



2010 SMALL GRANT GUIDELINES AND APPLICATION

The Komen Columbus Small Grants program allows the affiliate to fund short-duration programs, conferences and travel scholarships that meet our priorities. Small grants also allow us to fund projects that are innovative and often, riskier, than our annual Community Health grants.

Komen Columbus Mission priorities are based on our Community Profile needs assessment, for 2010-2011 the following priorities will be considered when making funding decisions:

1. Screening of high-risk and underserved populations, especially focusing on women over the age of 40
2. Breast health education programs, with a screening referral included
3. Treatment; and survivorship issues that require medical treatment or assistance
4. Survivorship wellness and support programs.

Restrictions: Organizations may submit multiple small grant applications throughout the year; however, once funded, a program may not resubmit for additional funding within the same fiscal year. Rejected proposals may be resubmitted for a second consideration within the same fiscal year, but will not be considered a third time.

Applications may be submitted at any time throughout the year; however, please note that applications will be reviewed and funding decisions will be announced on a quarterly basis. Applicants should consider the following schedule when submitting a proposal and/or planning their program and submit proposals at least two weeks before the following decision dates to be considered for that quarter.

Funding Decision Dates:

April 16, 2010

July 16, 2010

October 15, 2010

January, 14, 2011

Please submit all applications to:

Susan G. Komen for Cure – Columbus Affiliate

Attn: Megan Knapke

855 Grandview Avenue, Suite 250

Columbus, Ohio 43215

614.297.8155 x4

AND

outreach@komencolumbus.org

SMALL GRANT PROGRAMS:

Small grants are intended to support pilot projects and programs that do not necessarily require a full-year of funding. Small Grants are NOT intended to support proposals that are simply smaller versions of an annual grant proposal.

Small grants CAN be used to fund medical services for individuals (e.g., mammograms, ultrasounds) but must be provided through a program operated by a 501 (c)(3) organization or non-profit government agency.

Funding requests must meet the following criteria to be considered for a small grant program sponsorship:

- Specific to breast health/breast cancer and meets one of the Komen Columbus priorities stated above
- Total request is less than \$10,000
- Willingness to acknowledge support of the Komen Columbus Affiliate
- Willingness to report financial and program progress to Affiliate
- Willingness to allow participation of Affiliate representative where appropriate
- Request does not support a fund-raising activity, food, giveaways/gifts or equipment costs
- Salaries, if requested, are for personnel related to this project only and not the general work of employee. Preference will be given to programs willing to provide matching/in-kind support of salary and personnel requests
- Applicants must be a U.S. nonprofit (federally tax-exempt with 501 (c) (3) status) organization, e.g., nonprofit organizations, educational institutions, government agencies, and Indian tribes are eligible
- Services must be provided to women/men in *Columbus Affiliate service area*
- Reimbursement rates for patient services provided by the program should be based on current Medicare/Medicaid rates.

SMALL GRANT PROGRAM applications must include all items listed below and should be presented in the same order:

1. Completed cover page
2. Narrative including the following (2 page maximum):
 - a) Purpose of funding request
 - b) Project goals and objectives, including number of participants to be served by program
 - c) Timeline
 - d) Other participating sponsors/organization
3. Detailed budget and budget justification
4. Proof of non-profit status

CONFERENCE GRANTS:

Conference grants support local scientific or educational conferences, symposia, and meetings, with an emphasis on events that enhance the interaction among the advocate, healthcare, and scientific communities.

Funding requests must meet the following criteria to be considered for conference sponsorship:

- Specific to breast health or to helping further the body of knowledge related to research, diagnosis, treatment, education, and/or other issues related to breast cancer
- Total request is less than \$10,000
- Willingness to acknowledge support from Komen Columbus Affiliate in all printed materials
- Willingness to allow participation of Affiliate representatives where appropriate
- Complimentary registration for at least two (2) Affiliate representatives
- Display area, where appropriate
- Willingness to provide a conference report following attendance, including the number of participants, evaluation of program, and impact of Affiliate sponsorship and participation.

CONFERENCE GRANT applications must include all items listed below and should be presented in the same order:

1. Completed cover page
2. Narrative including the following (2 page maximum):
 - a) Conference program outline
 - b) Target audience and number expected to attend
 - c) Specific sponsorship opportunities (i.e., represent the Affiliate at events, on panels, or as speakers, where appropriate; complimentary registration provided for at least two Affiliate representatives; exhibit space in visible, conspicuous location)
3. Detailed budget and budget justification
4. Proof of non-profit status

TRAVEL SCHOLARSHIP:

Travel scholarships support travel for grantees, health care professionals, and advocates to attend, participate in and/or present at meetings, conferences, or symposia that would increase the community knowledge of breast health and breast cancer and facilitate the exchange of ideas and communication between the scientific and lay public.

Funding requests must meet the following criteria to be considered for a travel scholarship:

- Relevant to breast health/cancer
- Total request is less than \$1,000 domestic or \$2,000 international (to include registration, coach airfare/train/mileage, moderate hotel [room and taxes only], meals, cab fare, and tips)
- Willingness of applicant to quantify participation and benefit to community
- Applicant must attend at least half of the conference sessions or apply for and successfully complete the continuing education credits offered
- Willingness to submit a written report or presentation to the Affiliate after the conference

TRAVEL SCHOLARSHIP applications must include the items listed below and should be presented in the same order:

1. Completed cover page
2. Narrative including the following (2 page maximum):
 - a) Conference goals and/or program outline
 - b) Statement of how program is relevant to breast health
 - c) Specifics of participation and benefit to traveler describing ability and intention of traveler to spread information to Komen Affiliate service area
3. Letters of recommendation from partnering organization(s), if applicable
4. Detailed budget and justification



2010 SMALL GRANT PROGRAM APPLICATION



Project Director & Title _____

Institute _____

Address _____

Phone () _____

Fax () _____

Email _____

Title of Project/Conference _____

Total Amount Requested _____

Signature & Title of Approving Personnel
(other than Program Director) _____

Name & Title of Approving Institutional Personnel *(typed)* _____ Date _____

Small Grant Program **Conference Grant** **Travel Scholarship**

Small Grant Type:

- _ Education
- _ Screening
- _ Treatment
- _ Survivorship Wellness Program

Date(s) of program activities:
Expected date of completion:
(Final report is due within 30 days of this date)

DETAILED BUDGET FOR ENTIRE BUDGET PERIOD						
PERSONNEL <i>(MUST BE SPECIFIC TO PROJECT)</i>		TYPE APPT. (MONTHS)	% EFFORT ON PROJECT	BASE SALARY	DOLLAR AMOUNT REQUESTED	
NAME	ROLE ON PROJECT				SALARY REQUESTED	TOTALS
SUBTOTALS						
SUPPLIES (ITEMIZE BY CATEGORY & PROVIDE PRICE PER ITEM WHEN POSSIBLE)						
EQUIPMENT (NOT TO EXCEED 30% OF DIRECT COST)						
TRAVEL						
PATIENT CARE COSTS		INPATIENT				
		OUTPATIENT				
OTHER EXPENSES (ITEMIZE BY CATEGORY)						
<i>Total Funding Request</i>						



PROGRAM DESCRIPTION/NARRATIVE
(2 PAGES MAXIMUM)

- a. Purpose of funding request
- b. Project goals and objectives
- c. Benefit to Komen Columbus Affiliate
- d. Timeline
- e. Other participating sponsors/organization

[Attach proof of non-profit status to your application [IRS 501 (c) (3)documentation]