



Grant Eligibility

Applicants must:

- Be a 501(c)(3) or 509(a)(3) nonprofit organization
- Apply for financial support for an Ohio-based oral health-related program that reaches out to the underserved of Ohio
- Have the endorsement of an ODA member dentist or local component society involved with the program. For list of component societies visit: <https://www.oda.org/about/oda-governance-leadership/component-dental-societies/>
- Have appropriate additional sources of funding for the program
- Have demonstrable need for additional funding on a time-limited basis
- Plan to continue the project upon expiration of the grant term

Priority Programs/Projects

The ODA Foundation will give priority consideration to complete proposals that demonstrate:

- **Documented need for the program/project.** This should include statistics, data and other indicators of the community need.
- **Long-lasting results of the program/project after the grant period.** Explain how the program will result in sustainable change for the target population.
- **An increase in the organization's ability to help the underserved.** Define the demographics of the underserved population to be served through the program and how additional funding will increase program/project capacity.
- **Applicant's ability and track record working with underserved populations.** The application should demonstrate past experience with community outreach programs, working with the dental community, and the ability to fulfill the proposed program/project.

Additional Information

- Individuals are not eligible to receive an ODA Foundation Access to Care Grant for their personal dental needs, dental school debt reduction or any other purpose.
- Grant requests must originate from 501(c)(3) or 509(a)(3) organization and funds must be received and expended by the applicant organization or its supporting organization (example: a hospital foundation may apply on behalf of a hospital that would expend the funds).
- The Ohio Dental Association Foundation does NOT fund: Salaries or contract fees, grant writing fees, endowments or fundraising campaigns, political campaigns or groups, programs not endorsed by an ODA member dentist or local component dental society, projects not related to oral health, requests to reimburse materials or services already purchased/ordered.
- Applicant organizations that are chosen by the ODA Foundation to receive a grant are required to sign a grant contract outlining the requirements of the grantee before the funds will be disbursed.
- Grant recipients will be provided with Interim and Final Grant Reporting Forms and must agree to return both to the Foundation by the dates indicated in order to be eligible for future grants.
- Receiving a grant award in a previous year does not guarantee future funding.
- The ODA Foundation's ability to meet requests for grant support is limited. The final determination for funding is made on the merits of the project and that it falls within the Foundation's mission and focus. Grant awards are the decision of the Foundation Board of Trustees, and all decisions are final.

About the ODA Foundation

The Ohio Dental Association Foundation is a 501(c)(3) Ohio charity and is the philanthropic arm of the Ohio Dental Association. It is governed by a Board of Trustees elected by the Executive Committee of the Ohio Dental Association.

ODA Foundation Mission

The Ohio Dental Association Foundation mission is to improve the oral health of the citizens of Ohio and to enhance the dental profession in Ohio.

ODA Foundation Focus

The ODA Foundation supports public service projects and worthwhile initiatives that improve the oral health of Ohioans and increase access to dental care. Visit www.oda.org to learn more.

NOTE: *The ODA Foundation recommends submitting your proposal a few days prior to the deadline to allow staff to review it for completeness and provide you with an opportunity to add any missing documents by the deadline.*

Grant Process

Applying for a grant proposal is a two-step process. First, a one-page Letter of Inquiry (LOI) must be submitted to mollie@oda.org by 11:59 p.m. on May 2, 2025. The LOI, signed by the executive director or board president of the applicant organization, must include a short summary of the proposed project and its estimated total cost, noting the amount that will be requested from the ODA Foundation and how the ODA Foundation funds will be used. Email and phone numbers for the grant contact person should be included in the LOI for contact by the ODA Foundation Manager. If an applicant submits a proposal without having submitted a LOI by May 2, 2025, the proposal is considered incomplete and will not be reviewed for funding.

The ODA Foundation Manager and one trustee from the ODA Foundation Board will review the LOI. Please take into consideration any suggestions that the ODA Foundation Manager provides with respect to the project and amount that will be requested in the full proposal. Following contact by the ODA Foundation Manager, the applicant may proceed with submitting the organization's grant proposal for consideration by the deadline, June 20, 2025, for consideration.

Online Proposal Submission

The ODA Foundation now utilizes an online proposal submission system to submit all required documents by the deadline. The online submission cannot be started and stopped and must be completed in a single sitting. You must have all required documents ready to upload at the time of completing the online submission. All documents must be uploaded as PDFs. The online submission will ask for general information about the organization in addition to all required uploads. To view and submit the online proposal submission, go to: <https://www.oda.org/get-involved/with-the-oda-foundation/scholarships-grants/>

Checklist

The following list of items must be included in the online submission in order for it to be complete. Incomplete or late proposals will not be reviewed for funding. Please make sure to have all of these documents prepared before starting the online submission as you will not be able to save and return later to submit.

- Transmittal Letter (outlined on page 2)
- Grant Narrative (outlined on page 2)
- Budget (page 3)
- Quote for equipment costs (if funding is being requested to purchase equipment)
- IRS documentation of 501(c)(3) or 509(a)(3) status
- Most recently available 990 or audited annual financial statement
- Two letters of support, one of which must be from an ODA member dentist involved with the project or local Ohio component dental society and details the relationship or involvement with the organization. The other may be from a partnering agency or other organization/agency involved with or served by the program (other than applicant organization)
- Relevant brochures or other information (recommended but not required)

Proposal Deadline

You must complete your online proposal submission by June 20, 2025 at 11:59 p.m. You will receive confirmation from the ODA Foundation Manager that your submission has been received. If you submit prior to the June 20 deadline and the Manager finds your proposal to be incomplete, you will be offered the chance to submit the missing documents by the June 20 deadline.

