

a. 2023 Health Grant Application

Before You Begin

## Adolescent Health and Wellness Application

**Louisville Funders Collaborative:** Louisville foundations using Blackbaud Grantmaking software have joined together to implement shared applications and reports to help streamline and ease barriers to their grant processes. While the goal of this collaboration is to ensure expanded access and greater equity for grant seekers, it is important to note that each funder has their own guidelines, strategic priorities, timelines, and proposal review criteria. Participating funders may also request additional information at any stage during their application process. Based on limitations of the Blackbaud Grantmaking system, at this time, any interested nonprofit seeking funding must submit their application to their requested foundation(s) separately. However, the commitment is to continue to improve this process, and learn from others to create stronger and more effective partnerships within our community. The following funders are collaborating in this process: C.E. and S. Foundation, Gheens Foundation, Jewish Heritage Fund, Norton Foundation.

**Jewish Heritage Fund (JHF) seeks to fund organizations and programs that support our vision of Louisville as a city whose youth are mentally and physically healthy, thriving, and fully engaged in community.**

**JHF is interested in partnering with nonprofit organizations to ensure adolescents have equitable access to health supports and high-quality, evidence-informed programs. We are particularly interested in supporting organizations to:**

- o collaborate to eliminate gaps in services
- o actively engage adolescents and their families in decision making (i.e., advisory boards, teen councils, program evaluation)
- o evaluate programs, initiatives, and organizational effectiveness
- o provide evidence-informed programs that are innovative and culturally relevant
- o introduce promising practices through pilot programs

**While completing the application please note the following:**

- o Limit your use of bullets and other formatting
- o Periodically save application to prevent any inadvertent loss of data or responses
- o Copy and paste from outside documents as needed
- o Access saved and submitted requests by visiting the [JHF Grant Portal](#)
- o Add mail@grantapplication.com to your safe senders list to ensure you receive all system communications
- o Please contact garter@jewishheritagefund.com with any questions related to the application

### Contact Information

|                |  |           |  |
|----------------|--|-----------|--|
| First Name     |  | Last Name |  |
| Title          |  |           |  |
| Phone          |  |           |  |
| E-mail Address |  |           |  |

|                |                                      |            |           |
|----------------|--------------------------------------|------------|-----------|
| No             | Same as Organization Primary Contact | First Name | Last Name |
| Title          |                                      |            |           |
| Phone          |                                      |            |           |
| E-mail Address |                                      |            |           |

### Organization Information

|   |                |          |
|---|----------------|----------|
| Organization Name   | Tax Status     |          |
|   | - Select One - |          |
| Address   |                |          |
| City  | State          | ZIP Code |
|   | - Select One - |          |
| Please summarize how the organization partners with youth and their families to ensure their voice is included in organizational decision making and program design.              |                |          |
| Organization Diversity, Equity, and Inclusion Policies  |                |          |
| How does your organization engage in diversity, equity, and inclusion work? For example: DEI policies/procedures, composition of organizational or board leadership, proximity to |                |          |

those served, connection to community.

### Articles of Incorporation (AOI)

Upload most recent AOI filed with the Commonwealth of Kentucky

### Tax Exempt Letter

Please upload your organization's tax exempt letter.

### Financial Statements

Upload your organization's most recent audited financial statements or tax form 990. If your organization does not have audited financial statements or 990, then attach your board's most recently reviewed annual financial statements (Balance Sheet, Income Statement, Statement of Cash Flows).

### Board of Directors List

Please upload your organization's current list of Directors:

## Request Summary

### 1. Request Date

1/8/2024

### 2. Project Title

### 3. Project Start Date

### 4. Project End Date

### 5. Total Cost

What is the total cost to implement the proposed request?

### 6. Request Amount

What is the dollar amount needed from JHF to support this request?

### 9. Request Participants by Age

Please select the ages that best represent the participants in this request:

### 10. Request Participants by Race/Ethnicity

Provide the percentage breakout of race/ethnicity of those served by this request. Please use the following format to answer:

- American Indian X%
- Asian/Pacific Islander X%
- Black/African American X%
- Hispanic/Latino X%
- White/Caucasian X%
- Other X%

### 11. Request Overview

Please provide an overall description of the request (For example: history, objectives, number of participants, location of services, new or ongoing project, etc.), desired results, and a summary of how the requested funds will be used.

### 12. Request Background and Statement of Need

Briefly describe the problem or challenge that the proposed request will address. Also include if this request is based on a promising or best practice. If so, please provide web links to sites supporting research/evidence. If not, explain the rationale for the proposed project:

### 13. Expected Results

Please describe the key desired impact(s) of this request. Also, share how you will assess/evaluate the project's outcomes.

### 14. Previous Results

Please share any results if implemented or piloted in previous years (if applicable).

### 15. Partnerships and Collaborations

Please share how your organization is employing partnerships or collaborations to complete this request (if applicable).

### Letters of Support

If you indicated any organizations collaborating on this project in question #19 then please upload a letter of support from those organizations.

### 16. Logic Model

Please upload a logic model related to your request. You may use a template provided by JHF: [Logic Model](#) or any format of your choosing. If using the JHF template, save to your computer, complete, and upload by clicking the "choose file" button below.

### 17. Request Timeline

Provide a timeline for the request including any pertinent milestones. You may use a template provided by JHF: [Request Timeline](#) or any format of your choosing. If using the JHF template, save to your computer, complete, and upload by clicking the "choose file" button below.

### 18. Total Budget for the Proposed Request

Please upload a total budget related to this specific request. You should also include how JHF funds would be allocated in this budget. You may use our [Budget Template](#), or any format of your choosing. If using the JHF template, save to your computer, complete, and upload by clicking the "choose file" button in application.

### 19. Other Funding Sources for this Project

Provide the following: funding source name, amount, status (pending, committed or in-hand)

## Other Information

### Additional Information

Provide any additional documents you feel are relevant to this project (Please combine multiple documents into one file for upload):