



## FYI - GRANT APPLICATION INFORMATION

The application must be signed by an authorized representative of the organization. If you are a school organization, the application must be signed by the organization's representative and the school principal or superintendent.

### **FYI emphasizes projects that:**

Address issues identified in the Future Youth Involvement (FYI) 2025 Needs Assessment, are innovative, present opportunities to leverage other local funds and yield substantial local benefits for the community resources invested. Also, those projects that facilitate cooperation and collaboration between organizations and have the potential to continue after the grant period.

### **FYI'S Granting is guided by general policies:**

- Other than grants made to individuals through designated scholarship funds, grants are made to 501(c)(3) organizations or other tax-exempt organizations and programs benefiting youth in the communities of Tuscola County.
- Grants are made for a wide variety of charitable, community, scientific, literary, educational and cultural programs and purposes.
- Grants are provided to projects addressing the FYI 2025 Needs Assessment – Identified Youth Issues.
- Grants are not available for sectarian religious programs.
- Generally, grants are not made for operating budgets, previously incurred debt, endowed campaigns or fundraising activities.

Also including:

- Scholarships.
- Field trips (where students get a stipend that reduces the cost of the trip per student).
- Projects that do not have a chance of being completed.
- Projects where the site or project is not directly owned or controlled by the grant applicant.
- Projects that have already been initiated.
- Reward systems for students.
- Projects already begun or have been completed are not eligible for funding.



Provide the Following Information:

- 1) Completed Future Youth Involvement (FYI) Grant Application & FYI Budget Form.
- 2) Organization - Provide a brief overview of your organization.
- 3) Provide Name of Project & Summary Description (narrative) of Project addressing the following:
  - Purpose/Goals/Objectives.
  - Discuss the Identified Youth Issue from the FYI Needs Assessment that your proposal addresses.
  - How the project will be implemented.
  - How is the project different/unique from existing services in your community.
  - How did you determine a need for this project.
  - Number of youth that will be served.
- 4) Project Team - Identify the people involved in planning this project, including the youth who had direct involvement in writing the grant proposal.
- 5) Evaluation -Plans for evaluation, including how success will be defined and measured.
- 6) A copy of the IRS determination letter indicating 501(c)(3) tax-exempt status.
- 7) Format
  - All submitted application materials must be printed single-sided. Narrative portions of the applications must be single-sided, double-spaced, 12-point font, not to exceed three pages total.
  - All grant applications become property of the Tuscola County Community Foundation once received.
  - Incomplete applications will not be considered (i.e. unsigned, missing narrative, budget not included, etc.)
  - If you are applying to more than one fund, you must submit a separate application to each fund.

Mail completed grant application to:

**Tuscola County Community Foundation**  
**Attn: FYI**  
**P.O. Box 534**  
**Caro, MI 48723**

Questions? Call the office at: 989.673.8223 or visit: [www.tuscolaccf.org](http://www.tuscolaccf.org)

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Applications for Spring Grant Cycle accepted February 1 – March 1 (must be postmarked by March 1<sup>st</sup>)  
Applications for Fall Grant Cycle accepted September 1 – October 1 (must be postmarked by October 1<sup>st</sup>)

## IDENTIFIED YOUTH ISSUES

RANK	ISSUE
1	Stress
2	Mental Health
3	Pressure to Succeed
4	Low Self Esteem
5	Bullying/Cyberbullying
6	Cliques/Not Fitting In
7	Peer Pressure
8	Body Image/Eating Disorders
9	Smoking (cannabis,tobacco,etc)
10	Learning Disabilities
11	Discrimination (gender, race, etc.)
12	Pressure to Work from Parents
13	Poverty
14	Lack of Recreational Activities
15	Drug Use (including steroids)
16	Alcohol Use/Drunk Driving
17	Violence in Schools
18	Suicide
19	Relationship Abuse (emotional or physical)
20	Sexual Harassment



## NEEDS ASSESSMENT 2025

## PROGRAMS & ACTIVITIES IDENTIFIED AS HELPFUL TO YOUTH

RANK	PROGRAM OR ACTIVITY TYPE
1	Competitive Sports (not school related)
2	Clubs/groups with a specific focus (learning environment, girls/boys only, etc.)
3	Real life learning experiences.
4	Art, writing or music focused activities
5	Outdoor experiences (camps or challenge courses)
6	Homework assistance or tutoring program
7	Programs that recognize success
8	Programs that focus on teaching a hobby or skill
9	Motivational speakers or presenters in school
10	General recreation
11	Programs that explore jobs or career preparation
12	Programs that teach time or money management
13	Programs that are led by youth instead of adults
14	Programs with peer members
15	Programs that teach self-defense or martial arts
16	Programs that focus on prevention
17	Reading programs
18	Underclassmen mentored by peers
19	Library programs
20	Programs that involve parents or the entire family

## Future Youth Involvement (FYI) Grant Application

### 1. Applicant Information (organization address)

Legal Name:		
Address:		
City, State, Zip		

### 2. Annual Budget:

3. Type of Applicant:		
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### 4. Name and information of contact person:

First Name:		Last Name:	
Email:		Phone Number:	

### 5. Name of Project:

6. Summary Description of Project:		
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### 7. Funding Request (round to whole dollar)

A. FYI Funding	\$
B. Applicant Funding	\$
C. Other (specify)	\$
D. Other (specify)	\$
E. Other (specify)	\$
G Total	\$

### 8. Applicant Past Funding:

Yes: <input type="checkbox"/>	No: <input type="checkbox"/>	Amount: \$
Project		

9. Partial Funding:	Yes: <input type="checkbox"/>	No: <input type="checkbox"/>	Least Amount Acceptable: \$
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10. Proposed Project:	Start Date:	End Date:
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### 11. Applicant Certification & Signatures:

To the best of my knowledge and belief, statements in this application are true and correct.

#### Authorized Representative

First Name:		Last Name:	
Title:		Telephone:	
Signature:		Date:	

#### Student Project Director (if any)

First Name:		Last Name:	
Title:		Telephone:	
Signature:		Date:	

#### Principal or Superintendent

First Name:		Last Name:	
Title:		Telephone:	
Signature:		Date:	

<b>FYI BUDGET INFORMATION</b>	
<b>Section A – Budget Resources</b>	
FYI Grant Request:	\$
Other Funding: (Specify)	\$
Total Project	\$
<b>Section B – Budget Categories</b>	
Equipment:	\$
Supplies:	\$
Construction:	\$
Other: (Specify)	\$
Total Cost of Project:	\$