



APPLICATION FOR A SPECIAL PROJECT REQUEST INSTRUCTIONS & GENERAL INFORMATION

1. The Junior League of Springfield, Inc. will award a total of \$2,000 for special projects to support community organizations this year.
2. Project money will be awarded to improve **reading literacy** in the community, consistent with The Junior League of Springfield's mission:

The Junior League of Springfield is an organization of women committed to promoting voluntarism, developing the potential of women and improving communities through the effective action and leadership of trained volunteers. Our purpose is exclusively educational and charitable.
3. Project award will consist of funds and volunteers for a particular endeavor for community organizations.
4. Applicant organizations must be tax-exempt, not-for-profit organizations.
5. Applicants are limited to two consecutive years of funding for a specific program.
6. Applications are available on the Junior League of Springfield, Inc. website: [www.jlsil.org](http://jlsil.org) (<http://jlsil.org/community/projectsandgrants.htm>) or by emailing the JLS office at admin@jlsil.org. The application form can be downloaded and/or printed.
7. This application must be fully completed with the information typed on the form.
8. Responses should be concise and provide enough information so that the Junior League of Springfield, Inc., can evaluate the application. If additional space is required to complete a response, feel free to add additional pages.
9. Submit any attachments. Please clearly mark any additional pages with the name of your organization and the page number.
10. You may **mail, email, fax, or drop off** your application to the Junior League of Springfield, Inc. headquarters located in the Hoogland Center for the Arts, 420 South Sixth Street, Springfield, IL 62701-1808. On the due date, **Monday, November 2, 2009**, someone should be at the headquarters to accept your hand-delivered applications from 7:30 a.m. to 4:30 p.m.
11. **Application Deadline:** Deliver completed applications in person by 4:30 p.m. or earlier on Monday, November 2, 2009. All mailed applications must show a postmark date of **November 2, 2009 or earlier.**
12. Mail your applications to:

The Junior League of Springfield, Inc.
Kathryn Kleeman, Projects and Grants Chair
Hoogland Center for the Arts
420 South Sixth Street
Springfield, IL 62701-1808

Email your applications to: kathrynkleeman@hotmail.com
Fax your applications to: (217) 544-6557
13. Applications will be reviewed on a competitive basis using the following criteria:
 - a) Ability to promote reading literacy
 - b) Community impact of the project
 - c) Compatibility with the Junior League of Springfield's mission and focus areas
 - d) Appropriate use of JLS funds
 - e) Public recognition of JLS
 - f) Applicant characteristics
 - g) Potential for community awareness
 - h) Quality of the proposal
 - i) Completeness
14. Applicant organizations will be notified of approval status around March of 2010.
15. Approved projects will be publicly announced in **April 2010**, following execution of a contract between the Junior League of Springfield, Inc. and the organization.
16. Please contact the Projects and Grants Chair, Kathryn Kleeman at 217-483-5231 or by email at kathrynkleeman@hotmail.com with any questions regarding this application or any ideas pertaining to projects, especially signature projects.



SPECIAL PROJECTS APPLICATION
2009-2010

Instructions: See previous pages

Applicant Organization: _____

Mailing Address: _____

Telephone: _____

Name of Contact Person: _____ Telephone: _____

Program Name, if applicable: _____

Amount of Funding Request: \$ _____

of Volunteers for Project Request _____

Amount of Funds for Project Request \$ _____

Purpose of the Funding (Brief Statement): _____

Date Application Submitted: _____

JLS Use Only

Date Received: _____

Tax-Exempt: Yes No

Assigned To: _____

10. List the goal(s) of the program or activity and the objectives by which each goal will be achieved.

11. Please complete the following table listing the volunteer positions requested, the number of volunteers required, and the amount of funding needed for the program.

	Year 1	Year 2*	Year 3*
Volunteer Titles			
Funding			

*Multi-year programs must have adequate justification for extending beyond one year.

Volunteer Position Form

ATTACHMENT A

Complete a Volunteer Position Description Form (Attachment A) for each of the positions listed on the chart.

Volunteer Position:

Description of Activities Volunteer will perform:

Number of Hours required per week or month:

Day(s) of week required:

Training your agency is willing to provide to the Junior League volunteer (please describe training, duration, and time commitment required):

Any other information you would like to provide regarding this volunteer opportunity:

A. Is this a new program or activity? (check one) Yes No

B. If this is an ongoing program, please provide a brief history.

12. Are there similar programs or services in the Springfield area? If yes, what is the justification for this request?

18. Has this organization previously sought JLS funding for a grant or project? If yes, please indicate for what program or activity, when, and the amount of the award?

19. If the Junior League of Springfield is unable to fully fund the program or activity, is the applicant organization willing to negotiate a lesser amount? (Check One)

Yes

No

OTHER INFORMATION

20. Please list the members of your board of directors or attach a list.

21. Describe how the applicant organization will make the community aware of the JLS role in funding the program or activity (e.g., brochures, advertising, etc.).

22. If you received funding from JLS in the past, attach examples of how the Junior League was publicly acknowledged for its contribution.

23. Each month, Junior League members provide needed supplies for a local organization through our Done-in-a-Meeting program. Do you have any items for which you are in need or anticipate needing? If so, please describe and provide a timeline for when you normally request these items for your programs.

24. Would you or someone you know be interested in joining The Junior League of Springfield, Inc.? If so, please provide their name, address and phone in the blanks and your information will be forwarded to JLS Membership.

APPLICANT CERTIFICATION

To the best of my knowledge, the information and statements made in this application are true and accurate.

Signature

Title

Typed Name

Date