

PROJECT REQUEST FORM
JUNIOR LEAGUE OF TYLER, INC.

2012-2013



The Junior League of Tyler, Inc., through its Community Coordinating Committee, is accepting requests for project funding and/or volunteer placement from non-profit organizations, community agencies and service providers for funding for the year beginning June 1, 2012. The Junior League seeks to impact the community by providing monetary and volunteer support to those projects which address a demonstrated community need, which employ rigorous standards of planning and performance, and which offer challenging and meaningful volunteer opportunities for its members.

The Junior League of Tyler, Inc. is an organization of women committed to promoting voluntarism and improving communities through the effective action and leadership of trained volunteers. Its purpose is exclusively educational and charitable.

This application is now in a word document format and may be saved to a file and completed at your discretion. All project requests for 2012-2013 must be received **on or before September 1, 2011**. Early submission of request forms will allow thorough investigation and consideration of the proposed project. Late applications will not be accepted. **Please submit 4 copies** of the application and required supporting documentation, along with a disc containing 5-10 high quality digital photos. If you complete your application as a Word document, please e-mail a copy of your application to community@juniorleagueoftyler.org. Inquiries and requests should be directed to:

COMMUNITY COORDINATING COMMITTEE

For Office Use: Date Rec'd: _____ A/E H/S YFI

JUNIOR LEAGUE OF TYLER, INC.
1919 S. Donnybrook Tyler, Texas 75701
(903) 595-5426

JUNIOR LEAGUE OF TYLER, INC. PROJECT REQUEST FORM

Please answer as briefly and concisely as possible. Long responses may not receive our full attention due to the volume of requests we receive. Thank you for your understanding.

SECTION I GENERAL INFORMATION

Agency or Organization:

NAME OF PROJECT:

Mailing Address:

Contact Person:

Phone:

Email contact:

BRIEF PROJECT DESCRIPTION:

FUNDING

Amount of money requested from Junior League:

Date/timetable money needed (on or after June 1, 2011):

Has the agency submitted a request to JLT for funding within the past 3 years?

If so, when and amount granted:	2011-2012	\$
	2010-2011	\$
	2009-2010	\$

What is the total amount of Junior League funding in the past 10 years?

VOLUNTEERS

Total number of hours/volunteers requested from Junior League:

Should this funding request not be granted, would you like to have your request for volunteers considered further?

SECTION II
PROJECT INFORMATION

1. What community need will this project meet? Mention surveys or other indications of this need.
2. What other community agencies or groups are providing the same or similar services or are attempting to solve the same community problems?
3. What role would the Junior League play in this project?
4. State your plans for evaluation and appraisal of project.
5. Who is ultimately responsible for the administration of this project?

Individual

Title

6. How many clients will be served?

How are they selected?

How will the clients receive this service?

What geographical areas are primarily served?

SECTION III
AGENCY/ORGANIZATION INFORMATION

1. Please give a brief history/description of the agency (**include copy of 501©(3) documentation**).
2. Please attach a list of your Board of Directors.
3. Please attach the projected budget for this project including an itemized account of how the money is to be spent.
4. Describe non-League funds to be used for this project (federal funds, state funds, seed money, funds from community agencies, etc.).
5. What community resource can assume financial responsibility for this project upon completion of the Junior League commitment? At what point in the future do you see this project capable of generating its own funds?
6. Please attach a copy of your most recent agency/organization financial statement showing all current sources of funding.

**SECTION IV
VOLUNTEER OPPORTUNITY FORM**

OFFICE USE LG.PR./CO.PR./PLCMT PROJ. NAME _____ PG ASSIGNED _____
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(Please complete a separate form for each volunteer placement opportunity.)

AGENCY NAME:

PERSON RESPONSIBLE FOR TRAINING, SUPERVISING AND EVALUATING VOLUNTEERS:

NAME:

PHONE:

VOLUNTEER JOB TITLE:

MINIMUM NUMBER OF VOLUNTEER HOURS NEEDED FOR THIS PLACEMENT OPPORTUNITY (1 VOLUNTEER EQUALS 50 HOURS):

JOB DESCRIPTION:

PLACEMENT OBSERVATION:

We realize that because of agency policy and/or confidentiality requirements the observation of some placements by other League members is impossible. Please indicate your preference below:

NO OBSERVATION PLEASE OBSERVATION IS FINE

TRAINING DESCRIPTION:

Date of the training:

Time of the training:

Location of training:

REQUIREMENTS AND/OR SKILLS NEEDED BY VOLUNTEER:

List any other groups helping you in a volunteer capacity:

SECTION IV (continued)
VOLUNTEER OPPORTUNITY FORM

TIME COMMITMENT:

Indicate if this volunteer placement will have **STRUCTURED HOURS**, will be **TASK-ORIENTED**, or be a **ONE TIME COMMUNITY PROJECT TEAM OPPORTUNITY**. Check the time block(s) which are **POSSIBLE** for this placement and fill in days of the week and times of day you would need volunteers. **Be as specific as possible**. Please **STAR** your preferences if you have them. You must have a structured/task oriented opportunity, but we encourage you to also identify a Done in a Day opportunity. **NOTE:** Summer placements end when TISD resumes classes.

STRUCTURED HOURS (specific day and time):

Choose Timing of Placement from dropdown menu:

- YEAR LONG (SEPTEMBER-MAY) – ONE 2 hour shift per week**
Days of week possible:
Times of day possible:
- SUMMER (JUNE - AUGUST) – TWO 2 hour shifts per week**
Days of week possible:
Times of day possible:
- FALL (SEPTEMBER - DECEMBER) – TWO 2 hour shifts per week**
Days of week possible:
Times of day possible:
- SPRING (JANUARY - MAY) – TWO 2 hour shifts per week**
Days of week possible:
of day possible:
- OTHER (DESCRIBE FULLY with days and times available):**

TASK-ORIENTED (work at own pace to complete task):

- YEAR-LONG (SEPTEMBER - MAY or JUNE - MAY)**
- SUMMER (JUNE - AUGUST)**
- FALL (SEPTEMBER - DECEMBER)**
- SPRING (JANUARY - MAY)**
- OTHER (please be specific)**

Community Project Team Requests

The Junior League of Tyler, Inc. would like to offer additional opportunities for our Community Project Team volunteers to help your agency. The Community Project Team can accomplish projects that are event based (for example, one-day help needed for an event such as Day for Kids in Bergfeld Park) or are less than 50 hours (for example, 2 or 3 Community Project Team (CPT) members help organize your awards banquet).

CPT Opportunity:
CPT Opportunity Date:
CPT Opportunity Time:
CPT Opportunity Location:

SECTION V

Are you willing to enter into a written contract with the Junior League of Tyler, Inc.?

By: _____

Date:

Name Printed:

Title: