



# HEIDI BADGETT FUND

## **PURPOSE**

To serve the health and educational needs of children and their families in Hopkins, Muhlenberg, and Webster Counties; and to encourage and foster collaboration between non-profit agencies to better meet the stated need.

**GRANT AWARD DATE:** August 1, 2008 – August 1, 2009

**GEOGRAPHIC AREA TO BE SERVED:** Hopkins, Muhlenberg, and/or Webster Counties  
in Kentucky

**TOTAL FUNDS AVAILABLE FOR CURRENT YEAR:** \$25,000.00

**FUND ADMINISTRATOR:** United Way of the Coalfield, Inc.

## **FUND PRIORITIES:**

1. Grants that support projects where several agencies collaborate to address the stated need;
2. Seed money for innovative projects with matching funds;
3. Funding for ongoing programs that have matching funds; and/or
4. Capital campaigns with matching funds, if a maintenance plan for capital project is shown.

## **SELECTION PROCESS:**

Grants will be awarded based on the recommendations of a volunteer committee consisting of from ten to twelve members representing the three counties to be served. Committee members will use a point scoring system following the outline that follows. After initial review of the applicants, committee may request additional information. The grant will be awarded in full at the beginning of the grant period. A semi-annual report of grant progress and results is required.

## **GUIDELINES:**

1. **Agency Partnerships and Collaboration** Grants will be awarded only to partnerships involving two or more agencies (organizations). Each partner must play a vital role in the single program for which the grant is being requested and each partners' role must be clearly defined in the application. Partners could include a combination of any of the following: private agencies, government agencies, churches, Family Resource Centers, schools (public, private, post secondary institutions), or other human service agencies. Each agency partner must be not-for-profit, fiscally accountable, and in operation for more than two years.

2. **Health and Educational Needs of Children** The program for which application for funding is made must address the health and educational needs of children ages birth to 17-years-old and their families. A Specific program is eligible for funding from this grant for a **maximum of two years**.
  
3. **Monitoring Progress** The partnership must submit a **Semi-Annual Progress Report By December 31<sup>st</sup> Of The Award Year** and a **Final Report By May 31 Of The Following Year** with additional information/documentation as requested. Outcome based measurements should be used to evaluate success of the program. **At the conclusion of the grant year, the partnership will submit the final report including an accounting of fund expenditures and volunteer activities utilized.**

**DEADLINE FOR SUBMISSION: JULY 3, 2008**

**For further information or assistance in completion of grant, contact:**

James A. Willis, UWC Executive Director email: [uwhcexec@bellsouth.net](mailto:uwhcexec@bellsouth.net)  
Phyllis Melton, Administrative Assistant email: [uwhcassistant@bellsouth.net](mailto:uwhcassistant@bellsouth.net)  
Phone 270-821-3170 Fax 270-821-3175

**Deliver or mail grant application and 10 copies to be received on or before July 3, 2008:**

United Way of the Coalfield  
1 South Main Street  
P.O. Box 366  
Madisonville, KY 42431

# HEIDI BADGETT GRANT COVER PAGE (5 POINT)

Name Of Program \_\_\_\_\_

1. Amount Requested \_\_\_\_\_

2. Partner Agencies:

A. Name: \_\_\_\_\_

Addresses: \_\_\_\_\_

Phone: \_\_\_\_\_ Email \_\_\_\_\_

B. Name: \_\_\_\_\_

Addresses: \_\_\_\_\_

Phone: \_\_\_\_\_ Email \_\_\_\_\_

C. Name: \_\_\_\_\_

Addresses: \_\_\_\_\_

Phone: \_\_\_\_\_ Email \_\_\_\_\_

3. Key Contact Person

Name: \_\_\_\_\_ Phone \_\_\_\_\_

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

**1. ORGANIZATIONS BACKGROUND AND VERIFICATION OF PROGRAM NEED:(10 POINTS)**

- A. Description of each partner agency and how long each has been in operation.
- B. How has each partner provided services relating to program for which funding Is requested?
- C. What Community Indicators and/or statistics have been used to determine Need for Program?
- D. How do these indicators/statistics prove need for requested funding in the Local community?

**2. SUMMARY DESCRIPTION OF THE PROGRAM: (50 POINTS)**

- A. Program goals and outcome objectives.
- B. Program Design, Site, and how is will assure accomplishment of goals and objectives.
- C. How will the program be staffed by each partner agency and who is responsible for program oversight? Provide a list of all relevant staff, including volunteers where applicable.
- D. What evaluation tools will be used to assess program effectiveness?
- E. What other community support and involvement will be secured to meet program's goal and objectives?

**3. PROGRAM IMPACT: (15 POINTS)**

- A. What specific attitudes, behaviors, and values does the program seek to impact? How?
- B. What knowledge, skills, conditions, or other client characteristics does the program seek to change? How?
- C. What long term effects will these changes have on the clients, the community, at large?

**4. BUDGET: (20 POINTS)**

- A. Complete budget form indicating proposed direct monetary expenses for the Program to be derived from this grant as well as from other funding sources.
- B. Any in-kind (non-monetary) contributions of goods and/or services should be Described in attached notations to the budget.

**Proposals should be limited to 6 pages including cover sheet and budget.**

**Please include original and 10 copies of the completed form.**