

### Program Grant Guidelines

Established in 1992, the USTA/Midwest Tennis & Education Foundation Inc. (USTA/MTEF) is dedicated to supporting youth tennis programs, activities, and individuals throughout the USTA/Midwest Section. USTA/MTEF is the charitable and philanthropic entity of the USTA/Midwest Section, and is expanding its mission this year to include specific adult populations including Adaptive Tennis, Wheelchair Tennis, Special Olympics and Disabled Veterans.

USTA/MTEF accepts applications for grants that fall within the scope of these objectives. Applications are evaluated and approved by the USTA/MTEF Grant and Scholarship Committee. Programs funded by USTA/MTEF must reside within the USTA/Midwest Section that includes Illinois, Indiana, Michigan, Ohio, and Wisconsin, as well as several counties in Kentucky and West Virginia.

## Funding:

* The deadlines to apply for a 2017 grant are as follows (please select one deadline to apply): January 3, April 1, July 1, and October 1.
* All factual information requested on the application must be correctly stated.  In addition to the specific factual information requested on the application, the quality of written responses to questions will be considered.  **Applications, including supporting documentation may be submitted via email, mail or fax, and must be postmarked by the following dates:  January 3, April 1, July 1, or October 1.  Incomplete or untimely applications will be returned to the applicant. If the application is emailed or faxed, the application must be received in the Foundation office on the same date as if it was being mailed: January 3, April 1, July 1, or October 1.**
* Guidelines will be followed unless exceptional circumstances warrant other consideration.
* Applications will be limited to one grant per year unless exceptional circumstances warrant additional consideration.
* Grants will be awarded after approval by the Grant and Scholarship Committee, and a list of grant recipients provided to the Board of Directors.
* Grant application forms are available on the USTA/MTEF website at www.midwesttennisfoundation.com.
* Program grants range from $250 to $5,000.
* Program applicant must be a current USTA Organization Member.
* All program grant recipients funded by a USTA/MTEF grant will be evaluated by a representative from the USTA/Midwest Tennis & Education Foundation or the USTA/Midwest Section.
* Applicants are encouraged to seek assistance from their Community and District associations before applying for USTA/Midwest Tennis & Education Foundation grants.

**If a USTA/MTEF Grant is Awarded:**

* One-half of the approved grant will be forwarded upon approval by USTA/MTEF.
* The balance of the grant will be sent when USTA/MTEF receives a report, vouchers, and receipts by a specified date provided to the recipients upon notification of approval of funding for the entire awarded grant amount.
* If the information is not received by the specified date and USTA/MTEF hasn’t been notified and/or an extension requested, the applicant will not receive the second half funding.
* **Program recipients must provide a report and receipts to USTA/MTEF by an established deadline date. Final reports should include objectives that were met and evaluation results.**
* Photographs of program participants and activities should be provided. Videos are welcomed.
* Program grant recipients are required to acknowledge USTA/MTEF and the USTA/Midwest Section on all program publicity.

**Grant Definitions & Guidelines: Program**

Factors considered (in order of importance) when evaluating applications: number of participants, whether the program is “new” or expanded to new constituencies, type and amount of tennis programming being offered, educational components, and length of program.

Types of Programs Eligible for Funding:

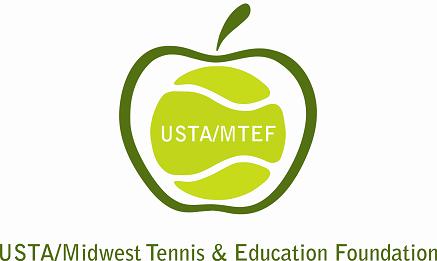
* Provides grants to community-based youth tennis programs including Community Tennis Associations, Park and Recreation Departments, YMCAs and other service organizations;
* Provides grants to community-based youth programs that offer 10 and Under Tennis, Midwest Youth Team Tennis, USTA Jr. Team Tennis, etc.;
* Provides grants to community-based adult tennis programs that service Wheelchair, Adaptive, Special Olympics and Disabled Veteran participants;
* Assists schools in the USTA/Midwest Section in meeting equipment needs to provide students the opportunity to experience tennis as part of their physical education classes and/or as after-school programs;

Types of Budget Requests Eligible for Funding (this is not an all inclusive list):

* Stipends to provide instructors, age-appropriate equipment, cost for courts and/or facility rental, marketing for program, scholarships for participants who cannot afford program, supplies for end of program event, occasional transportation to and from program location, occasional storage rental, etc.

Types of Budget Requests Not Eligible for Funding (this is not an all inclusive list):

* Program insurance, USTA Organization membership, transportation for a special event, TennisLink program registration fees, one-day events, etc.



