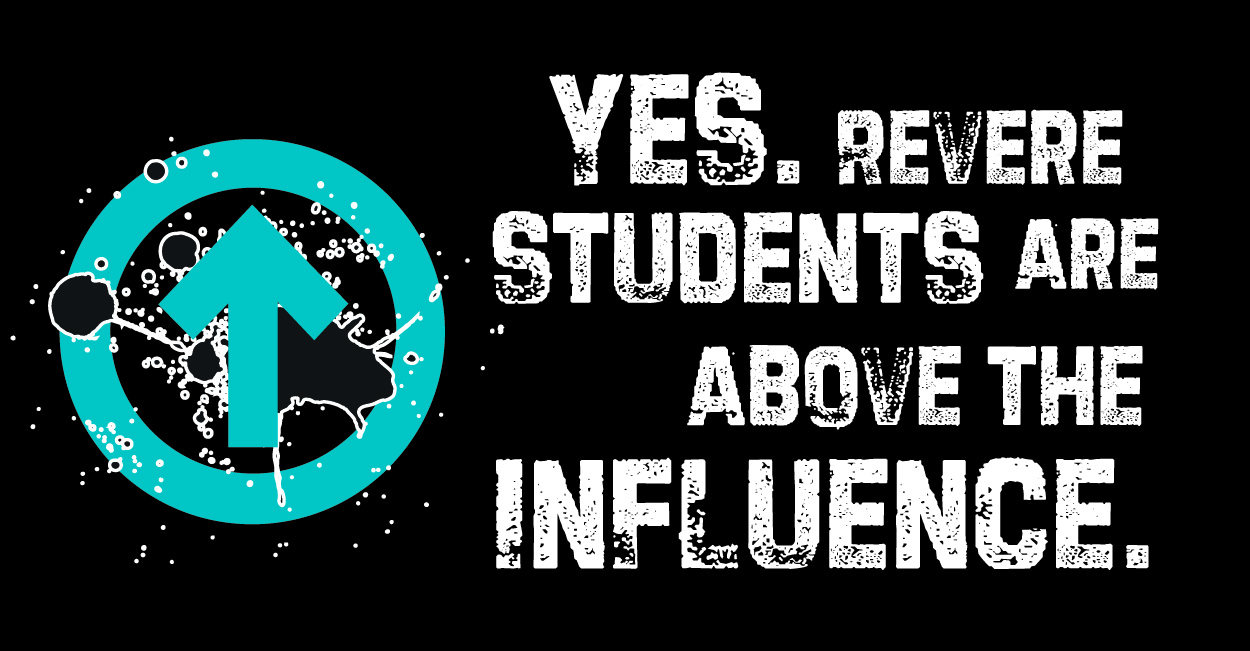
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Revere CARES Coalition

Alcohol, Tobacco, and Other Drug (ATOD) Prevention Initiative

Youth Lead Project 2016 Mini-Grant Application

**About the Revere CARES Coalition:**

The goal of Revere CARES is to improve the well-being of Revere’s residents by preventing substance abuse and promoting healthy eating, active living. We do our work by creating opportunities for residents, organizations, and community leaders to understand what affects the health of residents and partnering to find solutions that make Revere a healthy place for you and your family.

**Mini Grant Goal:**

Our goal for the mini grants is to provide community members an opportunity to apply for funds for activities, programs or projects to help young people make positive decisions for themselves, especially around not using drugs and alcohol. Schools, teachers, councilors, students, organizations, neighborhood groups and others are welcomed to apply.

**We are looking to fund the following**:

* **Mental Health Opportunities:** Students face many pressures on a daily basis and there is a connection between mental health and substance use. Propose ideas that help students manage their mental well being, or improve their skills at managing pressure and stress. Ideas could include: workshops on stress management, a peer-to-peer counseling group, physical activities for mental health or other creative ideas.
* **Above the Influence Activities or Art Project**: The coalition has adopted the national Above the Influence campaign for Revere. This campaign helps young people think about the positive and negative influences in their lives and encourages them to make good decisions for themselves, especially around not using drugs and alcohol. Over the years the coalition has done different campaign activities. Now you can too! We are looking for teachers, club leaders, or any other groups working with youth to implement activities from the Above Influence Campaign Toolkit. Examples include:
  1. What is Stressing You Out?: An activity to help youth reflect on what causes stress in their life and create a plan to manage it.
  2. Not Prescribed: An activity that address teen medicine abuse.
  3. Express it: An activity that calls on teens to create a short skit, song or dance that educates and inspires them and their peers to live Above the Influence.
  4. Art project: If you are working with a group of artistic youth, you can propose a project to be displayed in the community.

