their roles, such as referrals, outreach, space, clinical expertise, training, or coordinated services. Tell us why those relationships help the program succeed.

A long list of contacts is less useful than a few meaningful examples. If the program does not rely on formal partners, explain why independent delivery is appropriate.

Target Population and Need

Character limit: 2000

Describe participants, relevant demographics, geography, and barriers or needs addressed.

Guidance: Specify northern Lake County populations and use community assessments, program data, or participant feedback when possible.

Identify the people the program intends to reach, where they live, and barriers they experience. Include demographics only when relevant to understanding the program and its accessibility.

Support the need with information you already have: program data, community listening, needs assessments, participant feedback, or other relevant local information. Explain why the service is needed in northern Lake County.

Individuals Served

Character limit: 250

Number served by this program in the most recently completed 12 months.

Guidance: Identify the period. If new, say the program has not yet served participants.

Use the number of people served by THIS PROGRAM in the most recent 12-month period, and identify the period. This differs from the organization-wide total. For a brand-new program, indicate that no participants have yet been served.

Avoid double-counting people who participate multiple times when a unique-person count is available.

Individuals Anticipated

Character limit: 250

Estimated number to be served in the upcoming grant year.

Guidance: Use realistic capacity-based estimates; explain significant changes.

Estimate how many people THIS PROGRAM can realistically serve during the upcoming grant year. Base the estimate on staff capacity, available funding, historical participation, and any planned changes.

If the estimate differs substantially from the prior-year count, briefly explain why—for example, adding a site or reducing hours.

Measurement of Success

Character limit: 1,000

Choose two or three measurable outcomes with specific targets. Outcomes describe changes or benefits; outputs count activities or services. Both matter, but prioritize outcomes and include at least one meaningful participant benefit when possible.

OUTPUTS describe what you deliver, such as 5,000 meals distributed or 20 workshops held. OUTCOMES describe the benefit or change, such as 75% of participating households reporting improved access to nutritious food. Outputs remain useful, especially for basic-needs programs, but aim to include at least one meaningful outcome when feasible.

General goal	Measurable outcome and target
Improve healthcare access	80% of referred participants complete a healthcare appointment within 60 days.
Increase healthy eating knowledge	75% of workshop participants improve nutrition knowledge on a post-assessment.
Strengthen employment readiness	60% of training completers obtain employment within six months.

Output example: distribute 5,000 nutritious meals. Outcome example: 75% of participating households report better access to nutritious food. Choose targets you can realistically track.

GREEN | Program for Renewal

Review the last FULL application, which may be several years old. Describe meaningful changes and coming-year plans, not unchanged details or progress already covered in the year-end report.

Changes to the Program

Character limit: 2000

Describe significant changes since the last full application to activities, staffing, partnerships, populations, needs, or evaluation.

Guidance: Skip routine minor changes. If none, say so. A stable program can remain effective; change is not required for its own sake.

Review the last FULL program application, which may be several years old. Explain significant changes in activities, staffing, partnerships, population served, identified needs, or how results are measured. Do not repeat the year-end report.

A program does not need to change every year to remain effective. Continuing successful services that meet an ongoing community need is a valuable use of resources. HFNLC wants to understand meaningful changes—not encourage change for its own sake. If there are none, say so.

Plans for the Coming Grant Year

Character limit: 2500

Summarize priorities, planned activities, milestones, and timelines for the upcoming grant year.

Guidance: An existing work plan may be uploaded under Additional Attachments; still provide a brief narrative here. No particular work plan format is required, and you need not create one just for this application. A work plan may show actions, responsibilities, and dates.

Provide a short narrative work plan: priorities, major activities, milestones, and approximate timelines for the coming year. *For example: continue weekly workshops, add a new series in the second quarter, and review feedback each quarter.*

A work plan is simply a description of goals, activities, responsible people, and timelines. It can be a narrative, table, or timeline. An existing work plan may be uploaded under ADDITIONAL ATTACHMENTS; a new document is not required. Even when uploading an existing plan, summarize the key activities here.

Individuals Served

Character limit: 250

Number served by this program in the most recently completed 12 months.

Guidance: Identify period and count program participants, not organization-wide clients.

Use the number of people served by THIS PROGRAM in the most recent 12-month period, and identify the period. This differs from the organization-wide total. For a brand-new program, indicate that no participants have yet been served.

Avoid double-counting people who participate multiple times when a unique-person count is available.

