

NEK Prosper! Healthy Cents Fund FULL PROPOSAL APPLICATION

Application (invited proposals only) Deadline: June 2, 2023 at 5:00 p.m.

Submit to Diana Gibbs at d.gibbs@nvrh.org

1. 	Type of Applicant: _Non-profit OrganizationGroup/Association^Individual*Other (please describe):
2.	For organizations or businesses, how many staff do you employ (both part-time and full-time):
3.	For organizations or businesses, what is your current organizational operating budget:
4.	Name of Applicant (organization, group, individual, business):
^If	you operate under the umbrella of a larger organization (for example, the Hub operates under Umbrella), please provide the name of the organization:
*If	an individual, please provide the name of your fiscal sponsor organization
5.	Organization or Fiscal Sponsor Street Address (Street/Road, City, State, Zip Code):
6.	Primary Contact Person Name (for project):
7.	Primary Contact Person (for project) Email Address:
8.	Primary Contact Person (for project) Preferred Phone Number:
9.	Tax Identification Number (organization, business or fiscal sponsor as applicable):
10	. Amount Requested (no more than \$25,000):
11	. Schedule of Work:

•	Start Date (no earlier than July 1, 2023):
•	End Date (no later than June 30, 2024):

12.	Project Name	/Title – Provide a	one-line name	for your p	project:
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13. Project Purpose Summary – Provide a short three to four sentence summary of the purpose of your project:

14. What Vermont town(s) will be directly served by your project?

15. Describe the Project - the work you'll do, the overall timeline and how you'll use the requested funds (will also need to attach a Project Budget – see example) (no more than 1,500 characters):

16. Describe the Focus Population (who will benefit?) (no more than 500 characters):				
	Describe the Focus Population (who will benefit?) (no more than 500 characters): Describe how this project was identified or designed by the intended beneficiaries (no more than 500 characters):			
18.	Describe the project goals and desired results in alignment with NEK Prosper! Collaborative Action Networks (CAN) outcomes (what will success look like?) (no more than 500 characters):			

19.	Identifying milestones provides a way to monitor the progress of your project and
	make course corrections, if needed. When and how will you identify milestones for
	this project, ensuring alignment with NEK Prosper! CANs? (no more than 1,500
	characters):

20. Describe your team (the project champions and any community partners you are working with / intend to work with to achieve these results). **If not yet working with these partners, please describe your plan to outreach and engage these partners** (no more than 1,500 characters):

21.	Please explain how the intended work may positively impact and/or help advance the work of NEK Prosper!, including the desired outcomes areas (no more than 1,500 characters):
	characters).

22.	2. Optional) Feel free to provide additional informati reviewers in evaluating this application. What else that we didn't ask? (no more than 1,500 character	e should we know about the project

NEK Prosper! Healthy Cents Fund Budget Template:

Organization/Group/Business/Individual Name (same as Question 4):				
Project Name/Title (sa	me as Question 12):			
Project Expense Category* (list by line item):	Description:	Healthy Cents Fund Request Amount:	Please describe and provide amount for any other secured funding or in-kind donation toward expenses for Project:	Total Project Costs:
Staffing		\$		\$
Consultants (legal fees, trainers, graphic design, etc.)		\$		\$
Materials & Supplies (printing, books, art supplies, building materials, etc.)		\$		\$
Travel		\$		\$
Other (fees for conferences, trainings, etc.)		\$		\$
Total:		\$	\$	\$

^{*}If a category is not applicable, please leave it blank