

## Ohio State Bar Foundation Traditional Grant Program \_ Outcomes Enabled Form

### Before You Begin

#### Important information

**A pre-submission conference is REQUIRED to be eligible to submit a grant application to the Ohio State Bar Foundation. If you need to schedule your pre-submission conference, please contact Laura Spires at 614.487.4444 or [lspires@osbf.net](mailto:lspires@osbf.net).**

**A one-page cover letter must be attached to this form.**

**Grant applications are considered by the Foundation Trustees twice each year. Grant applications must be submitted via online application by 5:00 pm on February 15 for consideration prior to June 30 and by 5:00 pm on August 15 for consideration prior to November 30.**

**The Foundation cannot fund all grant applications and cannot meet the time constraints of some applications. Further, the Foundation may award limited or partial grants, and may pay grants in installments.**

**Be sure to add [mail@grantrequest.com](mailto:mail@grantrequest.com) to your address book to ensure you receive our communications.**

### Organization Information

#### About the Organization

Name of Requesting Organization

Address

City            State            ZIP Code

- Select One -

County

Website

Area Code and Telephone Number

Example: xxx-xxx-xxxx

Area Code and Facsimile Number

Example: xxx-xxx-xxxx

Tax ID

Tax Status (Required, if available)

<None>

Date of Incorporation

Organization Type

If other selected, please describe

Organizational Background

Provide a brief history of your organization along with its mission. Describe the population served by the applicant including an estimate of numbers served during the last year. Provide an overview of current programs offered and describe all affiliations. Indicate the applicant's principal geographic area of service.

## Key Contacts

Head of Organization

Prefix                      First Name                      Middle Initial                      Last Name

- Select One -

Suffix

<None>

Title                      E-mail

Office Phone

Contact for this Request

No Check here if same as Head of Organization

Prefix                      First Name                      Middle Initial                      Last Name

- Select One -

Suffix

<None>

Title

E-mail

Office Phone

## Proposal Information

Proposal

Project Title

Request Amount:      Project Start Date

Project End Date

Is Partial Funding Acceptable?

How would partial funding affect the project?

List other person(s) or organization(s) from whom/which funding has been or will be sought, and amount sought from each:

Is funding and/or completion of the project contingent on funding from other sources or dependent on certain conditions?

If the answer to the above is yes, identify the other funding sources, the detail of the funding requested and/or granted by other sources, and/or the detail of the conditions:

When will the applicant's governing board give approval for this project and this grant request?

Has the applicant completed the required pre-submission conference with OSBF staff?

Date of pre-submission Conference

The mission of the Ohio State Bar Foundation is to promote public understanding of the law and improvements in the justice system throughout Ohio. Discuss how the proposed project conforms to the mission of the Foundation.

Project Description

Briefly summarize the proposal. Include a description of need for the project, socio-economic information for target population, specific goals and objectives, activities planned to meet goals and

objectives, anticipated outcomes, anticipated challenges/difficulties, project timeline, qualifications of key personnel, methods of evaluation, collaborating organizations, linkages between the program and additional community resources. Describe the overall capability of applicant to conduct the project. Include a specific evaluation plan for the project's benefits and costs. Describe any data, written material, audio visual or other material that will result from this project.

Please Note: Copies of data, written materials, audio visual materials or other product developed as a result of the grant must be provided to the Foundation upon completion of project. The Foundation may reserve property rights, copyrights, and all other rights of reproduction with respect to any intellectual property produced or procured under this project.

## Demographics/Authorization

### Demographics

#### Program Area

Select the Program Area that most closely aligns with your request for funding

#### OSBA District Served

You may select up to 5 Districts served directly by this request.

**Please note, not all counties in a District must be served to be selected.**

#### Geographical Area Served

You may select up to 3 main counties served.

#### Population Served

You may select up to 5 populations directly served by this request.

If other selected, please describe

#### Age Group

You may select up to 2 Age Groups directly served by this request.

### Signature of Authorized Person

**By entering my name in the box below, I understand that potential grant applicants are required to schedule a pre-submission conference with the Foundation staff prior to completing any grant request. My signature certifies that a pre-submission conference has been completed as specified in the Ohio State Bar Foundation Grant Application procedures.**

**My signature certifies that the organization above currently has tax-exemption or other proof of status under Internal Revenue Code section 501 (c) (3), that it is not classified as "a private foundation" as defined under section 509 (a), or that I exercise authority on behalf of a qualified governmental agency.**

**My signature is made as one who is authorized to do so on behalf of the applicant organization.**

Authorized Signer      Authorized Signer Title

Authorized Signature Date

### Attachments

Upload Attachments

**Upload the required documents listed below.**

**To upload a document:**

- **Click the Browse button beneath the document name**
- **Browse the location of the document on your computer**
- **Select the document, then click OK**
- **You will return to this page**
- **Click the Upload button**

**Please note, no file will be available unless you select Upload**

Cover Letter

Cover Letter  
one page cover letter

Project Budget

Project Budget  
Provide a detailed budget for the project: including anticipated expenses, details about how Foundation funds will be used, and anticipated income, including information about other sources approached for funding. Additionally, if the project is to continue beyond the grant period, what are the plans for funding the project upon termination of this grant?

Additional Project Budget information (optional)

Organizational Budget

**Organizational Budget**

Provide current year budget and proposed budget for project year(s) showing both income and expenses, the organization's most recent audited financial statement and form 990.

Additional Organizational Budget Information (optional)

Additional Organizational Budget Information (optional)

**Board of Trustees Listing****Board of Trustees Listing**

Provide list of current board of trustees and their affiliations

**IRS Letter of Determination****IRS Letter of Determination**

IRS letter confirming tax status or information confirming status as a governmental unit or agency.

**Optional Supporting Documents****Letters of Support**

(optional) Please no more than 2 letters of support

**Annual Report or Brochure**

(optional) any readily available printed material about the organization

**Optional Document**

(optional) any other optional document you wish to provide