Individuals Anticipated

Character limit: 250

Expected program participants in the upcoming grant year.

Guidance: Use realistic estimates and explain major anticipated changes.

Estimate how many people THIS PROGRAM can realistically serve during the upcoming grant year. Base the estimate on staff capacity, available funding, historical participation, and any planned changes.

If the estimate differs substantially from the prior-year count, briefly explain why—for example, adding a site or reducing hours.

Measurement of Success

Character limit: 1,000

Choose two or three measurable outcomes with specific targets. Outcomes describe changes or benefits; outputs count activities or services. Both matter, but prioritize outcomes and include at least one meaningful participant benefit when possible.

OUTPUTS describe what you deliver, such as 5,000 meals distributed or 20 workshops held. OUTCOMES describe the benefit or change, such as 75% of participating households reporting improved access to nutritious food. Outputs remain useful, especially for basic-needs programs, but aim to include at least one meaningful outcome when feasible.

General goal	Measurable outcome and target
Improve healthcare access	80% of referred participants complete a healthcare appointment within 60 days.
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Output example: distribute 5,000 nutritious meals. Outcome example: 75% of participating households report better access to nutritious food. Choose targets you can realistically track.

For renewals, report expected results for the NEXT grant year, not progress against prior targets.

YELLOW | Budget — All Applicants

Annual Expenses

Character limit: 20

Total actual expenses for the entire organization in its most recently completed fiscal year.

Guidance: Use actual expenses, not the current budget or program-only expenses.

Use ACTUAL total expenses from the most recently completed fiscal year for the ENTIRE organization. Do not use the current-year projected budget, the grant request amount, or the program-only budget.

Use of HFNLC Funds

Character limit: 1000

Explain how funding supports the program and strengthens the organization.

Guidance: Discuss sustaining staff/services, access, quality, or expansion. Do not assign HFNLC dollars to individual expense lines.

Describe how the grant will support services, staffing, access, quality, or continuity of the program. This is a narrative explanation of the investment's role, not an itemized spending plan.

You do NOT need to assign HFNLC dollars to individual expense categories. Example: HFNLC funding will help sustain community health worker outreach, care coordination, and follow-up for residents facing barriers to care.

Financial Health and Significant Changes

Character limit: 1500

Describe major financial changes and differences between current/projected budget and last completed actual expenses.

Guidance: Explain causes and responses. *Example: loss of a government grant reduced revenue 12%; the organization adjusted expenses, delayed vacancies, and diversified fundraising.* Financial

challenges do not automatically make an applicant less competitive. If no significant changes, say so.

Compare the current or projected organization-wide budget with actual expenses from the last completed fiscal year. Explain substantial changes in revenue, major grants, costs, staffing, or financial stability. If nothing material changed, say so.

Positive example: Revenue is expected to rise 15% due to a new service location and added staff, supported by several new funding commitments.

Challenge example: A government grant expired, reducing revenue by 12%. The organization adjusted expenses, delayed filling two vacancies, and increased efforts to diversify funding while preserving core services. Financial challenges are not automatically disqualifying; HFNLC wants context and the response.

Budget Summary Worksheet

Upload projected program income and expenses for the upcoming grant period, limited to the portion benefiting northern Lake County. Show secured and anticipated/unconfirmed funding, including HFNLC request. Include staff, contracts, materials, assistance, and reasonable shared/administrative costs; adapt expense categories as needed. HFNLC funds need not be assigned to individual line items.

For programs serving multiple areas, use reasonable allocations based on participants, staff time, activities, or service hours. Example: 40% of participants may justify 40% of certain shared expenses if service intensity is similar; dedicated northern Lake County costs may be allocated differently. Explain the method in worksheet notes. No separate accounting system is required. Check totals because worksheet formulas are not locked.

Invited general operating applicants: follow the separate emailed budget instructions.

Complete the required worksheet for the PROGRAM requesting funding during the upcoming grant period—not the whole organization. Include only the portion of income and expenses associated with work benefiting northern Lake County.

Include ALL program income sources, secured and anticipated, including the HFNLC request. Include all relevant program expenses; you may adjust categories to reflect your work. The worksheet contains income, expenses, summary, and notes sections; formulas are not locked, so check totals.

For shared costs across service areas, use a reasonable allocation based on actual activity, participants, staff time, service hours, or another suitable measure. Example: If 40% of clients live in northern Lake County and services are delivered similarly, allocating 40% of certain shared expenses may be appropriate. A dedicated northern Lake County staff position or facility may be allocated differently. Explain your method in the worksheet notes. A separate accounting system is NOT required.

