



January 17, 2012

Dear Potential Applicant,

Thank you for your interest in the Ronald McDonald House Charities® (RMHC®) grant program. Enclosed please find a grant application from RMHC of the Philadelphia Region, Inc. Also enclosed are the “Guidelines for Giving.”

To be considered for an RMHC grant, the application must be completely filled out, with all additional information attached. The application must be *postmarked by March 16, 2012* for review at the spring funding meeting. **Grants will not be considered for operating income or administrative expenses including salaries.** The funding maximum for any grant is \$25,000.

Thank you again for your inquiry about RMHC of the Philadelphia Region.

Sincerely,

Mike Anton, President,
Ronald McDonald House Charities of
the Philadelphia Region, Inc.

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PLEASE NOTE

Before preparing your application, please read and follow the instructions in "Guidelines for Giving." Please pay particular attention to the "Preparation and Submission" requirements.

All Materials submitted must be on 8 1/2' x 11" paper, single sided, black type, and capable of being easily duplicated. (No annual reports, spreadsheets, bound reports, etc.) Applications not prepared in this format will be returned.

Thank you for your interest in Ronald McDonald House Charities of the Philadelphia Region, Inc.

RONALD McDONALD HOUSE CHARITIES OF THE PHILADELPHIA REGION, INC.

- GUIDELINES FOR GIVING -

FUNDING CONSIDERATIONS

To be considered for funding, an organization must be designated as not-for-profit and tax-exempt as defined under IRS code.

Ronald McDonald House Charities (RMHC) of the Philadelphia Region, Inc. Board of Trustees is most interested in organizations that have:

- A program that directly benefits children under 21
- Consistent and effective management
- Clear goals and objectives
- A broad base of funding support
- A demonstrated ability to respond to the needs of specific groups of children in a manner that yields measurable results
- A need for funding the support of specific programs

RMHC DOES *NOT* FUND:

- General and administrative costs (including overhead)
- Ongoing salaries or travel expenses
- Advertising and fundraising drives
- Partisan, political, or denominational programs
- Intermediary funding agencies
- Endowment campaigns
- Scholarships/fellowships to individuals
- Medical research
- Fundraising sponsorships
- Requests that are not in writing
- Organizations who have received funding from the chapter within the last 12-18 months

THE FOLLOWING ARE *NOT* ELIGIBLE:

- Organizations not recognized by the IRS as a charity having tax exempt status under 501(c)(3), such as fraternal, social, trade, or political organizations, chambers of commerce and professional membership societies.
- Organizations that advocate for or against or otherwise provide direct or indirect support for or against any political campaign, individual politician, pro-life or pro-choice positions, or any other organization which reasonably takes a controversial stand on social issues.
- Religious organizations or programs aimed at promoting a particular faith or creed, or programs that are otherwise religious. *Programs that operate under the sponsorship of a religious organization that are separately incorporated as Independent, non-religious, tax-exempt organizations are eligible IF there is no requirement to participate in religious activities or no requirement to be of a specific religion to be eligible for services.*

- Organizations which discriminate with respect to membership and/or the provision of service or use of facilities.
- Private schools that are not accredited by one of the six nationally recognized regional accrediting commissions or one of the affiliates of the National Association of Independent Schools.

For clarity, educational Institutions that *are* eligible are:

- Degree-granting two-or four-year colleges or universities which are accredited by one of the six nationally recognized regional accrediting commissions.
- Pre-collegiate schools grades K-12 which are accredited by one of the six nationally recognized regional accrediting commissions.
- Pre-school programs which are affiliated with an accredited school or have a license.
- Public Schools
- Non-scholastic programs within educational institutions, such as athletics, bands, drill teams, booster clubs or other social associations.
- Groups which address issues, or which support others that address issues, by means of adversarial and confrontational tactics.
- Gifts TO or FROM a charitable gift fund, such as Fidelity Gift Fund, or a family fund, family foundation or other private foundation.
- Gifts, which, either standing alone or in conjunction with a Matching Gift, result in the donor or a specified individual receiving substantial benefits, excluding awards made through the RMHC U.S. Scholarship program or other education scholarship programs which may be supported by a local Chapter.
- Organizations under investigation, or reported to be under investigation, by any state, federal or foreign governmental authority.
- Organizations that disparage or otherwise run contrary to RMHC values or our donors' brand image.

PREPARATION AND SUBMISSION

Your grant proposal must be submitted in English and on an RMHC of the Philadelphia Region, Inc. grant application form. The application should include the check list along with the grant application form.

