

2017 Proposal Guidelines

Our grant awards are for charitable projects, programs and initiatives that improve the health and well-being of individuals of all ages in Central and MetroWest Massachusetts. Our average grant size is \$5,000. Health and wellness initiatives focused on serious public health issues, such as the opioid crisis, mental health/behavioral health services for children and youth, are favored. Additional health-focused priorities as identified in the Central MA or MetroWest area C.H.I.P.s will also be considered.

Non-profit, tax-exempt 501(c)3 organizations based in Reliant Medical Group's primary service area may apply (see map on the final page). Organizations without tax-exempt status may apply through an established non-profit, tax-exempt organization that agrees to provide fiscal oversight. No grants will be made directly to individuals, public or for-profit businesses.

Capital campaign requests, event sponsorships*, field trips, pageants, sports team requests and requests that support a single individual are not accepted. We do not typically fund salaries or licensing fees.

Please send proposals or direct inquiries to:

Kelsa Zereski, Director Reliant Medical Group Foundation 100 Front Street, 6th Fl Worcester, MA 01608

(508)368-5498

www.reliantfoundation.org

* If your organization is looking for an <u>event sponsorship</u>, please <u>do not</u> apply through our Foundation. Instead, go to: <u>www.reliantmedicalgroup.org</u>, under the "Our Community" section to learn about submitting an event sponsorship request to Reliant Medical Group.

Reliant Medical Group Foundation Community Grants

PROPOSAL GUIDELINES

<u>Deadlines</u> – proposals from non-profit organizations requesting funding from the Reliant Foundation **must be received by 4:30 pm on October 5, 2017**, for consideration during our 2017 grant review period.

Proposals that conform to all guidelines are typically considered within six (6) weeks after proposal submission deadline. Consider mailing your proposal in early so that we have ample time to review it.

- 1. Please prepare a one-page cover letter that includes the complete name of your organization, a brief summary of your request and the amount you are requesting. This letter should be signed by the Executive Director or President of your organization.
- 2. Please include contact information, including a phone number, for the individual who should be notified of our committee's decision, especially if different from the individual who signs your letter of request.
- 3. Your written proposal should be no fewer than one (1) and no more than four (4) typed pages and should include the following information, or answer the following questions:
 - a. State the name of the project or initiative. What health-related needs or challenges does this effort address in our community or region?
 - b. How does your program or initiative relate to the Reliant Foundation's mission and/or its focus on serious public health issues such as the opioid epidemic or access to mental health services?
 - c. How many individuals or families do you hope to reach through your efforts?
 - d. Offer some brief information about your typical constituents, the geographic communities you are supporting, and any collaborative partners involved with this proposal.
 - e. If you have volunteers assisting you with this program or initiative, please include an estimate on the number of volunteer hours being donated.
 - f. What are the projected goals or outcomes of this effort?
 - g. How will you measure your success?
 - h. Explain how this program or initiative might sustain itself in future years if it receives funding.
- 4. Please include the following items with your proposal: **a.**) a one (1) page budget for your project, program or initiative

- **b.**) a list of your current Board of Directors
- **c.**) a copy of your official 501(c)(3) letter
- **d.**) a copy of your most recent audited financial statement
- e.) a copy of your most recent annual report
- 5. List any previous support your organization has received from Reliant Medical Group or Reliant Medical Group Foundation (formerly Fallon Clinic Foundation) in the last three years. Please list the amounts and dates received.
- 6. Send <u>one</u> copy of your completed cover letter and proposal, with <u>one</u> copy of the other accompanying items requested to:

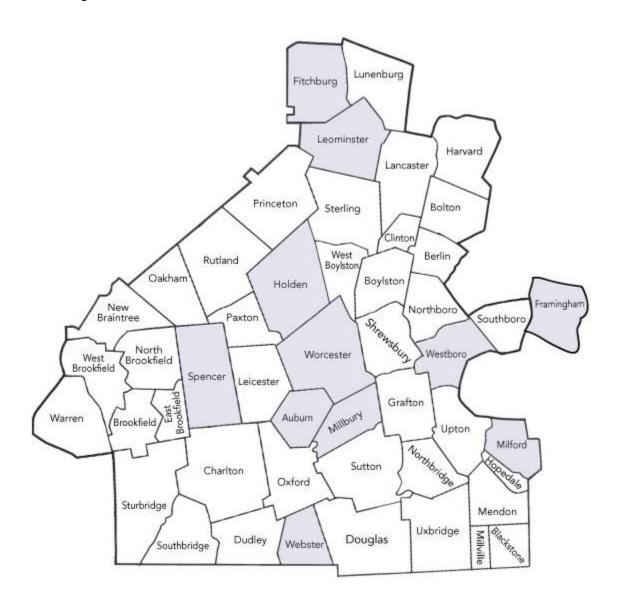
Reliant Medical Group Foundation 100 Front Street, 6th Fl Worcester, MA 01608

- 7. Materials submitted after the deadline may be considered in the next application cycle. In some cases, late or incomplete submissions will be automatically rejected.
- 8. Notice of the Charitable Grants Committee's decision is typically made in writing within six (6) weeks of our stated proposal deadline.
- 9. A brief project report giving updates and initial outcomes within six months of the grant award letter date is required in order to qualify for future funding.

Please note: Applications that do not conform to the guidelines listed above are not likely to be considered.

Please see the service map on the following page to see if your charity is eligible to apply.

Please see the map below of Worcester County and parts of Metro West, displaying Reliant Medical Group's core service area. Our businesses are located in the towns shaded in purple. Funding priority will be given to non-profit organizations located in and serving these areas.



Thank you for your interest.