

Youth As Resources

A Program of the Rochester-Monroe County Youth Bureau

2011 Summer Grant Cycle Application



The Youth As Resources Grant Projects are funded through a grant from



with continuing financial support from



Maggie Brooks
County Executive



HEART
Coalition for a Drug Free Rochester

in partnership with:



APPLICATION DEADLINE: 5:00 PM - Friday, April 29th, 2011

Please drop off or mail to:

Youth As Resources / Rochester Monroe County Youth Bureau
435 E. Henrietta Rd., FA - 3 WEST
Rochester, NY 14620
or fax to:
585-753-6465

YOUTH AS RESOURCES



Youth As Resources, a program of the Rochester-Monroe County Youth Bureau, seeks to empower and engage youth as partners with adults in creating positive community change and development. Youth and adult members govern the YAR board and provide grants of up to \$1000 to local youth in order to develop and carry out community service and service learning projects that clearly address a community issue, concern, or topic. The funds for YAR grants are made available through a grant from the Rochester Area Community Foundation.

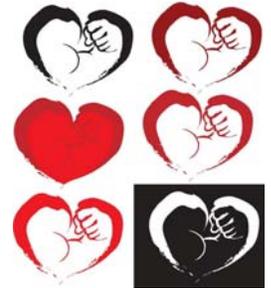
THE DETAILS:

- **YAR will grant up to \$1000.00 for a community service or service learning project that is youth planned, led, and implemented**

H.E.A.R.T. COALITION PARTNERSHIP

The 2010-2011 School Year Grant Cycle marks the 4th year we are partnering with Rochester's H.E.A.R.T. Coalition for a Drug Free Rochester. The H.E.A.R.T. Coalition is funded by SAMHSA (Substance Abuse & Mental Health Services Administration) and is made up of local organizations that support and promote five core principles:

HEALTH • EXCELLENCE • ACHIEVEMENT • RESPONSIBILITY • TRUST



THE DETAILS:

- **YAR / HEART grants are a 50% - 50% matching grant program – half of the funds granted come from YAR, half come from HEART**
- **Your project must address Drug Prevention / Awareness or have an Anti-Drug message or purpose**

SERVICE LEARNING

“Service-learning is a teaching and learning strategy that integrates meaningful community service with instruction and reflection to enrich the learning experience, teach civic responsibility, and strengthen communities.”
(from - Learn and Serve America)

YAR, Youth Voice One Vision and Nazareth College Center for Service Learning are continuing their partnership to establish a new component of our program called Youth Engaged with Service (Y.E.S). Y.E.S. introduces, teaches and promotes the concepts of *service learning*. We are beginning to make *service learning* an integrated part of what we do, and what you do with your YAR projects.

THE DETAILS:

- **YAR is asking applicants to consider incorporating the approaches and goals of *service learning* into your proposed projects**
- **When reviewing applications, the YAR board will be looking at and evaluating proposals based upon the utilization and implementation of concepts of *service learning***
- **Extra points will be awarded to your application if your project utilizes the principles and meets the objectives of *service learning***
- **We will address the approaches of *service learning* at the Grant Writing workshop on **Saturday, April 2, 2011** at Monroe Community Hospital: 7th floor Conference Room, 435 East Henrietta Rd., Rochester., NY 14620. The workshop will take place from 11:00am-1:00pm**

GRANT REQUIREMENTS / GUIDELINES

APPLICATIONS MUST:

- Be written by a **minimum of 4 youth** between the ages of 10-21.
- **Have two youth listed as contacts** that will share responsibility for the application and implementation of the project
- **Have an adult contact** listed that will support the youth throughout the project
- **Have a Sponsoring Organization contact** listed that will accept responsibility for the grant contract

APPLICANTS MUST:

- Be a 501 (c) (3) / Non-Profit Organization **OR** must identify a 501 (c) (3) that will act as your **sponsoring organization** (If a group is unable to find a sponsoring organization, we will assist you in finding an organization that meets your needs - please call if you have questions about this requirement)
- Clearly fulfill our goal of supporting **Youth / Adult Partnerships**
- **Track all hours** put into all aspects of the project, from each participant and or volunteer, youth and/ or volunteer, youth and adults

PROJECTS MUST:

- Include **neighborhood, or in kind support**, which might include donations, contributed services, volunteer assistance, loaned equipment / space, etc
- Address an **identified community issue, concern or topic**
- **Enhance awareness and understanding** of those issues in the community
- **Strengthen community connections and involvement**
- Be **cost effective** ---application budgets will be carefully reviewed for money you have requested

WHAT TYPES OF PROJECTS WILL YAR FUND?

