# Oregon 4-H Foundation

**Grant Application**



## Oregon 4-H Foundation

**4238 SW Research Way**

**Corvallis, OR 97333-1068**

**(541) 737-0847**

**Oregon 4-H Foundation Grants**

Each year, funds are available from the Oregon 4-H Foundation to help support the Oregon 4-H program.

# Grant Application Guidelines

Proposals **must** include all information listed below to be considered by the Oregon 4-H Foundation. **Incomplete applications will not be considered**. Proposals are due in the **Oregon 4-H Foundation office by 5:00 pm on December 15, April 15, and August 15. Complete application packets should be emailed to** **Tom.McLennan@osufoundation.org** **or** **Kacee.Navarro@osufoundation.org** **or mailed to:** Oregon 4-H Foundation, 4238 SW Research Way, Corvallis OR 97333-1068 | 541-737-0847

* A narrative describing the project for which funds are sought. Proposal should address the following items (please limit to 3 pages).
* How was the need for your project determined?
* What is the timeline for the project?
* How will you evaluate success of this project?
* If project is successful, how will it be funded in the future?

**Grant Application – Other Information**

* **Publicity**. If your proposal is funded and you wish to announce your grant award, the Oregon 4-H Foundation encourages you to do so. The Oregon 4-H Foundation appreciates receiving copies of any coverage this grant receives in newspapers, newsletters or other publications. This coverage should be submitted with your final report. Grant award announcements and printed material for your project should include the following statement:

This program is funded (partially funded) by gifts to the Oregon 4-H Foundation. For more information on the 4-H Foundation please call or write to Oregon 4-H Foundation, 4238 SW Research Way, Corvallis OR 97333-1068 | (541) 737-0847.

* **Awarding of Grants.** Decisions to fund grants will be made by the Oregon 4-H Foundation Board of Trustees at their February, May and September board meetings.
* **Reporting**. Upon the completion of the project, a report on the project should be sent to the Oregon 4-H Foundation. Reports should include a summary of the outcome of the project, and could include photos of the project or activity, any new articles or publicity the project received, etc.
* **Including 4-H Foundation Trustees in the Project**. If a Trustee of the Oregon 4-H Foundation lives in your county, they could be informed about the project and included in the project if possible. County extension agents are able to contact Trustee Members if you are unsure of ones in your area.

**Oregon 4-H Foundation**

# Grant Application Information

**APPLICATION MADE BY:**       **DATE:**

**(ORGANIZATION and COUNTY)**

**CONTACT NAME:**

**COUNTY EDUCATOR NAME (if different than contact): :**

**ADDRESS:** (included street address if different)

**EMAIL CONTACT:**

**TELEPHONE NUMBER:**

**HAS THIS SPECIFIC PROJECT BEEN FUNDED IN THE PAST?**

**PLEASE LIST ALL PREVIOUS AWARDED 4-H FOUNDATION GRANTS TO THIS ORGANIZATION / COUNTY OVER THE LAST 3 YEARS:**

|  |  |
| --- | --- |
| **Date of grant** | **Purpose of grant** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

**PROJECT / PROGRAM NAME:**

**TOTAL PROJECT COST: $**

**AMOUNT OF THIS REQUEST: $**       **% OF TOTAL PROJECT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE FUNDS NEEDED BY:**

**TIME FRAME IN WHICH FUNDS WILL BE USED: From**       **To**

**PROJECT DESCRIPTION**

1. **WHAT IS THE OBJECTIVE OF THE PROJECT -** Projected goals, anticipated impact

|  |
| --- |
|  |

1. **WHO AND NUMBER OF PERSONS (# of 4-H mbrs/community mbrs, etc) WILL THE PROJECT SERVE?**

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| --- |
|  |

1. **WHAT GEOGRAPHIC AREA WILL THE PROJECT SERVE?**

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| --- |
|  |

1. **HOW WILL THIS PROJECT CHANGE YOUR PROGRAM OR CREATE NEW OPPORTUNITIES FOR THE FUTURE?**

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|  |

1. **IS THERE ANYTHING ELSE YOU WOULD LIKE THE OREGON 4-H FOUNDATION TO KNOW ABOUT YOUR PROGRAM OR PROJECT?**

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**PROJECT FINANCIAL STATEMENT**

**TOTAL OPERATING EXPENSES FOR THE PROJECT: $\_\_\_\_\_\_\_\_\_\_\_**

**(please breakdown project expenses below; for example – staffing, consumables, T-shirts, passes, transportation, etc)**

|  |  |
| --- | --- |
| **Expense description** | **$ amount** |
|  | **$** |
|  | **$** |
|  | **$** |
|  | **$** |
|  | **$** |
|  | **$** |
|  | **$** |
| **TOTAL (amount should be the same as Total Project Cost, above)** | **$** |

**PROJECT INCOME STATEMENT**

**(sources of income other than the requested grant funds)**

**OSU EXTENSION BUDGET $\_\_\_\_\_\_\_\_\_\_**

**FEE TO ATTENDEE (if applicable) $\_\_\_\_\_\_\_\_\_\_ (per attendee $\_\_\_\_\_\_\_\_\_x estimated attendees\_\_\_\_\_\_)**

**IN-KIND $\_\_\_\_\_\_\_\_\_\_ (define – staff/volunteer hours, etc)**

**LOCAL FUND RAISING $\_\_\_\_\_\_\_\_\_\_**

**OTHER $\_\_\_\_\_\_\_\_\_\_**

**Please list any in kind or other below:**

|  |  |  |
| --- | --- | --- |
| **Source** | **Received or pending** | **Amount** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**TOTAL INCOME OTHER THAN GRANT REQUEST $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**REVIEWER FEEDBACK:**

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| --- |
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