Type directly on the grant application form, single space and single-side pages only. You may duplicate the application form on your computer; however, it must look like our application, page for page. Use standard black type that can be photocopied. Draw all graphs, diagrams, tables and charts in black ink. Do not include any items that cannot be photocopied. **IF ANY OF THE ITEMS REQUIRED ARE NOT INCLUDED, YOUR APPLICATION WILL BE CONSIDERED INCOMPLETE AND THE REVIEW WILL BE DELAYED OR DECLINED.**

REVIEW PROCESS

- The Board meets to review, select and award grants to not-for-profit organizations, which have demonstrated an ability to respond to the needs of specific groups of children in a definitive, "hands-on" manner that yields measurable results.
- RMHC will acknowledge receipt of your proposal in writing within 30 days. If the Board has questions regarding your proposal, you may receive a telephone call or a letter requesting further information, or an appointment for a site visit.
- All Board decisions are reported by mail, generally within 14 days of the Board meeting.
- If your proposal is approved, your organization will receive a Letter of Agreement outlining the terms and conditions of the grant which must be signed by an authorized organization official and returned to RMHC. This letter will also highlight arrangements for awarding of the grant.

The recipient of any grant from RMHC must use the funds awarded for the specific purpose of their original intent. RMHC requires detailed accounting of all funds awarded. A follow-up report form is included with this application and must be returned to RMHC 12 months from the date of the award. It is understood that any funds not used in the manner specified in the letter of agreement will be returned to RMHC. Any request for a revision regarding use of funds must receive prior approval and be submitted in writing to RMHC.

PLEASE ADDRESS ALL CORRESPONDANCE TO:

Ronald McDonald House Charities
c/o Tierney
200 South Broad Street, 10th floor
Philadelphia, PA 19102

Phone: 215.790.4391
Fax: 215.790.4407

RONALD McDONALD HOUSE CHARITIES OF THE PHILADELPHIA REGION, INC.

- CHECK LIST -

PLEASE INCLUDE THIS CHECKLIST WITH YOUR APPLICATION

- 1) COVER LETTER**
- 2) McDONALD'S ENDORSEMENT LETTER** (not required)
- 3) GRANT APPLICATION FORM INCLUDING:**
 - A. NAME OF NOT-FOR-PROFIT ORGANIZATION**
 - B. TITLE OF PROJECT**
 - C. PROGRAM DIRECTOR/PRINCIPLE INVESTIGATOR**
 - D. MAILING ADDRESS, TELEPHONE NUMBER AND E-MAIL**
 - E. SPECIFIC AMOUNT REQUESTED**
 - F. PAST RECIPIENT INFORMATION** (if applicable)
 - G. SPECIFIC, ITEMIZED PROJECT BUDGET**
 - H. DESCRIPTION OF PROJECT**
 - I. TARGET AUDIENCE AND PERFORMANCE SITES**
 - J. OBJECTIVES AND AIMS**
 - K. EVALUATION**
 - L. ORGANIZATION BACKGROUND AND SIGNIFICANCE**
- 4) IRS 501 (c) (3) DETERMINATION LETTER**
- 5) FINANCIAL STATEMENTS INCLUDING:**
 - A. OPERATING BUDGET**
 - B. AUDITED FINANCIAL STATEMENTS AND/OR LATEST 990**
 - C. BALANCE SHEET**
- 6) PAST DONOR INFORMATION**
- 7) LIST OF BOARD OF DIRECTORS**

RONALD McDONALD HOUSE CHARITIES OF THE PHILADELPHIA REGION, INC.

- GRANT APPLICATION FORM -

A: NAME OF ORGANIZATION _____

LEGAL NAME
(as stated on 501(c)(3)) _____

TAX ID # _____

B: TITLE OF PROJECT _____

C: PROGRAM/DIRECTOR
PRINCIPLE INVESTIGATOR _____

PREFIX (Ms.; Mrs.; Mr.) _____

D: MAILING ADDRESS _____

CITY/STATE/ZIP CODE _____

TELEPHONE NUMBER
(include area code) _____

E-MAIL ADDRESS _____

E: SPECIFIC AMOUNT
REQUESTED FROM RMHC \$ _____

F: IS YOUR ORGANIZATION THE RECIPIENT OF A PREVIOUS RMHC GRANT?