YAR Grants <u>MAY</u> be used to fund the following	YAR Grants <u>MAY NOT</u> be used to fund the following
<p>✓ Direct operation of the community service / service learning project (essential items, supplies, materials, food for meetings)</p>	<p>⊘ Overhead Costs and Purchase of Capital Items (items that would be utilized over a long period of time i.e. furniture, buildings, computers, etc...)</p>
<p>✓ Transportation (bus tokens, mileage) etc.</p>	<p>⊘ Existing projects / activities already being offered</p>
<p>✓ Training programs for youth (must be completely defined)</p>	<p>⊘ Salaries and/or wages of participants</p>
<p>✓ Recognition of the project participants. Costs <u>cannot</u> exceed 15% of the grant award.</p>	<p>⊘ Direct donations to other organizations</p>
<p>✓ You may use YAR funds for fundraising for a charity or cause, but only 30% of the total grant can go directly to that purpose</p>	<p>⊘ If your application is through a faith based organization, project funding cannot go towards recruiting new church members or proselytizing in any way</p>

IMPORTANT DATES TO REMEMBER - Please Mark Your Calendars!!

All Funded Projects must take place between: **Sat., June 4, 2011 and Mon., Sept. 5, 2011**
(projects can begin before the Kick-Off)

Youth As Resources Grant Writing Workshop (recommended – extra points awarded)

Saturday, April 2, 2011 @ – Monroe Community Hospital: 7th floor Conference Room, 435 East Henrietta Rd., Rochester., NY 14620. The workshop will take place from 11:00am-1:00pm. Call or e-mail to register.

Application Deadline: 5:00 PM - Friday, April 29, 2011 NO LATE APPLICATIONS WILL BE ACCEPTED!

All applications are to be received in the YAR office- 435 E. Henrietta Rd., 14620 by 5 pm **NO EXCEPTIONS**

Applicant Interviews :If your application passes our initial screening process your group will be invited to interview - Interview time slots of ½ hour will be scheduled by phone the week of May 9th

Sat., May 21, 2011@ Monroe Community Hospital , 435 East Henrietta Rd., Rochester., NY 14620
Office of the Rochester-Monroe County Youth Bureau – 3rd Floor, Faith Building, West Wing

YAR Kickoff Celebration (required) : Sat., June 11, 2011 time and location TBD


Youth As Resources Grant Application


Submission Deadline: 5:00 PM - Friday, April 29, 2011

No incomplete, late, or incorrectly filled out applications will be accepted
Please print clearly

Name of Group: _____

Title of Project: _____

Number of youth that will participate in the planning: _____ Age range of youth: _____

1st Youth Contact: _____ Title: _____

Address: _____ Zip: _____

Phone: _____ Age: _____

Email: _____

2nd Youth Contact: _____ Title: _____

Address: _____ Zip: _____

Phone: _____ Age: _____

Email: _____

Please indicate which address you would like materials sent to regarding the grant and who the materials should be addressed to by checking the box next to the contact info below.

Adult Contact: _____ Title: _____

Address: _____ Zip: _____

Work phone: _____ Home phone: _____

Email: _____

Sponsoring Organization: _____

Sponsoring Organization Representative: _____

Address: _____ Zip: _____

Work phone: _____

Email: _____

The undersigned youth, adult contact person, and representative of the sponsoring organization hereby attest to the fact that this project proposal was initiated and prepared by youth and that this project will be planned and carried out by youth in partnership with adults.

Youth Project Leader Signature: _____ Date: _____

Adult Project Leader Signature: _____ Date: _____

Sponsoring Org. Rep. Signature: _____ Date: _____

Please indicate below:

- 1) Which grant you are applying for AND
- 2) The amount of funds you are requesting

Traditional YAR Grant (up to \$1000) For a youth led community service project / service learning project addressing an identified community need		YAR / H.E.A.R.T. Coalition Grant (Up to \$1000 - 50%-50% YAR/HEART) Must address Drug Prevention or Drug and Alcohol Awareness	
Check Here → <input type="checkbox"/> For YAR Grant	Enter amount requested here →	\$ <input style="width: 50px;" type="text"/>	→
Check Here → <input type="checkbox"/> For YAR / HEART	Enter amount requested here →	\$ <input style="width: 50px;" type="text"/>	→

Please follow the outline below exactly to answer the application questions on a separate piece of paper, typed or clearly written.

I. Your Project Idea

- 1) What is the title of your project? How did you decide upon this title?
- 2) Give a summary of your project.
- 3) What are the goals and outcomes you hope to achieve with this project?
- 4) Where will your project take place? When will your project begin and end?
- 5) What type of community support will you get for this project? Some examples are: use of space or a facility, community contributions, volunteers, etc. How will you get this support?
- 6) What is the estimated number of people that will be engaged or will benefit from this project?
- 7) Will you need assistance or special permission to help complete this project? If so, what kind?

