



Community Organizing Grant Application Instructions

Application Deadline: Friday, September 19, 2025

Before You Start

1. Download a free PDF Editor: Use software that lets you edit and save PDFs (e.g., [Adobe Acrobat Reader](#)).

Know the Requirements:

2. This application must be completed and signed by three parties:
 - A Local CTA Chapter
 - A Community Organization Partner
 - A CTA Staff Person (your Primary Contact Staff)

How you save your application file is important!

To help us efficiently track applications, you must name your file using this format:

ChapterName_PartnerName_IFTCOGrant2025.pdf

- ***Example:***

AmazingTeachersAssociation_YouthVoicesCoalition_IFTCOGrant2025.pdf

STEP-BY-STEP INSTRUCTIONS

Step 1: Local CTA Chapter

- Complete your sections of the application.
- Have the Chapter President sign the signature page.
- Let your CTA Primary Contact Staff know you're applying and will request their signature soon.

Step 2: Community Organization Partner

- Complete your sections of the application.
- Have the Executive Director (or equivalent) sign the signature page.
- Save and return the file to the Local CTA Chapter (keeping the same filename).

Step 3: CTA Primary Contact Staff

- Once both the Local Chapter and Community Partner have signed:
 - Send the file to your CTA Primary Contact Staff for their final signature.

Final Submission

Step 4: Submit the Fully Signed Application

- Once all three parties have signed:
 - Email the final application PDF to IFT@cta.org
 - Deadline: Friday, September 19, 2025

Email any of your questions to IFT@cta.org.



COMMUNITY ORGANIZING GRANT APPLICATION

LOCAL CTA CHAPTER INFORMATION

Chapter Name:

Chapter President
Name:

Chapter Address:

Phone:

Email:

CTA Primary
Contact Staff Name:

Current number
of members:

Membership
Percentage:

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COMMUNITY ORGANIZING GRANT APPLICATION

COMMUNITY PARTNER INFORMATION

**Partnering
Community
Organization:**

**(If applicable)
State or National
Affiliations of
Organization:**

**(If applicable)
Fiscal Agent:**

**Executive Director
(or Equivalent):**

Address:

Phone:

Email:

**(If applicable)
Staff Assigned
to Partnership
Work:**

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COMMUNITY ORGANIZING GRANT APPLICATION

DESCRIPTION OF PARTNERSHIP

1. Describe your organizations' current relationship and list any joint campaigns, mobilization efforts, or activities you have done together in the past one to two years including your goals for those activities, number of participants, and the final outcome(s).

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COMMUNITY ORGANIZING GRANT APPLICATION

DESCRIPTION OF PARTNERSHIP

2. Provide a statement from each organization's leadership (local chapter leadership and partnering community organization) outlining your individual plans to build authentic relationships with each other. Statements should be two to three paragraphs. Statements should include organizational resources that will be dedicated to developing a strong partnership, the time and ways leaders will work to build relationships with their partnering organization, and opportunities leaders will create to ensure relationships are built on multiple levels (leadership, staff, members) across the two organizations.

STATEMENT FROM LOCAL CTA CHAPTER LEADERSHIP

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COMMUNITY ORGANIZING GRANT APPLICATION

DESCRIPTION OF PARTNERSHIP

2. (continued) Provide a statement from each organization's leadership
(local chapter leadership and partnering community organization)

STATEMENT FROM COMMUNITY PARTNER ORGANIZATION

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COMMUNITY ORGANIZING GRANT APPLICATION

FOR LOCAL CTA CHAPTER

3. For your Local CTA Chapter: Please share an outline of your internal structures and the number of members involved in the different structures within your union.

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COMMUNITY ORGANIZING GRANT APPLICATION

FOR COMMUNITY PARTNER

4. For Community Partner: Please share a statement about your organizational practices for continued base building and commitment to organizing.

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5. Provide a basic outline of plans for strategic campaign work that focuses on issues your organizations have a common interest in organizing to change.

Include the following:

- a. One to three campaign goals
- b. One to three common interest issues the campaign will focus on
- c. A paragraph summarizing your shared strategy for your campaign (How will you achieve your goals?) and your theory of change (Why and how those actions will lead to the change you are seeking.)
- d. Targets for your campaign (i.e., local school administration, school board, etc.)
- e. Possible tactics you will use as part of an escalating campaign
- f. Campaign timeframe

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COMMUNITY ORGANIZING GRANT APPLICATION

6. Share what areas of your partnership and campaign work you would like the most assistance with as part of this grant process (For example: navigating how to work together most effectively, planning strategic campaign, developing political education for our base.)

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COMMUNITY ORGANIZING GRANT APPLICATION

FOR COMMUNITY PARTNER

7. For the Community Partner: Please provide a description about how the grant funds will be used to increase your organizing capacity.

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COMMUNITY ORGANIZING GRANT APPLICATION

SIGNATURE PAGE

By signing off on this application, you indicate support for the organizing plan proposed in this grant application.

**Local CTA
Chapter President:**

Date:

**Community Partner
Executive Director
(or equivalent):**

Date:

**CTA Primary
Contact Staff:**

Date:

*Qualifying applicants will be required to attend office hours prior to the final application review process.
Office hours will be on Thursday, September 25, 2025 and Thursday, October 2, 2025.
IFT staff will contact you to schedule your time.*

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