_____ Yes _____ No

IF YES: _____
Date Amount

McDONALD'S ENDORSEMENT (not required)

McDONALD'S CONTACT _____

TITLE/POSITION _____

ADDRESS _____

CITY/STATE/ZIP CODE _____

TELEPHONE NUMBER
(Include area code) _____

G. SPECIFIC, ITEMIZED PROJECT BUDGET*

**This amount should match the amount listed in Section E (the specific amount you're requesting from RMHC; not your overall budget). For a list of qualified budget examples, please refer to the Guidelines for Giving.*

H: DESCRIPTION OF PROJECT

Provide a concise description of the need or problem to be addressed, the specific purpose of the funds requested and what is unique about your project/program. In addition, please select the organization type, type of support and program area from the columns below.

Organization Type: Select *one* organization type that most accurately describes your organization.

Academic/Education:

- College/University
- Elementary School
- Foundation/Education
- Head Start
- High School/Secondary School
- Learning Center
- Middle School/Jr. High School
- Preschool
- Special Needs School
- Other Academic/Education

Advocacy:

- Animal Welfare
- Child Abuse Prevention
- Civil Rights
- Court Appointed Special Advocate (CASA)
- Disabilities

Arts and Culture:

- Aquariums
- Dance
- Drama/Theater/Opera/Performing Arts
- Literary Arts
- Museum
- Music
- Public Television
- Visual Arts

- Zoo
- Other Arts, Culture, Humanity

Civic and Social:

- Adoption Agency/Foster Care
- Camp
- Child Care
- Community Center
- Counseling Center
- Drug and Substance Abuse
- Family Services
- Food Bank
- Foundation
- Fraternity/Sorority
- Group Home
- Guilds/League
- Homeless/Shelter
- Independent Living
- Law Enforcement
- Library
- Park District
- Preservation/Conservancy
- Pother Civic or Social Organization

Community:

- Athletics
- Boys & Girls Club
- Boys Club
- Girls Club

- Scouts
- YMCA
- Youth Organization
- YWCA

Health Care:

- Burn Center/Institute
- Disabilities
- Equestrian Center
- Federally Qualified Health Center – FQHC
- Health Center/Clinic
- Hospice Care
- Medical/Cancer Camps
- Other/Health Care
- Rehab Center
- Research Institutes
- Respite Care
- Specialty Care Center

Other:

- Disaster Relief/Emergency Services
- Government Agency
- Professional Association
- Religious Organization
- RMH Chapter
- RMHC Chapter

RONALD McDONALD HOUSE CHARITIES OF THE PHILADELPHIA REGION, INC.
- GRANT APPLICATION FORM -

Type of Support: Select *one* type of support that most closely aligns with your request.

- | | | |
|---|--|--|
| <input type="checkbox"/> Clinical Services | <input type="checkbox"/> Furniture | <input type="checkbox"/> Program/Project Support |
| <input type="checkbox"/> Conferences/Seminars | <input type="checkbox"/> General Operating Expenses/Non-Clinical | <input type="checkbox"/> Safety/Security |
| <input type="checkbox"/> Construction/Building/Renovation | <input type="checkbox"/> Medical Equipment | <input type="checkbox"/> Scholarships |
| <input type="checkbox"/> Curriculum/Training | <input type="checkbox"/> Medical Research | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Disaster Relief | <input type="checkbox"/> Multi-Media | <input type="checkbox"/> Temporary Housing |
| <input type="checkbox"/> Emergency Funds | <input type="checkbox"/> Non-Medical Research | <input type="checkbox"/> Transportation/Vehicle |
| <input type="checkbox"/> Expansion | <input type="checkbox"/> Production Expenses | <input type="checkbox"/> Tuition |

Program Area: Select *one* program area that most closely aligns with your request.

Arts, Culture & Humanities:

- Aquariums
- Dance
- Drama
- Literary Arts
- Museum
- Music
- Theater
- Other Arts, Culture, Humanity

Civic and Community:

- Camp
- Community Development
- Fire Safety
- Law Enforcement
- Library
- Playground
- Playroom
- Urban Renewal
- Other Civic and Community

Education:

- Curriculum/Materials
- English as a Second Language Program
- Field Trip
- Lekotek/Compuplay
- Literary Programs
- Scholarships
- Tutoring Programs
- Other Education

Disaster/Emergency Services:

- Refugee Assistance
- Relief Services
- Other Disaster/Emergency Services

Environment/Nature:

- Animal Welfare
- Green Program
- Nature Preserve
- Recycling
- Other Environment/Nature

Health/Medical:

