MISSION STATEMENT: The Putnam County Community Foundation partners with those who give to enrich life and strengthen community for this and future generations.

The grant making programs and policies of the Putnam County Community Foundation, Inc., are reviewed at least annually for relevance and excellence. The Board of Directors of the Putnam County Community Foundation has developed the following guidelines for the submission and evaluation of grant proposals for the Youth Grants Program. Requests for exceptions to the guidelines submitted in writing will be reviewed and considered by the Board of Directors.

GRANT APPLICATION SUBMISSION:
Complete applications are due to the Community Foundation office by the dates identified in these instructions. A complete application consists of the signed, original application and one (1) copy of the application. The original application must not be stapled or bound and must be single sided. Applicants may electronically reproduce the application to type answers to the questions, but applications must not exceed five (5) pages total, including the cover sheet and demographics page. Grants given by the Community Foundation through the Youth Philanthropy Grants are up to $500 only.

GRANT APPLICATION SCREENING:
Each grant application will be screened by Community Foundation staff. Incomplete or late applications will not be reviewed and the applicant will be notified in writing.

GRANT DECISIONS:
Funding priorities and policies are reviewed annually by the Board of Directors. Each complete grant application will be researched by the Youth Philanthropy Committee. The applicant will have the opportunity to meet with members of the Committee to explain the benefits and accomplishments of the proposal, and to answer questions. The Board of Directors relies upon the work of the Youth Philanthropy Committee to inform its decisions.

FUNDING PRIORITIES:
Though any charitable project will be considered, the Youth Philanthropy Committee and Board of the Community Foundation will give funding priority to groups and organizations wishing to serve Putnam County citizens in the areas of:
• Increasing literacy and educational attainment for youth
• Extra-curricular activities for youth
• Teen crisis issues (i.e. drug/alcohol abuse, suicide, pregnancy, etc.)
• Health and wellness
• Respect for community and tolerance of others
• Environmental issues and community beautification

To be considered for the Youth Grants Program, projects must be youth-led and involve Putnam County youth in the implementation of the project.

GRANT PROHIBITIONS:
In general, grants from the Youth Grants Program will not be awarded for the following:
• Individuals
• Ongoing operational expenses, i.e. salaries, rent, and utilities
• Projects that do not serve Putnam County citizens
• Projects normally fully funded by units of government, including schools
• Religious activities or programs that appear to serve one denomination and not the community at large.
• Political organizations or campaigns
• National and state-wide fund raising projects
• Projects that could be considered discriminatory
• Projects operated by for-profit companies
• Projects requesting retroactive funding
• Projects not led by youth.

IMPORTANT DATES:
Based upon funding availability and granting priorities, the Youth Grants Committee of the Community Foundation may engage in multiple grant award cycles each year. Grant applications can be taken at any time, but are due on the 15th day of each month at 5:00 p.m. to be considered in the grant pool. Grant applicants will present their project to the Youth Philanthropy Committee and be interviewed on the first Wednesday of the month in which their grant application is being considered. If awarded a grant, grant checks will typically be distributed by the first of the following month. A progress report is due 6 months after the grant is given and a final report is due upon project completion or one year after project completion, whichever is sooner. Please note: If dates identified above fall on a holiday or a weekend, the next business day is the due date.

REPORTING REQUIREMENTS:
A final report is due at the time of project completion. Unless other arrangements are made, it is expected that projects will be completed within one year of the grant award. After a full six months, progress reports are due in the Community Foundation office. Community Foundation report forms are required to be used and will be provided. They may be obtained online at www.pcfoundation.org.

SPONSORING ORGANIZATIONS:
Please note that the sponsoring organization is ultimately responsible for the grant funds and for ensuring the project is successfully implemented as stated in this application and per the grant agreement. If awarded a grant, the sponsoring organization will receive the grant check, sign the grant agreement, and be charged with working with the youth and adult leaders to complete progress and final reports on time. Failure to submit timely or accurate reports, or any misuse of grant funds, will
negatively affect the sponsoring organization’s ability to receive future grants from the Community Foundation.

