



2021 YOUTH GRANT APPLICATION

SAMPLE

Youth Grants are up to \$5,000 and must serve youth age 12-18 in Clinton, Eaton or Ingham counties.

Applications are due by 5:00 p.m. on Monday, February 1, 2021.

This is a sample application, please do not submit this form. Please use our online application, which can be found at: <https://ourcommunity.org/nonprofit-support/youth-action-committee-yac/youth-grants-yac>

APPLICANT INFORMATION

Organization Name: _____

Mailing Address: _____

Type of Organization: (please select one)

- Non-Profit Organization
- School or Governmental Unit
- Faith-Based Organization (*faith based grants must serve the general community*)

Do you have IRS status of 501(c)3? ___YES ___NO *If no, list other IRS status* _____

Please provide your Federal Tax ID or Employer ID: _____

Please provide your License to Solicit # if applicable: _____

What is your organization's annual operating budget? _____

What percent of your organization's annual expenses is allocated to each of the following, as reported in your most recent audit: (*must equal 100%*) Administration: ___% Fundraising: ___% Program: ___%

Director of the Organization

Name: _____ Title: _____

Contact Person for this grant

Name: _____ Title: _____

Phone: _____ Email: _____

Organization's Mission Statement:

HELPFUL DEMOGRAPHIC INFORMATION As the Community Foundation works to better understand the diversity of its grantmaking activity, we ask that you answer the following questions about your organization.

What percentage of your staff are people of color? _____% Your board? _____%

What percentage of your clients are people of color? Please only include those who directly benefit from your programs and services. _____%

Tell us how your organization is addressing issues of **Diversity, Equity and Inclusion** (as your organization defines it). _____

Would your organization be interested in diversity, equity and inclusion training or webinars?

Yes___ No___ We have already engaged in this area ___

PROJECT INFORMATION – Youth Grant

Project/Program Title: _____

Funding Amount Requested: _____ **Total Project Cost:** _____

Briefly explain the need you are trying to address? (800 character max)

Briefly explain how your project or program will meet this need? (800 character max)

What is your timetable for this project or program? (400 character)

How much of the total project cost will be funded by this grant, if awarded?

100% ___ 75-100% ___ 50-75% ___ 25-50% ___ Less than 25% _____

Approximately how many youth (age 12-18) in each area will be served by this grant?

___ Lansing ___ St. Johns ___ Charlotte ___ Other communities in tri-county area (please list here with numbers served for each) _____

Project Budget:

Dollar Amount

Description and quantity of item

Dollar Amount	Description and quantity of item
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

What Happens Next? In April 2021, all Youth Grant applications will be reviewed by the Youth Action Committee, a group of high school age students from the tri-counties. Applicants will be notified in early May.

If you would like to discuss a grant idea, or if you have any questions, please contact us.

Tracy Russman, Community Investment Associate (517) 927-7729 or trussman@ourcommunity.org