Do not earmark the requested HFNLC amount to individual expense lines. Applicants specifically invited to request general operating support should follow the separate instructions emailed by HFNLC staff.

YELLOW | Attachments — All Applicants

Organization Operating Budget — Required

Current fiscal year income and expense budget for the entire organization, all programs and locations. Use your existing format. This is separate from the program Budget Summary Worksheet.

Upload the organization's CURRENT fiscal-year operating budget, showing anticipated revenue and expenses for all programs and locations. You may use the format your organization already maintains.

This is different from the Budget Summary Worksheet: the operating budget covers the whole organization; the worksheet covers the proposed program's northern Lake County portion.

Grant List

All government, corporate, and foundation grants for the current fiscal year, organization-wide, secured and pending. Include funder, amount, purpose if relevant, and status. A table or spreadsheet is fine; individual donations and event revenue need not appear.

List the funder, amount, purpose if applicable, and whether the award is SECURED or PENDING.

A simple table or spreadsheet is acceptable; no special format is required. Individual donations and event revenue do not belong on this grant list.

Board of Directors

Current one-page portrait list of board members, affiliations, and vacancies. Affiliations can include employers and positions, other board memberships, professional associations, or community leadership roles. Retired or unaffiliated members may be identified as such. Do not include phone numbers, home addresses, or other personal contact information.

Examples of affiliations include employers and job titles, membership on OTHER boards, professional associations, or community leadership roles. You may note that someone is retired or has no current affiliation. DO NOT include phone numbers, home addresses, or other personal contact information.

Additional Attachments

Upload only helpful supporting materials, such as an evaluation report or an existing work plan. Renewal work plans go under Additional Attachments, and applicants should still summarize plans in the narrative. Do not create a work plan just to apply. Staff résumés and duplicative promotional materials are not needed.

Upload only materials that add meaningful context, such as a recent evaluation report or an EXISTING program work plan. More attachments do not necessarily strengthen an application.

Regular renewals may upload an existing work plan under THIS Additional Attachments section; still summarize the plan in Plans for the Coming Grant Year. You do not need to create a new work plan solely for this application. Avoid duplicate narratives, general promotional materials, and staff résumés unless requested.

Application FAQs

Do we need to hire a grant writer or use technical language to prepare a competitive application?

No. HFNLC values clear, specific information about your organization, program, and community. You do not need professional grant-writing experience or specialized terminology. Focus on explaining what you do, why it matters, and what you hope to accomplish.

Do we need to repeat information from our previous application?

No. Regular renewal applicants should review their last full application and focus on significant changes, accomplishments, and plans for the coming year. You do not need to repeat information that has not changed unless the application specifically requests it.

What if nothing significant has changed since our last application?

That's okay. A successful program does not need to change every year. If your program continues to meet an important community need, explain that. HFNLC values effective, consistent services as well as innovation.

What if our program addresses more than one social driver of health?

Many programs address multiple social drivers of health. Identify the areas most directly connected to your program and explain how your activities contribute to those priorities. You do not need to demonstrate a connection to all four of HFNLC's SDOH priorities.

What if our organization doesn't have formal evaluation tools?

You do not need a sophisticated evaluation system. Describe the information you currently collect, such as attendance records, participant feedback, surveys, or service outcomes. Explain how you use that information to understand your program's effectiveness and identify opportunities for improvement.

What if we haven't established outcome targets for a new program?

New programs should propose realistic targets based on anticipated activities, staffing, and available information. These may be informed by similar programs, community needs, or your organization's experience. Targets can be refined as the program develops, but your application should explain what you hope to accomplish and how you will measure progress.

Can we use estimates if we don't have exact numbers?

Yes, when exact figures are not available. Use reasonable estimates based on the best information you have, and briefly explain how you arrived at them. Clearly identify estimates rather than presenting them as confirmed figures.

Do we need formal partnerships to be considered for funding?

No. Partnerships can strengthen programs, but they are not required for every request. If your program works with other organizations, explain their roles and contributions. If partnerships are not necessary for your approach, briefly explain why.

What is the difference between the number of individuals served by our organization and the number served by our program?

The organization-wide number includes individuals served across all your organization's programs and locations. The program number includes only individuals served by the specific program for which you are requesting funding. These figures may be different.

Can we include general administrative expenses in our program budget?

