

2018 Hall of Outsized Impact

Health

Application Questions 1. Your Name 2. Foundation Name 3. City, State 4. Email Address 5. Phone Number 6. Name of person who will be on-site at the conference to present the poster 7. Email address of the poster presenter 8. Project Title: 9. What kind of activity was it? ☐ Grant Support □ Non-grant support ☐ Both grant and non-grant support 10. If a grant, what was the amount? 11. If a non-grant initiative, what was involved? 12. What category best describes your project? ☐ Capacity Building Collaboration □ Community Building Convening □ Equity/Inclusion ☐ Multiyear Funding □ Supporting Next Gen Funders Seed Funding □ Systems Change ☐ Other (please specify) 13. Which funding area best describes your project? □ Animals ☐ Arts & Culture Education Environment



Human Services
International Affairs, Development, Peace & Human Rights
Public Affairs & Society Benefit
Religion
Other (please specify)

- 14. What was your objective? Limit of 500 characters
- 15. What were the results? *Limit of 500 characters*
- 16. Why would you say this effort had outsized impact? Limit of 500 characters
- 17. What did you learn from this project that other funders should know? *Limit of 500 characters*
- 18. Please share links to any sites where we can read more about the project.