

michaelsholzfund.org

Honoring Michael's Magic

MICHAEL SCHOLZ MEMORIAL CHARITABLE FUND GRANT GUIDELINES

Mission:

The mission of the Michael Scholz Memorial Charitable Fund is to teach youth how to preserve and protect South Florida's fragile environment and ecosystem.

Priorities of The Fund:

The Michael Scholz Memorial Charitable Fund is most likely to fund projects that:

- Teach youth how to preserve and protect South Florida's fragile environment and ecosystem.
- Target youth who face challenges, such as those who live at or below the federal poverty line or who
 are mentally or physically or emotionally disabled or abused;
- Respond creatively and in a timely manner to existing or emerging environmental issues in South Florida;
- Foster volunteerism and community involvement; and/or
- Can have a lasting impact on youth participants.

Grant Ranges:

Grants generally range from \$500 to \$5,000

Special Initiative Grant:

The Fund will, on occasion, provide grants for initiatives that address a community issue or need in South Florida, particularly in Miami Dade County. Particular focus is placed on reaching youth who face challenges prioritized above.

Eligibility:

Nonprofit, tax-exempt community-based organizations

Limitations:

Programs generally not considered are:

- Programs involving specifically religious or sectarian activities
- Political activities or organizations

Review Process:

Grant applications are accepted year-round and will be considered in the following manner.

- Applications are screened by the Executive Director to ensure it is complete.
- The Fund's Grants Committee reviews the application.
- A site visit or meeting with the applicant will be scheduled if necessary.
- A recommendation will be brought to the full Board for a vote.
- Applicants will be notified in writing of the Board's decision.
- Applicants can expect a response from the Fund's Board within a two month period.



michaelsholzfund.org

Honoring Michael's Magic

Grant Application Instructions:

- Applicants should complete the Grant Application Cover Sheet and submit it with the application.
- Additional instructions are on the reverse side.
- First-time applicants should complete and submit the Registration Form.

Note to Applicants:

- All grantees are expected to submit a final report at the end of the grant period describing outcomes of the project and how objectives were or were not met.
- A letter of commitment or support is required for all applicants that are collaborating with other funders or program partners.



michaelsholzfund.org

Honoring Michael's Magic

GRANT APPLICATION COVER SHEET

| Date of Submission: | | | | |
|-----------------------------------------------------------|-----|----------|--|--|
| Name of Organization: Address: | | | | |
| Telephone: | | | | |
| Registration Complete? | | No | | |
| Project Title: Target Population: Amount Requested: | | | | |
| Collaborating Organizatio | | | | |
| For Office Use Only: | | | | |
| Reviewed by: | | | | |
| | Yes | No No | | |
| Amount Approved: Date Applicant Notified: _ NOTES: | | | | |



michaelsholzfund.org

Honoring Michael's Magic

GRANT APPLICATION INSTRUCTIONS

All organizations applying for grants from the Michael Scholz Memorial Charitable Fund should complete a Registration Form and submit updated documentation.

Proposals should be no more than three pages in length. They may be submitted via email to JillStephens@mail.com or mailed to:

Michael Scholz Memorial Charitable Fund 111 Majorca Avenue Coral Gables, Florida 33134

If mailing, please submit four stapled copies of the proposal to the above address.

The **proposal narrative** should include, in no more than two typed pages, using 12 point font:

- The history and mission of the organization applying for a grant;
- An in-depth description of the proposed initiative, including:
 - o How the proposal will positively impact South Florida's environment and/or ecosystem.
 - A description and size of the target population to be reached.
 - o The project's objectives and proposed strategies, activities and timeline for meeting them.
 - How success of the project will be measured.
 - o A list of other organizations involved in the proposed initiative, if applicable.
 - An estimate of the number of volunteers needed for the project to succeed and how those volunteers can be recruited.

The **budget** should include:

- The total cost of the proposed initiative. This should include the amount sought from the Fund, as well as other planned sources of support, if necessary, and the status of these requests.
- A description of how the initiative might be sustained when grant funds expire.
- A line-item budget reflecting all expenses and income for the project.
- Identification of how the Fund's money is to be spent.



michaelsholzfund.org

Honoring Michael's Magic

REGISTRATION FORM

| Date Completed: | | | | |
|----------------------------------------------------|--|--|--|--|
| Name of Organization: | | | | |
| Executive Director/President: | | | | |
| Primary Contact (if different): | | | | |
| Address: | | | | |
| Telephone: | | | | |
| Fax: | | | | |
| Web Address: | | | | |
| Email: | | | | |
| Tax ID#: | | | | |
| Total Operating Budget: | | | | |
| General populations served and service priorities: | | | | |

Attachments:

- A list of the governing Board and its officers and mission statement
- A copy of the IRS Determination Letter of 501©(3) status or fiscal agent's letter
- Evidence of registration as a charitable organization within the state of Florida
- A copy of the organization's current fiscal year operating budget
- A copy of the most recent 990 tax form and audit (if available)
- If applicable, a letter of commitment or support from collaborative partner(s)

This information will be kept on file in the Fund's office. Organizations that apply for a grant need not complete the registration form each time.

For questions please call 305-361-6166 or visit the Fund's website at www.michaelscholzfund.org.