PUTNAM COUNTY COMMUNITY FOUNDATION  
2 South Jackson Street * Greencastle, Indiana 46135 * Phone: 765.653.4978 * Fax: 765.653.6385  
dgambill@pcfoundation.org
PUTNAM COUNTY COMMUNITY FOUNDATION
YOUTH GRANTS PROGRAM
Grant Application
(Please Print)

Name of Group: ____________________________________ Project Title: __________________________

Name of Putnam County Sponsoring Organization: __________________________________________
(501(c)3 public charity, church or unit of government)

Name and Title of Leader of Sponsoring Organization: ______________________________________

Address: __________________________________________ City, State, Zip: ______________________

Phone: __________________________ Website address: __________________________

Sponsoring Organization Federal Employer Identification Number: __________________________

Name of youth project leader: ____________________________________________________________

Address: __________________________ City, State, Zip: ______________________________

Telephone: __________________________ E-Mail Address: ______________________________

Name of adult project leader: __________________________________________________________

Address: __________________________ City, State, Zip: ______________________________

Telephone: __________________________ E-Mail Address: ______________________________

The undersigned representatives of the project and sponsoring organization hereby attest to the fact that this project proposal was initiated and prepared by youth, and that the project will be planned and carried out by youth. Furthermore, the contents of this application are true and accurate to best of my knowledge.

Signature of Youth Leader: __________________________ Date: ______________

Signature of Adult Leader: __________________________ Date: ______________

Signature for Sponsoring Organization: __________________________ Date: ______________

FOR OFFICE USE ONLY.

Organization is:
☐501(c)(3) non-profit ☐Unit of government ☐Church
☐Unincorporated organization ☐Other: ________________________________________________
1. The Project Plan
What is your project idea? 
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
Where will your project take place? (City/town) 
______________________________________________________________________________
When will your project begin and end? 
______________________________________________________________________________
Will you need additional advice or assistance to help complete this project? □ Yes □ No
If so, what kind, and from whom? 
______________________________________________________________________________
Will you need permission forms or insurance coverage for this project? □ Yes □ No
If so, please explain. 
______________________________________________________________________________
______________________________________________________________________________
2. Helping the Community
How will your project help the community? 
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
How did your group determine that this is an important community need? 
______________________________________________________________________________
______________________________________________________________________________
What area(s) does your project positively affect?
☐ Increasing literacy and educational attainment for youth
☐ Extra-curricular activities for youth
☐ Teen crisis issues (i.e. drug/alcohol abuse, suicide, pregnancy, etc.)
☐ Health and wellness
☐ Respect for community and tolerance of others
☐ Environmental issues and community beautification
☐ Other. Identify: 

Approximately how many people will be impacted by this project? ________________
3. Youth Leadership
Name of youth writing this proposal: ____________________________________________
How have youth been involved in planning the project? ____________________________
____________________________________________________________________________
____________________________________________________________________________
Which school(s) do the youth involved in the project represent? ___________________
____________________________________________________________________________
How will youth be involved in implementing the project? __________________________
____________________________________________________________________________

4. Learning Through Service
What will your group learn about your community from the project? ________________
____________________________________________________________________________
____________________________________________________________________________
What evaluation activities will the group use during the project to track progress? _____
____________________________________________________________________________
____________________________________________________________________________
Will your group give a presentation to others in the community about your project? □Yes □No
If yes, describe: _____________________________________________________________

5. Wrap-Up
How will your group measure your success and show results during the project and when the project is completed? ________________________________
____________________________________________________________________________
____________________________________________________________________________
How will the group celebrate a job well done? _________________________________
____________________________________________________________________________
____________________________________________________________________________
How will the group handle any failures? ________________________________
____________________________________________________________________________
6. Project Budget

Please fill in this budget table to show what expenses and other sources of funding you have for your project.

<table>
<thead>
<tr>
<th>Expenses</th>
<th></th>
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<tbody>
<tr>
<td><strong>List anticipated expenses:</strong></td>
<td><strong>Amount:</strong></td>
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<tr>
<td>Example- Family and friends</td>
<td>$175.00</td>
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<tr>
<td><strong>Total projected expenses:</strong></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Revenue</th>
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<tbody>
<tr>
<td><strong>List donations and anticipated funding</strong></td>
<td><strong>Cost:</strong></td>
</tr>
<tr>
<td>Example- Home Depot- donating lumber</td>
<td>$300</td>
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<tr>
<td><strong>Total Revenues:</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Total Requested from the Community Foundation - __________**

Maximum YP Grant is $500

7. Project Involvement

1. Total number of youth volunteers involved in project: __________
2. Total number of adult volunteers involved in project: __________