

Sample Application

This is a template application for the Medica Foundation Behavioral Health and Early Childhood Health funding areas. To submit a formal application, you must login to our online portal to complete and submit the appropriate application forms. Email submissions are not accepted.

Organization Information

Organization Name

Address

Phone Number

Website

Federal ID/Employer Identification Number (EIN)

What is your organization's primary mission? (Limit 100 words)

Provide a brief history of your organization, including the date your organization was established. Also, include the organization's current programs activities and key accomplishments. (Limit 300 words)

Organization Primary Contact Information (Chief Officer, President or Executive Director)

Proposal Primary Contact Information

Proposal Information

Project Title

Brief description of the project (limit 30 words)

Proposed Project Start Date

Requested Amount

Total Project Budget

Explain how you will use the Medica Foundation grant funds: Identify the specific components of the project that the grant dollars will support. (Limit 250 words)

Tell us the assumptions you made when developing your project budget and how you propose to fill any gaps. (Limit 250 words)



Explain how the scope of the project will change if the funds are not secured. (Limit 100 words)

Provide any additional information you would like us to know about your budget, funders, or financial situation. (Optional – Limit 100 words)

Summarize the need to support your proposed program. Provide community input and/or data to demonstrate the need for the project and the population served by it. Explain how the voice of the community is informing your work. We encourage you to include local community or state sources. (Limit 500 words)

Is this a new program? Yes/No

If no, explain how you will change the scope and/or reach of the existing program. (Limit 150 words)

Provide impact and outcome data from the existing program to support your request. We are seeking proven results to demonstrate and justify expansion. Demonstrated, measureable outcomes must be provided for expansion proposals to be considered. (Limit 250 words)

Provide a detailed program description. Include five key activities for the program (Limit 250 words)

How will you measure and evaluate the outcomes of this program? (Limit 150 words)

Will the grant-supported activity continue after the Medica Foundation grant ends? If so, describe your proposed ideas to address ongoing needs.

Number of people directly impacted by the program?

Number of people indirectly impacted by the program?

Explain how you arrived at the above numbers.

Coding Areas (drop-down menus in the application)

Program Focus

Population Served

Ethnicity

Age Group

Geographical Area Served