- Adaptive Equipment
- Autism Programs
- Cancer/Medical Camps
- Dental Care Programs
- Medical Education
- Medical Procedures/Operations
- Medical Research
- Physical Impairment Programs
- Rehabilitation Program
- Screenings
- Sexual Health
- Vision Programs
- Visiting Professorships
- Other Health/Medical

Healthy Lifestyle:

- Athletics/Sports
- Nutrition
- Physical Recreation Programs
- Prevention Programs
- Other Healthy Lifestyle

Social Welfare:

- Bullying Prevention
- Child Abuse Prevention
- Child Care
- Child Safety/Security
- Clothing Programs
- Counseling
- Domestic Violence
- Food/Hunger Programs
- Foster Care
- Housing/Shelter
- Independent Living
- Legal Counseling
- Parenting Programs
- Other Social Welfare

Technology:

- Basic Computer Applications (i.e. word processing)
- Basic Computer Techniques (i.e. keyboard skills)
- Computer Hardware/Software
- Computer Safety
- Internet training
- Other Technology

Youth Development:

- Leadership Skills Development
- Mentoring
- Peer Support
- Recreation Programs
- Self-esteem Programs
- Other Youth Development

RONALD McDONALD HOUSE CHARITIES OF THE PHILADELPHIA REGION, INC.
- GRANT APPLICATION FORM -

I: TARGET AUDIENCE AND PERFORMANCE SITES

Please summarize your target population in measurable terms, including who the audience is, how many will be served, age of participants, their ethnicity, and the number and percentage who fall into specific ethnic groups (see breakdown charts below).

In addition to the target population summary, please complete the following:

Total number of children to be served: _____

Age group(s) served: _____

_____ % Infant/Toddler (0 – 3 years)	_____ % Adolescent (13 – 18 years)
_____ % Child (4 – 8 years)	_____ % Young Adult (19 – 21 years)
_____ % Youth (9 – 12 years)	_____ % Adult (21+ years)_____

Ethnicities served: _____

_____ % African-American	_____ % Hispanic-American
_____ % Native-American	_____ % Asian-American/Pacific Islander
_____ % Caucasian	_____ % Bi- or Multi-racial
_____ % Other	

Population served: Select the population most served by this grant request.

- | | | |
|--|---|---|
| <input type="checkbox"/> At-risk Youth | <input type="checkbox"/> HIV positive | <input type="checkbox"/> Persons with physical disabilities |
| <input type="checkbox"/> Development disabilities | <input type="checkbox"/> Homeless | <input type="checkbox"/> Physically abused |
| <input type="checkbox"/> Economically disadvantaged (underinsured) | <input type="checkbox"/> Ill and/or Injured | <input type="checkbox"/> Temporarily displaced |
| <input type="checkbox"/> General population | <input type="checkbox"/> LGBT/GLBT | <input type="checkbox"/> Uninsured |
| <input type="checkbox"/> Hearing impaired | <input type="checkbox"/> Orphan and/or Foster care | <input type="checkbox"/> Visually impaired |
| | <input type="checkbox"/> Persons with mental disabilities | |

J: OBJECTIVES AND AIMS

State the broad, long-term objectives and describe concisely what the program in this application is intended to accomplish.

K: EVALUATION

Indicate how your organization will evaluate the program if funded (i.e., survey, questionnaire, test results, etc.).

L: ORGANIZATION BACKGROUND AND SIGNIFICANCE

Briefly describe the background of your organization.

RONALD McDONALD HOUSE CHARITIES OF THE PHILADELPHIA REGION, INC.
FOLLOW-UP REPORT

(Required within one year of the date the grant is awarded.)

If your proposal is approved, you will be required to address the following questions within one year of the date the grant was awarded. This allows Ronald McDonald House Charities of the Philadelphia Region, Inc. to ensure RMHC grants are used to their fullest potential.

1. Has the need been met or the problem solved? Please include updated information about the project (number of people served, new programs or opportunities, etc.)
2. Did the project follow the objectives outlined in your initial proposal? If not, why?
3. Has the project been modified since the proposal was presented to RMHC?
4. Have there been major changes in timetables for project development, implementation and completion? What were the reasons for such changes?
5. Have the personnel involved in the project proven to be adequate in numbers and qualifications? Has additional staff or staff with different qualifications been required?
6. Have any plans for cooperation with other institutions or groups been implemented successfully? If not, what are the reasons?
7. What have been your methods of evaluating the success of this project?
8. What was the impact of the project on your organization and on those people it was designed to serve? Has the project led to the development of similar ones in other organizations?
9. Include a complete financial reporting of the grant.
10. Did this grant *really* make a difference in the lives of children?