Download the Above the Influence toolkit to view all the activities you can implement with youth: <http://partners.atipartnerships.com/downloads-toolkits/>

* **Positive Alternative Activities:** Propose an idea for positive alternative activities that will keep youth engaged in a healthy manner. This can be a club or an ongoing activity. Using The Above the Influence message is strongly encouraged, but not required if there is a **clear** tie to substance use prevention or mental health improvement.
* **Innovative idea!:** Do you have an idea about a program, project or activity to engaged young people in a positive manner? Will this idea also encourage them to make good decisions for themselves especially around not using drugs and alcohol? Then this is your chance to apply for funds.

**Timeline:**

Applications are due Sunday, January 8th, 2016 at 11:59 pm.

You can expect to hear back on your application by February 1, 2017.

**Available funds:**

* In this round, we will be awarding up to $2,000 dollars.
* You may apply for any amount between $1 to $2,000 dollars as long as the amount is justified. The amount may be negotiated or adjusted by the review committee.
* The ATOD task force reviews all proposals, considers the total amount requested, impact, and other proposals and will try to fund as many ideas as possible.

**Let us help you:**

If you are interested in applying for a mini grant, you may schedule an appointment with the ATOD Task Force manager to review your idea and receive assistance filling out your application. Contact information is provided at the end of this document.

**Evaluation Criteria:**

The Mini Grant applications will be evaluated on the following criteria:

1. Level of impact (School/ City/Neighborhood/ Population Sub-Group. Other ripple effects? Special final big project or donation?- bonus points if yes)
2. Does your proposal meet the goal of supporting Revere youth in making positive decision or providing positive alternative activities?
3. How will you include the Above the Influence message?
4. Does the applicant show they are able to complete the project/activity?
5. Is the budget reasonable?
6. Is the project lead by a young person?

Note: For more info on how your proposal will be scored, see the rubric on the back of your application.

**Reporting Requirements:**

* At the end of each project you will be required to submit a brief report with your project results, number of participants, success and challenges and pictures.

**APPLICATION**

***General Information:***

Name of contact person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your neighborhood, school or community group: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**To apply for one of our mini-grants, please offer as much details as possible as you answer the following questions on a separate, typed document:**

1. Please describe your project/activity/program.
2. What is project/activity/program needed?
3. What do you hope to accomplish?
4. When will your project begin and end? Will it be a one-time event, several days, or ongoing?
5. How many youth/students will your proposal impact? Is your proposal as inclusive as possible of all ethnicities, religions, and abilities?
6. How will community members benefit from your project? How will this proposal support youth in making positive decisions?
7. Will there be big project or donation at the end?
8. Will your project/activity/program include the Above the Influence message? If so, how?
9. What persons/organizations will be involved and what will their roles be?
10. How will project achieved it’s goal?
11. How will you promote your efforts and show your results to others in the community?
12. What problems or obstacles might make this project difficult? How do you plan to address them?
13. If you are proposing an Above the Influence Activity art project, what is your plan to display the project? Will it be displayed at a school, government building, or local business?
14. Share how you will request support from school principals or administrators if needed.
15. Please attach a budget with an explanation of each expense.

Example: List of materials, vendors such as DJs, transportation.

The ATOD Task Force commits to provide grant recipients with timely technical assistance, including feedback on measures of success and connections to other community members and organizations who might be potential partners.

***If you have any questions or would like help on your application, please contact:***

**Viviana Catano-Merino**

ATOD & Communications Manager

MGH Revere CARES

MGH Revere Health Center

300 Ocean Avenue

Revere, MA 02151

[vcatano-merino](mailto:vcatano-merino)[@partners.org](mailto:srchiang@partners.org)

781-485-6440

**Mini Grant Application Review Rubric**

**Project/Proposal Name: Total Budget Amount: Total Score (Sum/25):**

*Please rank the application on the following criteria on a scale of 1-5, where: 1 = Not at all and 5= Absolutely*

|  |  |  |
| --- | --- | --- |
| ***Criteria*** | ***Rating*** | ***Explanations and/or Suggestions*** |
| 1. Does the proposal very clearly relate to preventing substance use or improving mental health? How? |  |  |
| 2. Will there be a high level of impact (# of people benefitted)? |  |  |
| 3. Is the budget reasonable? Any suggested modifications? |  |  |
| 4. Does the applicant show that they have the capacity to carry out their proposal? How? |  |  |
| 5. Are the Measures of Success Strong and Clear? What are they? |  |  |
| **Bonus.** Does the proposal incorporate elements of the Above the Influence Campaign?  (worth 2pts if yes) |  |  |