

ASPCA 2025 National Shelter Grants Initiative:

Access to Veterinary Care

Access to Veterinary Care Application Questions

All eligible, interested organizations are invited to [submit a funding application](#) for consideration with the following information:

- Funding category you are applying for:
(limited to one application and to one category per organization)
 - Animal Outcomes
 - Access to Veterinary Care
 - Animal Psychological Health

Eligible funding options include, but are not limited to:

Community animals: low or no-cost safety net fund, provision of spay/neuter surgery, provision of basic care (e.g., vaccine clinics.), provision of urgent care (e.g., humane euthanasia)

Shelter animals: provision of spay/neuter surgery, veterinary care, facility improvements for medical care, equipment

- Basic Organization Details:
 - Federal Tax ID/Employer Identification Number (EIN)
 - Organization primary contact name, title and email address
 - Organization signatory name, title and email address
(person authorized to sign a grant agreement)
 - Current fiscal year budget revenue amount
 - Current fiscal year budget expense amount
 - Is your organization a physical facility that houses animals available for adoption?
 - Organization Type:
 - Nonprofit
 - Animal shelter with a government contract
(defined as a private/nonprofit agency with a physical facility and a contract for animal control and/or housing services)
 - Animal shelter without a government contract
(defined as a private/nonprofit agency with a physical facility)
 - Government animal services
(defined as an entity operated by a city or county providing animal control or housing services)
 - Other
 - If Other, what type of organization?

- For nonprofit organizations, you will be asked:
 - If your IRS exemption is current
 - If you're in good standing with the Secretary of State in the state where you are incorporated.
 - This means that you meet all state-imposed requirements, which may include: filing reports/forms, paying required fees, appointing a registered agent, etc.
 - If you aren't sure, go to your state's Secretary of State's website (or do an online search for: your State, "secretary of state," "business search") and look up your organization.
 - If your board includes at least 4 Board members
 - If the majority of your board is independent
 - This means that fewer than half of your Board members can be paid employees and/or family members or close relatives
 - If your Board Chair and Treasurer are not compensated for their services as an officer, employee, or independent contractor for the organization
 - If your charitable registration is current/active in the state of the Grantee's primary location (for grants >=\$25,000)
- Required documents:
 - For requests < \$25K:
 - for non-profits: current fiscal year budget, most current 990, current Board List
 - for government animal services: signed Form W9
 - For requests ≥\$25K:
 - For non-profits: current fiscal year budget, most current 990, current Board List, prior year balance sheet or financial statement, board chair bio, board treasurer bio, director bio
 - For government animal services: signed Form W9
- Animal Shelter Data:
 - If you report data to Shelter Animals Count
(*Shelters are strongly encouraged to consider reporting if they are not already. Find out more here: [Shelter Animals Count](#)*)
 - 2024 intake and adoption totals by Species
 - 2025 Jan-July intake and adoptions by Species
 - Approximate current length of stay (LOS) by species and how that is calculated
- Amount of grant funding requested
- [Budget for how the grant funding will be spent](#)
- Proposal Title

- Description of how the grant funding would address the needs/challenges of your organization and/or community, including the specific activities to be implemented to address those challenges/needs
 - If proposal includes a permanent staff position, how you will sustain it beyond the grant term
- The information and/or measures you will use to know if the activities outlined in your proposal achieve the results you expect
- Anything else you'd like to share

Access to Veterinary Care Specific Questions

- Proportion of your animal population humanely euthanized due to medical issues (best estimate)
 - 0%
 - 1-25%
 - 26-50%
 - 51-75%
 - 76-100%
 - NA
- Portion of owner relinquishments due to the owner's inability to access veterinary care (best estimate)
 - 0%
 - 1-25%
 - 26-50%
 - 51-75%
 - 76-100%
 - NA
- Description of kinds of veterinary care owners were unable to access (Details about specific animals are welcome)
- Portion of owner-requested euthanasia due to the owner's inability to access veterinary care (best estimate)
 - 0%
 - 1-25%
 - 26-50%
 - 51-75%
 - 76-100%
 - NA
- Description of kinds of veterinary care owners were unable to access (Details about specific animals are welcome)
- If you are requesting funding to support shelter animals

- Assessment of your organization's current ability to effectively provide veterinary care for the animals in your care
 - not at all able
 - slightly able
 - somewhat able
 - very able
- The most significant challenges your organization faces to providing veterinary care for animals in your care (select all that apply):
 - Providing preventive care (e.g., tests, vaccines)
 - Providing basic sick care
 - Providing emergency care
 - Providing care for severe or chronic conditions
 - Providing spays and neuters
 - Experiencing increased disease outbreak
 - Experiencing increased Length of Stay (LOS)
 - Experiencing increased medical euthanasia of animals that would have been treatable if we had the resources
 - Limits to ability to intake animals
 - Finding / hiring veterinarians
 - Partnering with veterinarians to provide care
 - Finding space to perform veterinary care
 - Enough equipment to provide veterinary care
 - Enough supplies to provide veterinary care
 - Resources to collect and report data
 - Other (with description):
- Top 3 most important selections from above in order and why you selected the ones you did
- If you are requesting funding to support community animals
 - Assessment of your organization's current ability to effectively provide veterinary care for the animals in your community
 - not at all able
 - slightly able
 - somewhat able
 - very able
 - The most significant challenges your organization faces to providing veterinary care for animals in your community (select all that apply):
 - N/A: We do not provide medical care for animals in our surrounding community
 - Providing medical care for community cats but not owned animals
 - Providing preventive care (tests, vaccines, etc.)
 - Providing basic sick care

- Providing emergency care
 - Providing care for severe or chronic conditions
 - Providing spay and neuter
 - Experiencing increased disease outbreak
 - Experiencing increased LOS
 - Experiencing increased medical euthanasia of animals that would have been treatable if we had the resources
 - Limits to ability to intake animals
 - Finding / hiring veterinarians
 - Partnering with veterinarians to provide care
 - Finding space to perform veterinary care
 - Enough equipment to provide veterinary care
 - Enough supplies to provide veterinary care
 - Resources to collect and report data
 - Other (please describe):
- Top 3 most important selections from above in order and why you selected the ones you did
 - If you currently have a community vet care program - eligibility criteria, program advertising, average wait time for an appointment, and how often you must decline requests due to capacity limitations

By submitting an application for an ASPCA grant, you agree to allow the ASPCA to utilize the information submitted on such application in any way it deems appropriate to support its mission to prevent cruelty to animals, including fundraising. Such uses may include, but are not limited to, reproducing such information in print or on the ASPCA website and/ or allowing third parties to access such information. In addition, by submitting this application, you hereby certify that the requesting organization is aware of and endorses this request and the information herein and you are authorized to submit this application on behalf of the requesting organization.

Acknowledgment of Submission of Application to ASPCA: ☐