



ALZHEIMER'S FOUNDATION OF AMERICA

## Brodsky Innovation Grant

*Grant application due: May 15<sup>th</sup>, 2019*

**Via email or post marked by May 15<sup>th</sup>**

Program Page

Organization Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone \_\_\_\_\_ Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_ Website \_\_\_\_\_

Employer Identification Number \_\_\_\_\_

Contact Person (Person responsible for grant proposal. This individual will receive all correspondence related to this proposal.)

Contact Name \_\_\_\_\_ Contact Title \_\_\_\_\_

Contact Telephone \_\_\_\_\_ Contact Email \_\_\_\_\_

Program Title: \_\_\_\_\_

Service/Program Summary: \_\_\_\_\_

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322 Eighth Ave. New York, NY 10001. 866-232-8484. [www.alzfdn.org](http://www.alzfdn.org)

**QUESTIONS? Call AFA at 866-232-8484**

How does this program specifically exemplify “an innovative program that improves the lives of individuals living with Alzheimer’s disease and related illnesses and their families?”

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Program Description

Narrative: (maximum four pages): Include brief history and mission of organization; the organization’s overall vision for this project and a project description; need for the project; description of target population and geographic area served by this project; goals and objectives you hope to achieve, specific activities and services you will undertake; outcomes and desired changes you hope to make; and plans for disseminating lessons learned to benefit others interested in your initiative. If this is an existing program or service, include how this grant will enhance its operations, outreach, etc. If you are partnering with other organization(s) on this program, include a brief description of that organization and its involvement. Also include a timeframe for implementation and your plan (financial resources) for sustainability of the program beyond grant funding.

Evaluation: (one page or less, in addition to the narrative): Provide specific measures and/or benchmarks to determine that outcomes have been achieved; how you will measure success both short-and long-term; how often you will evaluate the program and report progress; and how you will correct problems if necessary.

Project Budget/Narrative: Provide a line-item budget that details the projects expenses and anticipated income sources for a one-year period. Clearly define the items covered by the Brodsky Innovation Grant and other funding sources (actual, pending and those for which you have applied) for this program. Provide a brief description of each item in the budget narrative. Note: indirect costs do not have to be included.

**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 \_\_\_\_\_

## CHECKLIST FOR GRANT APPLICATION

To assist you in being compliant with the proposal requirements set by the Alzheimer's Foundation of America, feel free to use the following check list prior to submitting the proposal.

### **General Instructions**

\_\_\_ 12 point font, double-spaced

\_\_\_ All pages numbered (excluding cover page)

\_\_\_ Original plus *four* copies **Bound copies preferred, please mail in**

### **Proposal Section**

Proposal includes the following:

- Program Page
- Four-Page Narrative
- One-Page Evaluation
- Detailed 12-month Project Budget (line-item)
- Budget Narrative

### **Attachments Section**

\_\_\_ IRS letter verifying 501 (c) (3) status (or verification of government entity status)

\_\_\_ Program Budget

\_\_\_ List of Organizations Board of Directors

\_\_\_ Organization's current Annual Operating Budget

\_\_\_ Short bio of staff involved in project

\_\_\_ Letter(s) of Support (maximum two)

### **Attachments Section**

\_\_\_ Letter(s) of Support from partnering organization (s) *if applicable*

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