

Federal Impact Reporting Form for Vermont Organizations

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Funding Impacts

In this section, we ask about your federal funding. Please complete the following questions for each of your federal funding streams, one at a time. You will have the option to add additional funding streams at the end of this section. If you do not have federal funding but are reporting other impacts from federal actions, select "no" for the last question in this section to advance.

Federal Granting Agency

Your answer

Grant Program

Your answer

Grant Amount

Your answer



If these funds are passed through the State or another entity, please identify the entity:

Your answer _____

Are these funds for:

- ☐ Special Project (for example, one time funding, capital campaign, etc.)
- ☐ Core Services/Programs (for example, general operating funds or ongoing programming)
- ☐ Unsure
- ☐ Other: _____

What is the current status of this funding stream?

Check all that apply.

- ☐ Cancelled
- ☐ Paused/In Review
- ☐ Expended but not reimbursed
- ☐ Not impacted
- ☐ Unsure
- ☐ Other: _____

How much funding has been cut off?

Your answer _____



How much funding has already been expended but not yet reimbursed?

Your answer

Additional information:

Your answer

Do you have additional federal funding streams to report on? *



Yes



No

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Impacts

Have executive orders or federal actions impacted your organization beyond funding cuts (ex: planning, staffing, programming)? Please describe below:

Your answer

Have executive orders or federal actions had secondary impacts and/or impacted the communities you serve? Please describe below:

Your answer

What strategies or actions has your organization taken to address funding and other impacts?

Your answer



How have federal actions or funding cuts impacted your workforce?

☐ Layoffs

☐ Expected layoffs

☐ Hiring freeze

☐ No impact

☐ Other: _____

If you've had layoffs, how many FTEs and which positions?

Your answer _____

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How can we use this information?

Data collected through this survey will be held by Common Good Vermont and partnering hub organizations. Please let us know how we have permission to use this information.

Do we have permission to share your stories with our Congressional Delegation, state leaders, and other partners? *

- ☐ Yes, and you may include my organization's name.
- ☐ Yes, anonymously.
- ☐ No, please do not share.

Do we have permission to share your story publicly? *

- ☐ Yes, and you may include my organization's name.
- ☐ Yes, anonymously.
- ☐ No, please do not share.



May we contact you for follow-up questions or media opportunities? *

☐ Yes

☐ No

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