

APPLICATION FOR A SPECIAL PROJECT REQUEST INSTRUCTIONS & GENERAL INFORMATION

1. The Junior League of Springfield, Inc. will award a total of \$10,000 for special projects to support community organizations during the next year.
2. Project money will be awarded with preference projects consistent with The Junior League of Springfield's mission (below) and and/or [JLS Position Statements](http://jlsil.org/about/about.htm) (see <http://jlsil.org/about/about.htm>)

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/or volunteers for a particular endeavor for community organizations.
4. Applicant organizations must be tax-exempt, not-for-profit organizations (please attach a copy of your Statement of 501(c) (3) tax-exempt status).
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/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 7, 2011**, someone should be at the headquarters to accept your hand-delivered applications from 8:30 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 7, 2011. All mailed applications must show a postmark date of **November 7, 2011**.
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) Compatibility with the Junior League of Springfield's mission and/or [JLS Position Statements](http://jlsil.org/about/about.htm) (see <http://jlsil.org/about/about.htm>)
 - b) Community impact of the project
 - c) Appropriate use of JLS funds
 - d) Public recognition of JLS
 - e) Applicant characteristics
 - f) Potential for community awareness
 - g) Quality of the proposal
 - h) Completeness
14. Applicant organizations will be notified of approval status in March of 2012. Approved projects will be publicly announced in **April 2012**, following execution of a contract between the Junior League of Springfield, Inc. and the organization. Projects should take place June 2012-May 2013.
15. 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.



SPECIAL PROJECTS APPLICATION
2011-2012

Instructions: See previous page

Program/Activity Name, if applicable:	
Applicant Organization:	
Mailing Address:	
Telephone:	Website:
Name of Contact Person:	Contact Telephone:
Contact Person Email Address:	
Anticipated Funding from JLS: \$	# of JLS Volunteers for Project Request:
Anticipated length of JLS involvement:	
Tax-Exempt: <input type="checkbox"/>Yes <input type="checkbox"/>No	Federal Employer Identification Number (FEIN):
Program/Activity Summary:	
Attached:	<input type="checkbox"/> Statement of 501 (c) (3) Tax-Exempt Status <input type="checkbox"/> Members of your Board of Directors <input type="checkbox"/> Examples of public acknowledgement of previous JLS Contributions (if applicable)

JLS Use Only

Date Received: _____

Tax-Exempt: Yes No

Assigned To: _____

APPLICANT INFORMATION

1. **What is the purpose of the organization?**

ACTIVITY/PROGRAM INFORMATION

4. **This program will :**
 - Establish a new activity/program
 - Expand an existing activity/program
 - Support an existing activity/program
5. **If this is an existing activity/program, please provide a brief history of the activity/program:**
6. **Population served by this activity/project (including estimate of people who will be served):**
7. **Evidence of community need for this activity/project:**
8. **How does this activity/project meet this need?**
9. **What is the geographic service area for the program or activity?**

10. What is the timeline or schedule for this program or activity?

11. List the goal(s) of the activity/program and the objectives by which it will be measured.

12. What methods will be used to evaluate the effectiveness of the activity/project?

13. List other agencies or organizations in the community addressing this need:

14. 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 and must re-apply for funding.**

For any volunteers required, please complete and submit the Volunteer Position Form (Attachment A)

OTHER INFORMATION

20. 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.).
21. 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.
22. 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

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: