



AFA Bi-Annual Grant Criteria

As a nonprofit member organization of the Alzheimer's Foundation of America (AFA), you are entitled to apply for funding through AFA's various grant processes, including the Bi-Annual Grant.

About the Bi-Annual Grant

The Bi-Annual Grant seeks proposals from AFA's nonprofit member organizations in good standing (meaning their dues are up-to-date) for new or existing programs and services that improve the lives of those living with Alzheimer's disease or a related dementia, and their families and caregivers. The amount to be requested is \$5,000. This grant is offered in the spring (deadline February 15) and the fall (deadline September 1) of each year.

What is AFA looking for in a Bi-Annual Grant proposal?

This grant is open to a variety of programming ideas and supportive services. AFA seeks proposals that exhibit high scores within the following criteria:

- **Clear and effective descriptions.** Proposals must clearly and effectively explain the program to be funded and its objectives. Pay attention to grammar, spelling, etc.
- **High community demand.** Proposals need to clearly exhibit a high level of need for this program or service in the community, and show that it will serve a significant number of clients and achieve other outcomes.
- **Creativity.** Proposals should exhibit a high level of creativity.
- **Best practice.** Proposals should show how this program or service is a best practice that deserves to be expanded for people with Alzheimer's disease and related dementias, and/or their caregivers.
- **A budget in sync with real costs.** Your budget should illustrate that this program, if awarded a bi-annual grant, can realistically be accomplished by using AFA funds and other funds available to your organization.

Who reviews the Bi-Annual Grant proposals?

Bi-Annual grant proposals are reviewed by members of AFA's board of trustees. The names of reviewers during each cycle will remain anonymous to AFA's member organizations.

How is scoring determined?

Each of the criteria above will be scored on a scale of 1-5, 1 being the lowest possible score and 5 being the highest possible score. Since there are five criteria, proposals can receive a maximum total score of 25 from each grant reviewer. Final scores are determined by averaging each grant reviewers' total score. The maximum average score each proposal can receive is 25; *only* proposals that receive a minimum average score of 20 will be considered for funding. For proposals that are not considered for funding, AFA will mail a grant denial report to your organization that will include the average score in each category and total average score; this will help you understand where your proposal may need improvement

AFA also reserves the right to raise the minimum average score during the review process depending on available funds versus the number of proposals that receive scores within the fundable range. Proposals that receive a minimum average score above 20 but are not funded will receive a letter explaining that this decision is solely based on a lack of available funds and has not be made based on merit.

For more information, please contact the Membership Team at (866)-232-8484 or membership@alzfdn.org.



ALZHEIMER'S FOUNDATION OF AMERICA

Helping more people today than we did yesterday...

Bi-Annual GRANT APPLICATION

Please complete this form in its entirety and mail or fax to:

Alzheimer's Foundation of America

322 Eighth Ave, 7th Floor

New York, NY 10001

Attn: Bi-Annual Grant Proposal

Phone: 866-AFA-8484

Fax: 646-638-1546

Deadlines: Spring: (received by) February 15th Fall: (received by) September 1st

Second Submission
(for same program)

Organization _____

Address _____

City _____ State _____ Zip _____

Phone _____ Web site _____

Contact Person _____ Title _____

E-mail address: _____

BACKGROUND

Organization's mission:

Briefly describe organization's services:

Year organization was founded: _____

Number of employees: _____

Number of volunteers: _____

Annual budget: _____

PROGRAM SUMMARY

Name of Program to be funded: _____

New Program Continuing Program—Year Established _____

1. Brief overview of the program:

2. Objectives/goals of the program:

3. Statement of need for this program:

4. Brief description of how funds will be used:

5. Criteria used to determine client eligibility:

6. Number of clients currently served by this program: _____

7. Number of additional clients served by this program if grant is awarded: _____

8. Locations currently served by this program and new locations served if grant is awarded:

CITY	COUNTY	STATE	CURRENT	FUTURE

9. Qualifications of the person(s) administering this program:

10. How will you evaluate the effectiveness of the program?

11. How will you fund the program once this grant ends?

12. List current funding sources for this program:

SOURCE	AMOUNT
	\$
	\$
	\$
	\$
	\$
	\$

13. If you receive this grant, will there be a fee for the program?

Yes No

If yes, what is the amount? \$ _____

Daily Weekly Monthly Annually

ANNUAL PROGRAM BUDGET

	Total Budget	Funded by Grant	Other Sources
PERSONNEL-Salary			
PERSONNEL-Fringe			
RENT			
TELEPHONE			
SUPPLIES			
EQUIPMENT			
ADVERTISING			
PRINTING			
TRAVEL			
INSURANCE			
OTHER			
TOTAL			

PUBLICITY WAIVER

I understand that should my organization's grant proposal be approved, information about our program and/or service may be used during various Alzheimer's Foundation of America publicity and fundraising opportunities, including printed articles and press releases.

Contact Person _____ Title _____

Signature **x** _____ Date: _____