II. Youth Leadership

- 1) Why is youth leadership important for this project?
- 2) How will you ensure that youth stay involved and truly lead this project in partnership with adults?

III. Service Learning (NOTE: even if your group is not interested in creating a full-fledged *service learning* project the questions below will help you develop a meaningful project that will effectively serve the community)

The following categories are "*The Five R's of Service Learning*"*

A. Rigorous active learning:

- 1) What do you hope to learn through planning and carrying out the project?
- 2) What do you hope the community members or participants will learn?

B. Responsible and relevant service:

- 1) What types of service will you be engaged with? (i.e. facilitating workshops, collecting donations, running a food pantry, cleaning up a neighborhood, etc)
- 2) Will the community groups you are working be engaged with any type of service? If so what will they be doing?

C. Reciprocity and relationships:

- 1) What is the community issue, topic or concern your project will address and how did your group determine that this topic is important and needs attention in our community?
- 2) Which specific community, neighborhood, or group(s) will your project will be engaging?
- 3) How will your group connect with the identified group above to share information and resources throughout your project?
- 4) How have you / how will you connect and interact with the larger community beyond the one identified above? For example, will you invite other community leaders? Will you have a presentation after your project is completed to share the information you learned? Etc.

D. Reflection, ongoing:

- 3) What types of reflection activities will you include in your project plan to ensure you are on track in reaching your goal(s)?
- 4) What type of reflection activities (if any) will you work into your actual event / project to help the participants think about the meaning of the project?

E. Recognition and celebration:

- 1) How will you recognize and celebrate the hard work and effort that your group puts into the project? (e.g. pizza party, certificates or awards, fun day, etc.)
- 2) How will you acknowledge and recognize community participation and contributions to your project?

IV. Project Budget

- A. How much will your entire project cost? (not just the amount you are asking from YAR)
- B. Will there be any in-kind donations.
- C. Who will oversee the use of these funds?

V. YAR / H.E.A.R.T. Coalition Grants

If your group is applying for a YAR / HEART Coalition grant please be sure to address in all applicable questions above the ways that your project will specifically address **drug and alcohol prevention or awareness**.

Budget:

Budget Form B: Draft Action Plan- Balancing Revenues and Expenses

Directions - Budget Form:

- In column 1: Write down the items / services that you will be purchasing
- In column 2: Write down how much the item is going to cost - be as specific as possible
- **In column 3:** Write down the amount for each item that will be paid out of YAR Grant Funds in this column
- In column 4: Write down the supplier / provider **and** the value of any in-kind donations, which are any means of support other than money, usually goods or services provided to the group
- In **TOTALS** Row: Column 2= total of all expenses, **Column 3 = total of all YAR Contributions**, Column 4 = total of all In-Kind Contributions
- If you are applying for a **YAR / HEART Coalition Grant** we will split your requested funds 50% - 50%, Use column 3 for **all** funds requested from YAR.
- Row one and two are examples of how to complete the budget form
- Please make more copies of the budget form if needed

THIS BUDGET FORM MUST BE COMPLETED AS ACCURATELY AS POSSIBLE

1	2	3	4
Item / Service Description	Cost of Item or Service	YAR FUNDS	In-Kind Donations (list supplier and amount)
<i>Example:</i> Food for 5 planning meetings	\$25.00 x 5 = \$125.00	\$125	\$0
<i>Example:</i> Printing flyers to advertise the event	\$100.00	\$50.00	Rochester-Monroe County Youth Bureau \$50.00
TOTALS:	total cost of all items:	total YAR contribution:	total in-kind contributions:

Applications are due: **BY 5:00 PM - FRIDAY, April 29th 2011**

**NO LATE OR INCOMPLETE APPLICATIONS
WILL BE ACCEPTED!**

Please mail or drop off your completed application to:

**Youth As Resources / Rochester - Monroe County Youth Bureau
at the**

**Monroe Community Hospital
435 East Henrietta Rd.
3rd Floor – Faith Wing
Rochester, NY 14620**

OR

***Fax to: 585-753-6465**

***You may fax your application, but please mail a hard copy with all original signatures to be kept on file by YAR**

**If you have any questions or concerns please contact the YAR Program Office at
585-753-6953**

or

gperez@monroecounty.gov

THANKS & GOOD LUCK!!



Youth As Resources

a program of the Rochester-Monroe County Youth Bureau



The Fine Print

All YAR grants, awards, and project participants must comply with all federal statutes relating to non-discrimination. This includes, but is not limited to prohibition of participants on the basis of age, race, sex, color, national origin, sexual orientation, or disability. Those signing the above documents certify that: All information contained is accurate, contains no misstatements or misrepresentations, and represents a reasonable estimate of future operation based on data available at the time of application. The sponsoring organization assumes responsibility for liability.