

Steps to Submit Mini Grant Application:

- Glades residents can pick up a copy of your Healthier Glades Mini Grant application from the following locations: Loula V. York (Pahokee), Clarence E. Anthony Library (South Bay) and Belle Glade Library. Healthier Glades Mini Grant applications will be available from Tuesday, September 27, 2022 to Tuesday, October 18, 2022. Applications can also be submitted electronically to <u>healthierglades@htpbc.org</u>.
- 2. The deadline to submit your Healthier Glades Mini Grant Application is Tuesday, October 18, 2022 at 4:59pm either in person or electronically. No applications will be accepted after 5pm. Glades residents can drop the completed applications off at the following locations: Loula V. York Library (Pahokee), Clarence E. Anthony Library (South Bay) and Belle Glade Library.
- 3. To ensure eligibility, ALL of the following must apply:
 - a. If applying as a Non-profit your proposal must prioritize individuals in the Belle Glade (33430), Pahokee (33476), South Bay (33493) and unincorporated (e.g., Canal Point, Lake Harbor, etc.) areas.
 - b. If applying as a resident you must reside in Belle Glade (33430), Pahokee (33476), South Bay (33493) and/or unincorporated (e.g., Canal Point, Lake Harbor, etc.) areas.
 - c. Your idea/project focuses primarily on one or more of the following areas :
 - i. Promoting Health and Wellness (Behavioral & Physical)
 - ii. Storytelling Changing the Narrative (e.g., Cultural & Visual arts, Social Connectedness, etc.)
 - iii. Developing and Nurturing Participation Channels, (e.g., Advocacy (Youth and Adult) and Support Group (Youth and Adult)
- 4. In order to comply with federal tax laws, Grant Funds may not be used for any of the following purposes during the Grant Period:
 - a. to attempt to influence legislation or the outcome of any specific public election;
 - b. to carry on, directly or indirectly any voter registration drive;
 - c. to make grants to individuals or to other organizations except as described in the Project;
 - d. to undertake any activities for a non-charitable purpose; or
 - e. to undertake any activities for a purpose other than for the Project.
- 5. All sections and questions on this application must be completed (unless stated otherwise). This includes: Project Leader, Project Overview, and Application Questions. Please print a copy for your records prior to submission. Incomplete applications will not be considered.

For Further Information:

Antoinita (Annie) Ifill Project Director, Healthier Glades Annie.glades@htpbc.org <u>561-685-4829</u>



Name of Project: _

Please check if you are applying as: <mark>Must be completed</mark>

Resident

□ Non Profit

Name of the project that you are applying for

Project Leader's Name: __<mark>Name of person(s) applying for the Mini Grant</mark>

Address: _____ The address must be in the following zip codes: 33430, 33476, 33493, 33438 Make sure that the number Make sure that the email address is

Phone number of project leader: <u>is accurate.</u> Email: <u>active and accurate</u>.

Anticipated date to implement project: The date that you plan to implement your project (Note: All projects must be completed by 5/31/2023)

Please select which best represents your focus area (choose all that apply):

- Health and Wellness
- □ Storytelling
- □ Nurturing Participation Channels Advocacy (Youth and Adult) and Support Group (Youth and Adult)

A total of **140** points can be awarded to a mini-grant application. The application sections shows the possible points per application area. Note: Hyphenated words will count as 1 word in each section of the application. Any section that exceeds the word count will be automatically disqualified.

Project Overview: 30 Points

Briefly describe the project you are proposing? How does it relate to one or more of the priority areas healthy and wellness, advocacy (adult/youth), and storytelling? (125 words or less)

Innovation: 25 Points

How is your project innovative or new? (75 words or less)

Community Impact: 30 Points

How will/does your project help the community? (125 words or less)



Faith Based Impact: 15

How will your organization and/or project partner with a faith based Institution? (75 words or less)

Impact on those most at risk: 20 Points

Explain if your proposal prioritizes an underserved population such as youth, marginalized residents (i.e., African Americans, Hispanics, Haitian, disabled, seniors, returning citizens, etc. (75 words or less)

Implementation: 20 Points

With the pandemic affecting the way we meet and interact with each other, how would you implement your project if the original plan was not possible? (100 words or less)

Budget:

Please complete the budget chart below identifying expenses for materials, staff, services, etc. You are able to apply for any amount up to \$3,000 for resident and \$2,000 for non-profit. Your budget request for this mini grant must not exceed these amounts. Please provide your best estimate for expenses needed to accomplish your grant idea. We understand amounts may vary at time of purchase.

Please note: Unused grant funds must be returned to Healthier Glades.

Description of expense		Amount
Ex.: 15 tables at \$100 each		<mark>\$1500</mark>
	Total	<mark>\$1500</mark>

Additional Budget Comments:

Add any additional information pertaining to your budget ONLY in this section.

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