

# Opportunity Fund for Southshire Youth (2023)

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## *Vermont Community Foundation*

### *Guidelines*

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Established in 2018, the Opportunity Fund for Southshire Youth is a growing fund with the goal of ensuring a source of revenue for dynamic and innovative youth programs in Bennington, North Bennington, Pownal, Shaftsbury, and Woodford in perpetuity.

The Opportunity Fund for Southshire youth awards grants for creative and effective initiatives that empower and support Bennington-area teenagers, particularly those facing challenges and limited access to opportunities due to economic distress, disengagement from school, mental health issues, racism, gender identity, disability, legal status, or other reasons.

The fund will prioritize projects that:

- Elevate youth voice, leadership, and empowerment in the community and youth-serving institutions, especially of historically marginalized youth;
- Provide opportunity and access for youth facing hardships related to poverty, marginalization, violence, and other traumas;
- Expand youth engagement in STEAM (Science, Technology, Engineering, Arts, and Math) activities and increase youth exposure to STEAM careers; and/or
- Advance youth workforce development and rural entrepreneurship.

The Fund will support programs that benefit teenagers entering or enrolled in 6th through 12th grades (typically ages 12 to 18) including students at Mount Anthony Middle School or High School and/or those who live in the communities served by those schools.

All applicants to this grant program must meet the guidelines on the Opportunity Fund for Southshire Youth page on the Vermont Community Foundation website. Please view the website for the most current deadline information.

For questions regarding the application process, please contact Jane Mulcahy, Program Associate for Grantmaking at 802-828-7760 or [jmulcahy@vermontcf.org](mailto:jmulcahy@vermontcf.org).

**Applications will be accepted between January 26 - March 7, 2023. Applications must be received by 5PM on Tuesday, March 7 in order to be considered.** No late applications will be accepted.

## Organizational Questions Part I

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### Please share the mission of the organization.\*

Character Limit: 500

### Issues your organization works to address (words not sentences).\*

Ex. homelessness, food insecurity, carbon emissions, forest fragmentation, childcare, substance misuse.

Character Limit: 500

### Which areas of the state does the organization serve?\*

Choose all that apply.

#### Choices

Statewide  
Addison County  
Bennington County  
Caledonia County  
Chittenden County  
Essex County  
Franklin County  
Grand Isle County  
Lamoille County  
Orange County  
Orleans County  
Rutland County  
Washington County  
Windham County  
Windsor County

### What is your organization's annual operating budget?\*

Character Limit: 20

### Did you receive a grant from the Community Foundation in either 2021 or 2022?\*

#### Choices

Yes  
No  
Unsure

### Financial Statements\*

Upload a copy of your organization's profit/loss statement and balance sheet from its most recently completed fiscal year. Sample documents can be downloaded from the Community Foundation's website - visit our Online Grants Center FAQ for more details.

File Size Limit: 3 MB

### What status best describes the applicant?\*

Our grants must be paid to a registered 501(c)(3) nonprofit, place of worship/religious group, or town/municipal agency. If your organization or group does not fall into one of these categories, you will need to use a fiscal sponsor. If you have questions, please contact 802-388-3355 ext. 222. We are happy to talk through your options.

#### Choices

Municipal entity (i.e., town, public school, or other municipal department or agency)  
 Registered 501(c)(3) nonprofit  
 Place of worship or religious group  
 Other - Please provide details in your answer to the next question.

### Use this space to provide additional information about the applicant's status. (If Applicable)

If you have a fiscal sponsor—or if you operate under the umbrella of a larger registered nonprofit—provide their name below.

*Character Limit: 200*

### Fiscal Sponsor Agreement Form (If Applicable)

Download a blank Fiscal Sponsor Agreement Form ([click here to download the form](#)) and forward it to your fiscal sponsor to print, fill out, and sign. The form must be filled out completely and you must use the official VCF form. Please call 802-388-3355 if you have questions.

#### Upload the form here.

*File Size Limit: 3 MB*

### Which of the following strategic focus area(s) aligns best with the work of your organization?\*

Choose all that apply.

#### Choices

Economic Equity  
 Climate & Environment  
 Health & Wellbeing  
 Education & Training  
 Democracy, Trust, & Community Leadership

## Application Questions

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### Project Name\*

*Character Limit: 100*

### Project Summary\*

Provide a one to two sentence description of what the project will accomplish. Be clear and

explicit about what you will accomplish and how. Please use complete sentences. Note: Your answer may be used in publications. For example: "To support a five-week summer internship at X community garden for six middle school students, involving garden maintenance, vegetable picking, and farmers market sales."

*Character Limit: 500*

### **Amount Requested\***

Minimum \$500 / Maximum \$3,500

*Character Limit: 20*

### **Geographic Area\***

Choose all that apply.

