



## **GRANT REQUEST CRITERIA**

**There are numerous \$3,000 grants available through the Hudson Valley Renegades Pitch for Kids Foundation. Organizations may send as many grant applications that they would like reviewed, but, if selected, only one grant per organization will be awarded. The application must be submitted on the following application, and must contain all information requested.**

**IF ANY INFORMATION IS UNCLEAR OR MISSING, THE APPLICATION WILL BE ELIMINATED FROM CONSIDERATION**

1. Applicant must be a registered 501(c)(3) non-profit organization, serving children and families within the Hudson Valley.
2. Programs of the organization for which the grant is to be used must be serving children and families.  
⇒ Please note that grants are not given to support:
  - Requests with significant (greater than 10%) staff salaries
  - Youth Sports Teams (Little League, Pop-Warner, Soccer, etc.)
  - Underwriting of special events
  - Fundraising campaigns, such as endowment, capital or annual campaigns
  - Expenses that occur prior to the expected announcement dates of the grant awards
3. Faxes and/or Emails of the application will not be accepted. Pitch for Kids Fund must receive the original application. All applications must be typed
4. Include a listing of the Organization's board of directors and officers.
5. The organization will be responsible for reporting back to the Pitch for Kids Fund, to ensure proper use of the grant monies. The timetable for this report will be established once the selection process is completed and recipients of the grants are identified.
6. Grant requests will be assessed by the Pitch for Kids board of directors. Organizations selected will be contacted and distributed their monies upon completion of assessment.

### **DEADLINE FOR APPLICATION**

**Application must be in the Hudson Valley Renegades office at Dutchess Stadium postmarked no later than 5:00PM on June 18, 2010**

### **NO EXCEPTIONS**

*All requests received after the deadline will be eliminated from consideration.*



**Organization Information**

<b>Applicant Organization:</b>		
<b>Mailing Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Telephone:</b>	<b>Fax:</b>	<b>County:</b>
<b>Website:</b>		
<b>Executive Director:</b>	<b>Email:</b>	
<b>Contact Name (if different):</b>	<b>Email:</b>	
<b>Title:</b>	<b>Phone:</b>	

**ORGANIZATION'S MISSION**

(Brief statement of organization's objectives and/or activities:

<b>Organization annual operating budget: \$</b>	<b>Organization Audited?</b>	<input type="checkbox"/>	<b>Yes</b>	<input type="checkbox"/>	<b>No</b>
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**TAX STATUS**

(Please fill in and attach a copy of your organization's IRS determination letter)

<b>Tax Status (choose one):</b>	<input type="checkbox"/> <b>501(c)(3)</b>	<input type="checkbox"/> <b>Faith-based Institution</b>	<input type="checkbox"/> <b>Other</b>
<b>Legal Name, per IRS determination:</b>			
<b>Tax ID #:</b>	<b>Date of incorporation:</b>		



## SUMMARY OF REQUEST

**Project/Program Title:**

**Timeframe for amount requested:**

**From:**

**To:**

**Budget for proposed program or project:** (i.e. materials and equipment. Note: Requests with significant staff costs will not be considered.)

*If grant request does not equal total project/program budget, please list other sources of revenue.*

## PROJECT/PROGRAM SUMMARY

**Summary of Project or Program** (briefly describe the equipment or program, its objectives or significance)

**Who will this project/program serve?**

(special populations, geographic area, community focus, organizational focus, etc.)

**Specific, Measurable Short-Term Outcomes**

(changes as a result of what you do, during the life of the grant or as a result of the grant)

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**Measurable Long-Term Objectives**

(changes that will result based on what you do, beyond the term of the grant)

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## COLLABORATIONS AND OTHER SUPPORT

Please tell us if you are collaborating with any other organizations.

### Funding Alternatives

(how will you fund this request if partial or no funding is granted)

## COMMENTS

Is there any other information we might need to better understand your request and/or the unique needs of the community that this request will serve?

## REQUIRED ATTACHMENTS (ONE COPY)

- IRS tax determination letter
- Current board list including professional affiliations

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

**Only completed applications with all required attachments will be considered**

Please mail completed application to:

Attn: Ellissa Phlegar  
Pitch for Kids Fund  
P.O. Box 661  
Fishkill, NY 12524

The Pitch for Kids Fund partners with the Community Foundation of Dutchess County in its grant making. This application may be downloaded on the Renegades Pitch for Kids Fund website at [www.pitchforkids.org](http://www.pitchforkids.org) or from the Foundation's website at [www.cfdcnny.org](http://www.cfdcnny.org) under Grants and Scholarships/For Grant Seekers/Hudson Valley Renegades Pitch for Kids Foundation Grants.

*Together We Can Make A Difference*