

St. Charles Youth Commission

Stop!!



All Challenge Grant application ideas/proposals **MUST** originate from St. Charles youth and benefit the well-being of the youth of our Community.

All requests must be submitted on the following forms or the request will be returned. Other ideas for projects which might benefit the young people of St. Charles may be submitted as standard grant proposals.

Contact Nancy McFarland @ 630-377-7059.

A community effort linking city government to the people it serves

St. Charles Youth Commission

2 East Main Street St. Charles, Illinois 60174 630-377-4422

CHALLENGE GRANT (2012/2013)

Information Cover Sheet

It is the belief of the Youth Commission that our young people have insights into both the issues that impact our youth and ideas to bring about positive change. The focus of this year's Challenge Grant should relate to the heading of:

“Make a Better Tomorrow Today”

Please write one paragraph stating what you believe to be a concern of our community where you and your youth group could have a positive impact. Examples of past grant funding were for environmental projects, working with Special Olympics, bullying, drug and alcohol awareness, and repairing donated bicycles to give to needy children. An option would be to partner with a community organization such as the Park District (as mentioned above), or any other church, service or social organization.

Please answer the following grant criteria by writing neatly or typing your answers **on the following pages**. **DO NOT INCLUDE YOUR NAME(S), SCHOOL, OR GROUP IDENTITY IN ANY OF YOUR ANSWERS.**

I. Information

This page should be the only page to contain your name(s), school, or group that is submitting this grant request. Please complete the information and submit it to the address listed by no later than **December 7, 2012.**

II. The Project

In one paragraph or in outline format, please describe your project and how it will address your identified area of concern.

III. Project Goals

In one paragraph please state why you believe your project would be a positive contribution to the youth and our community.

IV. Motivation

In one paragraph please indicate what has motivated you to develop this project: life experiences, leadership skills, talents, and family.

V. Budget and Timeline

Please provide a proposed budget of what you estimate your expenses to be as well as a timeline for the implementation of your project.

VI. Measurement of Project Success

A report back to the Youth Commission is considered an essential part of the Challenge Grant program. Please provide details on the impact your project had on the community including the number of youth involved, number of youth affected, and, if appropriate, how you will sustain this project in future years.

YOUTH COMMISSION CHALLENGE GRANT

CHALLENGE GRANT (2012/2013)

YOUTH COMMISSION CHALLENGE GRANT APPLICATION

Application # _____

I. INFORMATION

Please write neatly or type your application following the criteria requested on each page. **DO NOT INCLUDE YOUR NAME(S) OR GROUP IDENTITY ON ANY OTHER PAGES.** To remain fair in our selections, we blindly evaluate each application.

Name(s) and Age(s) of Applicant(s): _____

Group (if applicable): _____

Name(s) of Adult(s) involved with your project: _____

Contact Person:

Name: _____

Address: _____

City/State/Zip: _____

Phone #: _____

Email Address: _____

All applications must be postmarked no later than December 7, 2012. Please return all pages to:

St. Charles Youth Commission
c/o The Mayor's Office
2 East Main Street
St. Charles, IL 60174

YOUTH COMMISSION CHALLENGE GRANT

Application # _____

II. The PROJECT

In one paragraph or outline format, please describe your project and how it will address your identified area of concern.

YOUTH COMMISSION CHALLENGE GRANT

Application # _____

III. PROJECT GOALS

In one paragraph please state why you believe your project would be a positive contribution to the youth and our community.

YOUTH COMMISSION CHALLENGE GRANT

Application # _____

IV. MOTIVATION

In one paragraph please indicate what has motivated you to develop this project. Life experiences? Leadership skills? Talents? Family?

YOUTH COMMISSION CHALLENGE GRANT

Application # _____

V. BUDGET AND TIMELINE

Please provide a proposed budget of what you estimate your expenses to be as well as a timeline for the implementation of your project.

YOUTH COMMISSION CHALLENGE GRANT

Application # _____

VI. MEASUREMENT OF PROJECT SUCCESS

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