

## YOUTH FOUNDATION FUND

A Component of the Community Foundation of the Eastern Shore, Inc.  
1324 Belmont Ave. Suite 401  
Salisbury, Maryland 21804

### Grant Guidelines, Instructions and Application Form

The mission of the Youth Foundation Fund is to help children in the Maryland counties of Somerset, Wicomico, and Worcester by creating awareness of giving and by establishing and supporting programs that promote youth betterment. In order to carry out the mission of the Fund, students from high schools in the tri-county area have been selected to serve on the Youth Foundation Fund Advisory Committee. The Advisory Committee is responsible for overseeing fundraising and grant making activities for the Youth Foundation Fund. The Fund will be used to address the following goals:

- To help improve the mental and physical health of area youth
- To encourage and reward academic excellence by youth
- To provide additional educational opportunities for youth
- To build strong citizenship in youth
- To foster good character in youth

This year the Youth Foundation Fund will award one or more grants totaling up to \$4000.00. The grant(s) will be awarded to eligible organizations that exemplify one or more of the goals set forth by the Fund. It can be used towards a program previously established by an organization or serve to establish a new program. Grant applicants must be within the following guidelines:

- The organization must be nonprofit (a school, other governmental entity, a religious organization with a nonsectarian program, or a 501(c)3 charitable organization);
- The organization must be within the tri-county area. The program doesn't necessarily have to serve all three counties but those that do will be looked upon more favorably;
- The program must be aimed at, and benefit, youth;
- The organization must provide a budget that gives a breakdown of how funds received through the grant will be used. Additionally, the organization must agree to report on the use of said funds within a designated time period.
- The organization must be willing to undergo both a site visit and interview with one or more Youth Foundation Fund grant committee members.

An application form is attached. It must be filled out entirely to be valid. All grant applications must be received at the Community Foundation by **March 4, 2011**. Please send the completed application to The Community Foundation of the Eastern Shore, Inc., at the above address. Grant applicant (s) will be notified in May of the Committee's award decisions.

**YOUTH FOUNDATION FUND  
COMMUNITY FOUNDATION OF THE EASTERN SHORE, INC.**

**Grant Application**

Please complete the application in the format outlined below. Please provide a cover letter on letterhead, signed by the chairperson of the governing body of the organization applying for the grant. The cover letter should state the mission of the organization, a brief summary of the proposal and the amount requested.

**I. Agency/School Information**

Agency/School Name \_\_\_\_\_

Year Agency/School Established \_\_\_\_\_

School Principal or Agency Executive \_\_\_\_\_

Project Contact Person \_\_\_\_\_

Phone Number (\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Amount Requested \_\_\_\_\_

Has your organization applied for any additional grants? If so, please specify.

\_\_\_\_\_

\_\_\_\_\_

Would your organization be willing to undergo both a site visit and interview?

Yes

No. Please explain \_\_\_\_\_

To your knowledge, has your organization received a grant in the past from the Community Foundation?

Yes Date(s) \_\_\_\_\_

No

To your knowledge, has your organization been denied a grant in the past by the Community Foundation?

Yes Date(s) \_\_\_\_\_

No

## II. Demographic Information

Please complete the following by selecting ONE response from each column. If “other” is selected please specify the information.

Geographic area served:	Number of Persons to be served by this grant:
<input type="checkbox"/> Somerset	<input type="checkbox"/> less than 10
<input type="checkbox"/> Wicomico	<input type="checkbox"/> 11-25
<input type="checkbox"/> Worcester	<input type="checkbox"/> 26-50
<input type="checkbox"/> Lower Eastern Shore	<input type="checkbox"/> 51-100
	<input type="checkbox"/> 101+
Time Frame:	Age/Grade of Persons who will benefit from this grant: _____
<input type="checkbox"/> One time event	
<input type="checkbox"/> Seed Money	
<input type="checkbox"/> Ongoing Project	
<input type="checkbox"/> Other	

## III. Grant Proposal

Please complete on a separate sheet of paper and attach to the application.

1. Briefly describe the specific purpose for which this grant is requested.
2. Is this grant request part of a larger project? If yes, briefly describe the larger project.
3. Briefly state the evidence of need for this project.
4. Is there any other organization/agency in the area doing this or similar work? If so, please specify.
5. Does this project involve co-operation or coordination with other organizations? If so, please describe.
6. To what extent are volunteers included in this project?
7. Who will be responsible for carrying out and supervising this project?

## IV. Attachments

Please check attachments included in the packet and give a short explanation of any that are not attached.

1.  A detailed budget that provides a breakdown on how the requested funds will be spent. (*Purchases made prior to the grant application date are not eligible for funding.*)
2.  An explanation of how partial funding would be spent and how the remainder would be obtained if the Youth Foundation Fund could grant only part of the requested amount.
3.  Evidence that the organization is a 501c(3) as defined in the Internal Revenue code (if appropriate).
4.  Name, title, and phone number of three professionals who are familiar with the work of the applicant agency.