#### **Choices**

Bennington  
North Bennington  
Pownal  
Shaftsbury  
Woodford

### **Alignment with Funding Priorities\***

How does your project align with the Opportunity Fund for Southshire Youth's funding priorities? *Check all that apply.*

#### **Choices**

Elevate youth voice, leadership, and empowerment, especially of historically marginalized youth  
Provide opportunity and access for youth facing continued hardships as detailed above  
Expand youth engagement in STEAM activities and increase youth exposure to STEAM careers  
Advance youth workforce development and rural entrepreneurship

### **Project Description\***

*Character Limit: 3000*

### **Rationale for the Project\***

Describe the need and/or opportunity that the project addresses, focusing on the Southshire youth expected to be served by the project. When appropriate and possible, support your statements with data.

*Character Limit: 1200*

### **Youth and Community Engagement and Support\***

Please describe how youth have been involved in decision-making regarding this idea or project. We encourage you to attach up to two letters of support from teenagers involved with the project planning or implementation in addition to your answer.

*Character Limit: 1200*

### **What are your goals?\***

We are eager to get a real-life sense of how this project will be experienced by youth and how

they would describe the impact they want the project to have.

*Character Limit: 1200*

### **Describe the people served by this work.\***

Please describe the youth that will be engaged with and benefit from this project, notably ways in which these youth have faced barriers to opportunity due to social, economic, or other factors. Why would this project be meaningful to them? Specify how many teens you expect to work with.

*Character Limit: 1200*

### **What will success look like?\***

Please explain how you will know that you've achieved your goals. How will you get and share candid feedback from the youth participants?

*Character Limit: 1200*

### **Project Timeline\***

Please explain the timeline for your project as well as the specific steps required to achieve your goals and when they will happen. Please list specific dates if they've been identified.

*Character Limit: 1200*

### **Project Champion\***

Who are the adult champions for this project and why are they committed to this activity?

*Character Limit: 1200*

### **Letter of Support (Optional)**

*File Size Limit: 2 MB*

### **Letter of Support (Optional)**

*File Size Limit: 2 MB*

### **Project Budget - Itemized (PDF)\***

Attach a .pdf copy of your itemized project budget. You should include both expenses and revenue, including pending and secured support. *Sample budget documents can be downloaded from the Community Foundation's website - visit our [Online Grants Center FAQ](#) for more details.*

*File Size Limit: 3 MB*

### **Project Budget - Narrative\***

Please provide a rationale for the project budget. For example, if you are a school, you may need to hire a trained computer program to teach a coding camp as well as a youth worker to work with the youth, organize transportation and food, etc.

*Character Limit: 1000*

### **Bonus Words (Optional)**

What else should we know about the project that we didn't ask?

*Character Limit: 1200*

## ***Organizational Questions Part II***

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**Which of the following populations does your organization serve? Please check all that apply.\***

### **Choices**

- Children and youth
- Families
- Older Vermonters (age 65+)
- Small, rural communities
- Low-income or those living in poverty
- Black, Brown, or other People of Color
- Indigenous People
- LGBTQ+
- People with disabilities or special needs
- No special populations
- Unsure
- Other, describe:

### **Other:**

*Character Limit: 500*

**Approximately how many people do you serve on a regular basis during the course of a year?\***

*If your service level varies from year to year, you can use an estimate of the number you served in the last year.*

### **Choices**

- Fewer than 100
- 100-499
- 500-999
- 1,000-4,999
- 5,000-24,999
- 25,000-50,000
- More than 50,000
- Unsure

**How many years has your organization existed?\***

### **Choices**

- Less than 5 years
- 5-10 years
- 11-20 years
- 21-50 years

More than 50 years

Unsure

## How many paid full-time employees or the equivalent does your organization have?\*

### Choices

no paid employees

1-2 full-time employees (or equivalent)

3-10 full-time employees (or equivalent)

11-20 full-time employees (or equivalent)

21-30 full-time employees (or equivalent)

31-50 full-time employees (or equivalent)

51-100 full-time employees (or equivalent)

More than 100 full-time employees (or equivalent)

Unsure

## What are the demographics of your organization's leadership? Please check all that apply.\*

### Choices

BIPOC led organization (Executive or Assistant Director, CEO, etc.)

BIPOC members on the Board of Directors

LGBTQ+ led organization (Executive or Assistant Director, CEO, etc.)

LGBTQ+ members on the Board of Directors

People with disabilities lead the organization (Executive or Assistant Director, CEO, etc.)

People with disabilities are members of the Board of Directors

None of the above

Unknown or prefer not to say

Other, describe:

### Other:

*Character Limit: 500*

## Save and Submit

All applications must be submitted electronically to the Vermont Community Foundation through the application form in the Online Grants Manager. Applications will not be accepted by mail or email. If you have questions about the Online Grants Manager, please contact: [jmulcahy@vermontcf.org](mailto:jmulcahy@vermontcf.org) or 802-828-7760.

### **2023 deadline: 5:00 p.m. on Tuesday, March 7.**

*By submitting your application to the Vermont Community Foundation, you give us permission to share your application and information about your project with other potential funders, both individuals and foundations.*