Yes. Include a reasonable portion of administrative or shared expenses that support the program, such as supervision, accounting, technology, or facilities. Explain how these expenses were allocated to the program.

What if our program serves people outside northern Lake County?

You may describe the broader program, but your HFNLC funding request and Budget Summary Worksheet should focus on the activities and expenses benefiting northern Lake County. If expenses are shared across geographic areas, use a reasonable allocation method and explain your approach.

Can we estimate the portion of our program expenses associated with northern Lake County?

Yes. You may use a reasonable allocation based on factors such as participants served, staff time, service hours, or program activities. Explain your method in the Budget Summary Worksheet's notes section. You do not need a separate accounting system for northern Lake County.

Do we need to identify exactly which expenses will be paid with HFNLC funds?

No. The Budget Summary Worksheet should reflect the overall income and expenses for the program in northern Lake County, including the requested HFNLC funding. You do not need to assign HFNLC dollars to individual expense lines.

Glossary Of Terms

Term	Definition
Allocation Method	A reasonable way to divide shared expenses among programs or geographic areas based on factors such as staff time, participants served, or services delivered.
Anticipated Funding	Funding an organization expects to receive but that has not yet been confirmed or awarded.
BIPOC	Black, Indigenous, and People of Color. HFNLC uses this term when asking about representation among organizational leadership, staff, and board members.
Community Voice	The perspectives, experiences, and ideas of people directly affected by an issue or served by a program.
Equity	Recognizing that people face different barriers and may need different resources or support to have fair opportunities.
Evaluation	The process of collecting and reviewing information to understand how well a program is working and identify opportunities for improvement.
Evidence of Need	Information showing why a program is necessary, such as community data, participant feedback, service records, or partner observations.
Fiscal Year	The 12-month period an organization uses for financial reporting. It may differ from the calendar year.
General Operating Support	Funding that supports an organization's overall operations rather than one specific program. At HFNLC, this type of support is available by invitation only.
Healthcare Accessibility & Availability (HAA)	Having healthcare services that people can reach and use when needed. Barriers may include cost, insurance, transportation, language, provider availability, or appointment times.
Access to Healthy Food	Being able to obtain enough affordable, nutritious, and culturally appropriate food. Barriers may include food costs, transportation, limited nearby options, or lack of time and resources to prepare meals.
Employment & Income	Having opportunities for stable employment and sufficient income to meet basic needs. This includes access to jobs, job training, fair wages, and resources that support financial stability.
Community Engagement & Social Support (CESS)	Having meaningful connections, trusted relationships, and opportunities to participate in community life. This includes social support, a sense of belonging, and community involvement that supports health and well-being.
Indirect or Shared Expenses	Costs that support more than one program, such as accounting, technology, insurance, or office space.

Last Full Application	The most recent application submitted to HFNLC containing complete organization and program information, rather than a shortened renewal application.
Letter of Inquiry (LOI)	The initial stage of HFNLC's application process, when applicants provide basic information about their organization and funding request.
Measurable Target	A specific result an organization expects to achieve, expressed as a number, percentage, or other indicator that can be tracked.
Milestone	An important step or accomplishment along the way toward completing a program or achieving a goal.
Northern Lake County	HFNLC's designated geographic service area within Lake County, Illinois. Funding requests should focus on activities and expenses benefiting communities within this area. See HFNLC's Service Area Map.
Organizational Capacity	An organization's ability to carry out its work effectively, including its staffing, leadership, systems, resources, and partnerships.
Organization Operating Budget	A financial plan showing anticipated income and expenses for the entire organization during its current fiscal year.
Outcome	A change or benefit resulting from program activities, such as improved knowledge, increased access to services, or greater financial stability.
Output	A count of activities or services delivered, such as the number of workshops held, meals distributed, or people served.
Program Budget	A financial plan showing income and expenses associated with a specific program. For HFNLC applications, it should reflect the portion benefiting northern Lake County.
Secured Funding	Funding that has already been awarded or firmly committed to an organization.
Social Drivers of Health (SDOH)	The social, economic, and environmental conditions that influence people's health and well-being. HFNLC focuses on four priorities: Healthcare Accessibility & Availability, Access to Healthy Food, Employment & Income, and Community Engagement & Social Support.
Target Population	The specific group of people a program is designed to serve.
Turnover Rate	The percentage of employees who leave an organization during a specific period.
Work Plan	A document outlining program goals, activities, responsibilities, timelines, and important milestones. It may be presented as a narrative, table, or timeline.