Review of Proposals

All completed grant proposals that are received by the deadline will be processed and submitted to the Grant Review Committee. The total number and dollar amount of grants awarded depends on the amount available for funding each year. Incomplete or late proposals will not be reviewed for funding.

Notification

Applicants will be notified if they will receive an ODA Foundation grant in mid-September. Applicants awarded grants will be required to sign and return a grant agreement prior to receiving grant funds.

Questions

For any questions or concerns regarding the proposal or grant process, please email mollie@oda.org to speak with ODA Foundation Manager Mollie Greenlee.

Proposal Components

Once the ODA Foundation Manager has received the applicant's LOI and provided feedback, the applicant is invited to submit a proposal. Proposals must be submitted through the ODA Foundation's online proposal submission system. The online submission will ask for some general information about the organization, but the majority of the proposal must be prepared in advance and saved as PDFs to submit, as outlined below.

Transmittal Letter

Include the Letter of Inquiry previously sent to the ODA Foundation, updated with any changes to the project, cost or amount requested from ODA Foundation. Transmittal letter must be signed by the executive director or board president and saved as a PDF.

Grant Narrative

Please follow the outline below when writing the proposal with each heading and sub-heading clearly noted in the narrative. Narrative should not exceed five pages (Arial 10pt Font single-spaced) and saved as a PDF.

1. Statement of purpose

- a. Project or issue to be addressed and its relevance to the dental profession
- b. Community need for the project (NOTE: Include indicators of poverty and Dental Health Professional Shortage Area (HPSA) status if applicable)
- c. Geographic service area and demographics of population served
- d. Project's relation to ODA Foundation mission

2. Project description and plans

- a. Description of the project (NOTE: Methodology through which care will be provided and how the project capacity will increase with grant funding)
- b. Project goals (NOTE: Goals are the purpose of the project. EXAMPLE GOAL: Provide more pediatric dental services to low-income families.)
- c. Number of Ohioans served by project (NOTE: Provide a specific number)
- d. Project objectives (NOTE: Objectives are specific, measurable, realistic end results. EXAMPLE OBJECTIVE: Increase preventive dental services by 10% over previous year.)
- e. Dental services (NOTE: list what dental services will be provided through the project)
- f. Comprehensive timeline for the proposed project for the grant period
- g. Budget justification (NOTE: List supplies, equipment and other expenses that requested ODAF funds would support)
- h. Project continuation following grant period (NOTE: Explain in what capacity the program will continue)
- i. Project continuation if not funded or partially funded by the ODA Foundation (NOTE: Explain in what capacity the program would continue in both of these instances)

3. Key Personnel (NOTE: List up to five key personnel, including dental professionals, who will be involved in the development and implementation of the project, and summarize their experience with similar projects)

Budget

Complete the form labeled Project Budget on page 3. Budget should account for all expenses related to the project for which funding is requested, not just the requested grant amount. (NOTE: If requesting funds for supplies or equipment for general dental clinic use, provided budget should reflect entire clinic budget. In this case, you may substitute a full clinic budget instead of using the ODAF grant budget form on Page 3.) Save the completed budget form or your clinic's budget in PDF format.

Supporting documents

All supporting documents must be in PDF format.

- Quote for equipment costs (if funding is being requested to purchase equipment)
- IRS documentation of 501(c)(3) or 509(a)(3) status
- Most recently available 990 or audited annual financial statement
- Two letters of support, one of which must be from an ODA member dentist involved with the project or local Ohio component dental society and details their relationship or involvement with the organization. The other may be from a partnering agency or other organization/agency involved program or serving the same population (other than applicant organization)
- Relevant brochures or other information (recommended but not required)

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Budget should account for all expenses related to the project for which funding is requested, not just the requested grant amount. (NOTE: If requesting funds for supplies or equipment for general dental clinic use, provided budget should reflect entire clinic budget. In this case, you may substitute a full clinic budget instead of using the ODAF grant budget form)

PROJECT EXPENSES			
Project Expenses	ODAF Requested Funds	Non-ODAF Funds	Total
Personnel specific to project			
Title: _____	\$ _____	\$ _____	\$ _____
Title: _____	\$ _____	\$ _____	\$ _____
Title: _____	\$ _____	\$ _____	\$ _____
Dental Equipment	\$ _____	\$ _____	\$ _____
Dental Supplies	\$ _____	\$ _____	\$ _____
Printing	\$ _____	\$ _____	\$ _____
Postage	\$ _____	\$ _____	\$ _____
Telephone/computer support	\$ _____	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____	\$ _____
Total Direct Expenses	\$ _____	\$ _____	\$ _____
Overhead/Indirect Expenses (_____ %)	\$ -----	\$ _____	\$ _____
Total Expenses (Direct + Overhead)	\$ _____	\$ _____	\$ _____

PROJECT INCOME		
Income Source	Amount	Committed or Pending Decision
ODA Foundation	\$ _____	Pending Decision
Applicant's Organization	\$ _____	
Source: _____	\$ _____	
Source: _____	\$ _____	
Source: _____	\$ _____	
Source: _____	\$ _____	
Source: _____	\$ _____	
Source: _____	\$ _____	
Total Income	\$ _____	