

The James T. and Betty Coffey Fellowship Fund



Ohio Lions Clubs & Lions Clubs International Youth Outreach Programs Grant Application

PURPOSE:

The purpose of the James T. and Betty Coffey Fund is to award grants to schools and other youth development organizations, in order to provide as many children as possible programs that promote drug and violence prevention, life skills and learning opportunities, and to ensure that young people are actively engaged in significant service and service learning activities.

GRANT CRITERIA:

Schools or other Youth Support Organizations willing to meet the following criteria will be eligible for a grant award:

1. Demonstrate that the intended use of the grant by the recipient is to conduct a program or project that encourages and includes young people (6-18) in a life skills, citizenship, drug or violence prevention, and/or community service project or program.
2. Demonstrate the approval and support of the proposed use of the grant, by the appropriate school administrator, or executive of the youth organization.
3. Willing to consider partnering with a local Lions Club in a joint service project.
4. Plan a project briefing session with the Lions Club and other community representatives.
5. Submit an article, with photograph(s) about the project/program, to a local news media outlet, and send a copy of the same to the Ohio Lions' State Office at 4074 Hoover Rd., Grove City, Ohio 43123.
6. Provide public recognition to the Ohio Lions and the Local Lions Club for their participation and support.
7. Demonstrate qualification as an exempt and/or IRC §501(c)(3) organization, and provide the Ohio Lions administering agent (The Ohio Lions Foundation) a copy of its most recently filed I.R.S. Form 990, together with a copy of its I.R.S. determination letter.

MAXIMUM GRANT AMOUNT:

The maximum amount of each grant awarded shall be \$500.

GRANT DEADLINES:

The administering agent of the Coffey Fellowship Fund shall review grant applications annually.

Timelines for submission are as follows:

Granted Program Timeline: January 1 until June 30 (2nd Semester Academic Period)

Deadline for Submission: October 1

Notification Period: By December 31

RETURNING GRANT APPLICATIONS:

Grant applications should be mailed to: The Ohio Lions State Office
4074 Hoover Road
Grove City, OH 43123
Attention: COFFEY GRANT PROGRAM

Email applications may be sent to: lionoffice@gmail.com

Faxed Applications (614) 539-5055 – (The original grant application
(For Deadline Purposes Only): should still be mailed to the listed address.)

QUESTIONS:

Questions regarding the Grant Application process and/or criteria can be answered by contacting the Ohio Lions State Office, Monday, Wednesday and Friday from 9:00 a.m. until 1:00 p.m. at (614) 539-5060. Tuesday and Thursday office hours vary.

GRANT APPLICATION DETAIL:

Please complete thoroughly and in as much detail as possible the application on the following page. Attach additional explanatory materials as necessary. Please type or print legibly. Applications with items left blank on the application may be subject to non-consideration.

**The James T. and Betty Coffey Fellowship Fund
Ohio Lions Clubs – Lions Clubs International
Youth Outreach Program
Grant Application**

ADMINISTRATIVE INFORMATION:

Date: _____

Name of School or Organization Applying for the Grant: _____

Address of School or Organization Applying for the Grant: _____

Is the Applicant a Public School? _____ If not, what type of Organization? _____

If not, provide organization Tax ID# & IRS Tax Exempt determination: _____

Name/Title of Coordinating Individual: _____

Address of Coordinating Individual: _____

Contact Information of Coordinating Individual:

Daytime Phone: _____ Email: _____

PROGRAM INFORMATION:

Grant Amount Requested: \$ _____ Formal Program Name: _____

Date(s) of Program: Estimated _____ Number of Youth Involved/Impacted: _____

Program Description: _____

Name of Local Lions Club: _____ Club Contact: _____

Club Address/Contact Information: _____

Has The Local Club Been Contacted and are They Aware of The Application? _____

Manner in which Local Lions Club Will Assist in Program (if applicable): _____

AUTHORIZATION TO SUBMIT:

Printed Name of School Administrator/Youth Organization Director: _____

Signature/Title: _____ **Date:** _____