

CMAF YAC Funding Application

Grantmaking Guidelines

Mission

To encourage the **youth of central Ohio** to improve their lifestyles through health advocacy, education and prevention.

History

In January of 2001 the Columbus Medical Association Foundation (CMAF) developed the Youth Advisory Council (YAC) to assist the Foundation in its grantmaking that targets youth and youth-led programming. The Council is composed of high school students ranging in age from 13 to 18. Each of these youth represents a school and/or community within Central Ohio.

Council members are charged with the following responsibilities:

- ✎ Research successful initiatives/programs that affect the health of the youth in Greater Columbus
- ✎ Identify activities to improve existing and/or add additional activities that will have a greater impact on the health of youth
- ✎ Develop a grant-making program through which funds can be distributed to the community to affect strategically targeted areas of concern

The YAC accepts two proposals per month. Proposals are due the **last** Wednesday of each month by 4:30PM.

(Postmarks not accepted).

Presentations are scheduled the following month on the third Tuesday of the month. Incoming grants turned in by April deadline with a May review will be deferred to the YAC's June meeting.

Grantee Requirements

- ✎ Programming should provide an opportunity for education and/or work towards the prevention of the following 2017 Youth Health priorities:
 1. Mental Health and Suicide
 2. Addiction and Substance Abuse
 3. Bullying and Violence in Community/Home
 4. Sexual Health and Pregnancy
 5. Prevention of Diseases and Conditions
 6. Nutrition and Fitness/Obesity and Eating Disorders
 7. The Negative Effects of Media & Technology
- ✎ The organization must have a current status of 501(c)(3) from the federal government or be a county/state/or federal government agency.
- ✎ Presence at a YAC meeting for discussion of proposal and Q&A with Council members. **(Meeting date and time provided by YAC Coordinator)**
- ✎ **A completed proposal including:**
 - ✎ Completed "Youth Funding Application Form" including funding type **(Please review the Grant vs. Sponsorship Checklist for assistance)**
 - ✎ A brief written proposal **(Required questions provided with application)**
 - ✎ A copy of the **Internal Revenue Service letter** stating the organization is a non-profit or an instrumentality of local or state government
- ✎ **Send your proposal by mail, fax or email!**

Brittany Villanueva Martinez
CMAF Youth Advisory Council
1390 Dublin Road
Columbus, Ohio 43215.
Fax: 614.643.3804
Email: bvillanueva@cmafohio.org
- ✎ **Final Evaluation:** If grant dollars are awarded, grantee will be required to file a final evaluation. Evaluation must include receipts that represent the total installment from the CMA Foundation, and is due no later than 30 days after the programs completion.

CMAF YAC Funding Application

CMAF YAC Funding Checklist:

Grant and Sponsorship Awards:

- Grant and sponsorship requests should not exceed \$2,000.
- We like to see strong youth leadership in the development and implementation of the project if possible.

Grant: Workshop or program within a school, non-profit and/or youth group

Sponsorship: Community-wide and inclusive event

YAC Funding Criteria:

Does your program/event comply with the following criteria? Check all boxes before applying for YAC Funding:

- Our program/event targets youth and/or is designed by youth.
- Our program/event target one or more of the YAC's funding priority areas.
- Our program/event material is age appropriate.
- Our program/event empowers youth to make healthy lifestyle choices.

Your program/event must not directly support any of the following:

- Individuals
- Private Foundations
- Political or religious activities
- Ongoing operating expenses (THIS INCLUDES EMPLOYEE SALARY)
- Indirect or administrative overhead costs
- Deficits, endowments or research

***Award Requirement: Successful grantees must use the YAC logo in publicity, booths at the program/event and further acknowledgement. Logo will be sent to program coordinator with award payment.**

Health advocacy is a comprehensive social process that embraces actions directed at strengthening skills and capacities necessary for health. It enables people to improve their own health by increasing their knowledge and control over their health. Health promotion is directed at changing social, environmental, and economic conditions so that healthier individuals and communities will be the result. Broad-based participation is essential to sustain health promotion action.

There are three basic strategies for health advocacy:

(1) advocacy for health to create the essential conditions for health; (2) enabling all people to achieve their full health potential; and (3) mediating between the different interests in society in the pursuit of health.

The CMA Foundation's Youth Council **health advocacy grantmaking priority** supports those projects that increase the understanding of the psychological, social, and behavioral risk factors that influence health and identifies effective interventions for enhancing health-promoting behavior.

CMAF YAC Funding Application

Written Proposal Requirements

Please provide short responses for the following questions:

1. What are the history, mission, purpose, size and goals of the organization? Please provide an updated list of the youth committee members or youth involved with the project if applicable.
2. What are the activities, goals and objectives? Please provide an overview of the entire project.
3. What is the project timeline of how the project will be implemented?
4. Describe the population served by the organization. What is the target population for the project?
5. How will you promote and what type of media will you use? Please submit your media and promotion plan.
6. How you will measure the success of your project and receive feedback?
7. Will the project be continued in the future? If so, explain the plans for securing future support.
8. What is the budget for the project? Please provide a statement of need, line-item budget, and other possible sources of income.
9. How did you hear about the YAC?

If you have any questions about your proposal, please do not hesitate to contact the CMAF YAC Coordinator Brittany,
At 614.240.7420 ext. 4388
or by email at
bvillanueva@cmafohio.org



CMAF YAC Funding Application

Application Form

Mission Statement:

To encourage the youth of greater Columbus to improve their lifestyles through health advocacy, education and prevention programming.

<i>For Office Use Only</i>	
Grant # _____	Receipt Date _____
Amount Requested _____	Funding Priority _____
Grant Period _____	

Please respond to all questions in the space provided on the application form. Submit **one original** of the completed application form along with the brief written proposal.

FUNDING TYPE (Please refer to funding specific requirements) Grant Sponsorship

APPLICANT ORGANIZATION

Organization Name _____

Agency Director _____

Name _____ Title _____

Address _____ City, State _____

Zip Code _____ Telephone _____ Fax _____

Date Established _____

Non-profit Classification _____ Federal ID # _____

Website _____

EVENT/PROGRAM

Proposal Title _____

Amount Requested _____

Event Period _____

Start Date _____ End Date _____

Event Location (if different from organization address)

Event/Program Coordinator and primary contact person for event and YAC Proposal:

Name _____ Title _____ Telephone _____

E-mail: _____