

**The Marshall Home Fund
2020 Program Grant Application Form**

DUE MARCH 13, 2020

Part One: Organizational Information

Use this form to provide information about your organization.

Name of Sponsoring Organization:

Name of Executive Director:

Phone:

Email:

Mailing Address:

City/State/Zip:

Name of primary contact for MHF grant, if different from above:

Phone:

Email:

Organization's Web Site Address:

Does your organization have 501(c)(3) status? If so, Federal Tax ID No:

Did you receive a program grant from the Marshall Home Fund in 2019?

If yes, have you submitted your 2019 Evaluation Form?

If you haven't yet submitted the form, you must attach a copy to this application. *(For a blank 2019 program grant evaluation form, visit the [grants page](#) of our website or contact info@marshallhomefund.org)*

Signature of Applicant's Representative:

Date Signed:

Print Name of Person Signing as Applicant's Representative:

Part Two: Description of Proposed Program

Please **use this form** to describe the activities/ workshops/ classes to be provided with an MHF grant. Use no more than 3 pages for Part Two.

1. Name of the program you plan to offer older adults with the MHF grant:

Goal and Type of Services

2. In one sentence, describe the goal of the program you plan to offer:

3. **How will you contribute to an Age Friendly Community?** The MHF supports efforts to make Watertown an [age friendly community](#), ie, one where older adults can live and thrive. Which one element of an age friendly community best describes the goal of your program (*Pick one*):

- Social participation:** Provide group activities for older adults that are accessible, affordable and fun
- Respect/ Inclusion:** Help groups of potentially isolated older adults integrate into the community
- Community and health services:** Provide quality, affordable health, mental health, and social services to individuals
- Housing:** Increase and improve housing options for older adults
- Transportation:** Provide older adults with a variety of safe and affordable alternatives to driving their own car
- Indoor and outdoor public spaces:** Green spaces, safe streets, sidewalks, outdoor seating and accessible buildings that can be used and enjoyed by all
- Communication:** Use a variety of means to let people know the services and programs that are available in the community
- Civic Engagement:** Provide older adults with opportunities for paid and/or volunteer work
- None of the above**

4. What are the specific activities you will offer in order to meet your goal(s)?

5. **Will you partner with other community organizations to deliver your program?** If so, which organizations and what will their role be?

6. How will you advertise your program to older adults in the community?

7. **What steps, if any, will you take to reach out to and engage older adults who make up Watertown's diverse population**—eg, people with low incomes; members of various racial and ethnic groups; people with cognitive and physical disabilities; people who are LGBT?

8. In what ways do you make your programs accessible for people with disabilities related to mobility, hearing, or vision?

Program participants/recipients

9. Are you providing events/ classes etc. for groups of older people? Yes ___ No ___
If YES:

9a. How many events/ classes etc. do you plan to provide over the course of the year, using your grant funds?

9b. Approximately how many older adults do you expect to attend each event/class?

9c. Do you expect people of other ages will attend the events/classes? If so, describe these other participants.

10. Are you providing direct services for individual older adults? Yes ___ No ___
If YES:

10a. How many individual older adults do you plan to serve over the course of the year?

10b. Approximately how often do you plan to see each person you serve? (e.g., One time only; Once a week over a period of 10 weeks; Several times a year; etc.)

10c. Will you provide services to the family members of the older adults you serve? If so, describe the services you'll provide family members:

Tracking and Evaluation

11. How will you know if you met your project's goal?

12. How will you track the number of people you reach with your MHF grant?

13. Will you use any other method to determine the impact of your services on your program's participants (e.g., collect anecdotes; ask participants to fill out an evaluation or survey; etc)? If so, describe the method(s) you will use.

Costs

- 14. **Total project budget** (Put budget details in Part Three below):

- 15. **Total amount requested from Marshall Home Fund:**

- 16. **Other sources of funds you expect to have available for these services:**

- 17. **Have you received a grant from MHF in the past? If so, indicate when and the amount.**

Other

- 18. **Is there anything else you'd like us to know about your proposed project?**

Part Three: Project Budget

Please attach a proposed budget showing your expenses, amounts MHF would cover, and other expected sources of funds.

Submission Guidelines

**Signed applications and any attachments must be submitted electronically
(Word documents or PDF files) to info@marshallhomefund.org**

Application Deadline: March 13, 2020

Questions?

**Contact info@marshallhomefund.org or
Call: Chris Miara, MHF Administrator at 781-307-0085**