

# YOUTH AS RESOURCES

## GRANT APPLICATION

Please fill out the electronic application. Utilizing the "TAB" button will help you easily maneuver between categories.

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### 1. General Information

Group Name:

Youth Names:

Address:            Zip:

Telephone:

Adult Advisor(s):

Address (if different than above):            Zip:

Telephone:

Brief history and description of group:

### 2. Project Information

What is the title of your project?

How many young people will carry out the project?

Age range of youth involved? (Select one)            to (select one)

How many adults will be involved?

Briefly describe your project, including time frame, location and other project details.

Does the project require permission slips, legal clearances, insurance, or additional forms to be completed?  YES  NO If YES, then please describe what must be completed.

How will your project benefit the Riley County community?

How did your group determine that this is an important community need?

Who/what is your project serving? *Please check all that apply*

- Young children
- People who are sick
- A neighborhood, school, or community organization
- People who are disabled
- Low-income families
- The environment
- School-aged children and youth
- Other (please specify)

How will your project specifically serve those individuals/organizations listed above?

Approximately how many people will benefit from this project?

What do you think you will learn about your community from this project?

What reflection activities will you use during your project to be aware of your progress?

How will you measure the success of your project when it is completed?

How have youth been involved in the planning and implementation of this project?

### **3. Spending**

What is the exact project cost?

Do you have other funding sources for this project?  YES  NO If so, please list how much and source of the funds.

How much money are you requesting from Youth As Resources?

# THE FINE PRINT

All grants, awards, and project participants from Youth As Resources will comply with all Federal Statutes relating to non-discrimination. This includes, but is not limited to, the prohibition of discrimination on the basis of age, race, sex, color, national origin, or disability.

## The undersigned certify that:

1. All information contained is accurate or represents a reasonable estimate of future operations based on data available at the time of the application;
2. There are no misstatements or misrepresentations in the information submitted here or as a supplement;
3. The sponsoring organization assumes responsibility for liability;
4. The organization will comply with the Civil Rights and handicapped Regulations summarized above and with other Youth As Resources guidelines.

## DIGITAL SIGNATURES

\_\_\_\_\_  
Project Leader (Adult)

\_\_\_\_\_  
Youth Leader(s)

\_\_\_\_\_  
Sponsoring Organization Representative

\_\_\_\_\_  
Date