

The Raymond John Wean Foundation
Grant Request \$1,000 and not to exceed \$5,000
Proposal Format

*Please address the following issues about your Grant proposal. Your response should be **no more than 3-5 pages overall** in addressing all four sections. Incomplete information may cause a delay or result in an unfavorable response to your proposal. Be particularly mindful of this when completing the Budget Form. Please submit your proposal in the order listed below.*

I. Program Need

Briefly describe the need your program will address. Identify the specific target population.

II. Program Description

Describe how your program intends to meet this need. Include any evidence that suggest your proposed programming will be effective. Identify specific activities that will occur in your program.

III. Program Objective

- A. Identify the objectives you have in implementing your program. As an example, for a client training program an implementation objective might be: “to offer 50 clients training twice weekly for fifteen weeks.”
- B. Identify the effect your programming is expected to have on program participants. Continuing the client training example, you might expect an outcome like: “75% of the clients who attend 80% of the training classes will improve their knowledge by the end of the program.”

IV. Documentation or Program Assessment

Briefly describe how you will collect information to document your service delivery and to document how participants will be affected by your program.

V. Budget Form

- List all amounts in whole dollars.
- List the beginning and ending dates of the project, which cannot exceed twelve months.
- Itemize all sources of revenues in detail by grantor name, indicating the status of each source: (P) pending or (A) approved.
- Expenditures must be itemized for the total amount requested from the Wean Foundation in Column 1.
- All expenditures from the remaining other sources must be itemized in Column 2.
- The total project expense in Column 3 must equal the total revenues.

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Application

Name of Organization _____

Address _____

Name and Title of Contact Person _____

Proposal Name _____

Phone _____ Fax _____

Email _____ Web Address _____

Tax ID # (EIN) _____ Date of Incorporation _____

Amount requested _____ Total Project Cost _____

Total Organization Budget _____

ATTACHMENTS:

Submit the following attachments with the completed application and budget form:

- ✓ Complete list of the organization's Board of Directors, with their affiliations.
- ✓ Your most recent financial statement and complete audit if available.
- ✓ Your most recent IRS Form 990. This should include all attachments such as schedules and statements.
- ✓ Current year's budget and year-to-date expenditures for the organization.
- ✓ *Prior year Grants Program recipients only* – Evaluation Form or Progress Report.
- ✓ Copy of the IRS federal tax exemption determination letters. If not available or applicable, please explain. (If working with a fiscal sponsor, include application information and a letter from the fiscal sponsor agreeing to act in that capacity for your organization.)

Please fill this form out in its entirety, and mail it, along with the required attachments to:

The Raymond John Wean Foundation
P.O. Box 760, Warren, OH 44482-0760 *or*
108 Main Avenue, SW, Suite 1005, Warren, OH 44481-1058

Name, Title and Signature of Authorized Applicant

Date

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Budget Form

Organization Name:
Proposal Name:

Proposed Project (dates) _____ **to** _____

REVENUES:	Project Budget
The Raymond John Wean Foundation	
TOTAL REVENUES	\$

EXPENDITURES:	Column 1	Column 2	Column 3
	Wean Foundation	All Other Sources	Total Project Expense
Salaries and Wages			
Fringe Benefits/Payroll Taxes			
<i>TOTAL PERSONNEL</i>	\$	\$	\$
OTHER EXPENSES:			
Training			
Travel			
Consultants and Professional Fees			
Rent & Utilities			
Telephone			
Supplies			
Printing/ Postage			
Equipment			
Other:			
Other:			
Other:			
Other:			
Other:			
Other:			
TOTAL OTHER EXPENSES	\$	\$	\$
TOTAL EXPENDITURES	\$	\$	\$