PROGRAM GRANT APPLICATION

DEADLINES: JANUARY 3, APRIL 1, JULY 1 & OCTOBER 1

**Organization/Program Information:**

Organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

USTA Organization Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Estimated Number of Participants \_\_\_\_

Program Start Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ End Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Existing Program \_\_\_ Yes \_\_\_ No New Program \_\_\_ Yes \_\_\_ No

Is the organization/program incorporated? \_\_\_ Yes \_\_\_ No

If yes, what is the organization/program designation (501**(c)(3)**, 501**(c)(4)**, for-profit, etc.)? \_\_\_\_\_\_\_\_\_\_\_\_\_

What types of tennis participants does the program primarily serve? (please check one):

Top of Form

Able \_\_\_\_\_ Wheelchair\_\_\_\_ Disabled Veterans \_\_\_\_\_ Adaptive\_\_\_\_\_

If adaptive, please specify the adaptive tennis community or communities served:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact Information:**

Contact Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ USTA/Midwest District \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Funding Request:**

Amount Requested from USTA/MTEF $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grant will be used for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Has this organization previously applied for a USTA/MTEF grant?

\_\_\_ Yes \_\_\_ No \_\_\_\_\_\_\_ Year(s)

2. Has this organization previously received a USTA/MTEF grant?

\_\_\_ Yes \_\_\_ No \_\_\_\_\_\_\_ Year(s)

# ORGANIZATIONAL HISTORY

1. When was the organization founded?
2. What is the mission of the organization? (Please include a brochure/fact sheet if available.)

1. Total number of:

Paid full-time staff: \_\_\_\_\_ Paid part-time staff: \_\_\_\_\_ Volunteers: \_\_\_\_\_

4. List all programs administered by this organization (include dates).

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# PROGRAM OVERVIEW

1. Clearly describe the program’s goals, objectives and strategies:
2. Goals:
3. Objectives (in measurable terms):
4. Strategies:
5. Why is the program needed in your area?
6. How will you recruit participants for the program?
7. How will this program change/impact the lives of the participants?
8. How will the program outcomes be evaluated? (Be specific.)
9. Will the program continue to be provided for participants beyond the grant period? If yes, how? If no, why not?
10. If the program continues, where do you envision this program in three years, and how will it be financially supported moving forward?

# PROGRAM DESCRIPTION

1. What skills will participants develop through this program? Explain how this will occur. (These skills may include sportsmanship, teamwork, problem solving, community service, and/or leadership.)
2. How will instructors be selected? What qualifications are necessary?
3. What will be the instructor to participant ratio? \_\_\_\_\_\_\_:\_\_\_\_\_\_\_
4. a. How will the program be structured?
5. Will there be activities other than tennis? \_\_\_\_ Yes \_\_\_\_ No  
   If yes, describe the amount of time tennis will be provided compared to other activities.
6. Will the participants receive any type of recognition for participating in the program, and/or will an event be held at the conclusion of the program? (Please describe)
7. General timetable for the program:

Activity Location(s) Date(s) Day of Week Time of Day

1. List any collaborative organizations, individuals or facilities that will be involved with the program. Describe their roles.

# DEMOGRAPHIC INFORMATION

1. Total Number of anticipated program participants: \_\_\_\_\_\_\_\_\_\_

Age: 3-5 \_\_\_\_\_ Girls \_\_\_\_\_ Boys \_\_\_\_\_

6-8 \_\_\_\_\_ Girls \_\_\_\_\_ Boys \_\_\_\_\_

9-12 \_\_\_\_\_ Girls \_\_\_\_\_ Boys \_\_\_\_\_

13-15 \_\_\_\_\_ Girls \_\_\_\_\_ Boys \_\_\_\_\_

16-18 \_\_\_\_\_ Girls \_\_\_\_\_ Boys \_\_\_\_\_

Estimated number of participants playing tennis for the first time: \_\_\_\_\_\_\_\_\_\_

Estimated number of participants with previous tennis experience: \_\_\_\_\_\_\_\_\_

1. For proposals that serve primarily wheelchair, adaptive, or Veteran tennis participants:

Able \_\_\_\_\_% Adaptive (Physical disability) \_\_\_\_\_%

Wheelchair \_\_\_\_\_% Adaptive (Intellectual disability) \_\_\_\_\_%

Disabled Veterans \_\_\_\_\_% Adaptive (Other\*) \_\_\_\_\_%

\*Please describe\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Total number of participants from previous year’s program (if program was offered in prior year): \_\_\_\_\_\_\_\_

1. Demographic characteristics of group to be served:

White \_\_\_\_\_% Asian \_\_\_\_\_%

African American \_\_\_\_\_% Native American \_\_\_\_\_%

Hispanic \_\_\_\_\_% Other \_\_\_\_\_%

# FINANCE AND BUDGET

1. Please attach a complete program budget (with detailed breakdown of all budget items) and complete the following:

Total program budget: $ \_\_\_\_\_\_\_\_\_\_\_\_

Estimated program expenses: $ \_\_\_\_\_\_\_\_\_\_\_\_

Estimated program revenue: $ \_\_\_\_\_\_\_\_\_\_\_\_

USTA/MTEF Grant Request: $ \_\_\_\_\_\_\_\_\_\_\_

1. List other funding sources for this program:

Amounts:

USTA National $ \_\_\_\_\_\_\_

District $ \_\_\_\_\_\_\_

Community $\_\_\_\_\_\_\_\_

Other (list) $\_\_\_\_\_\_\_\_

3. Will program fees be charged? \_\_\_ Yes \_\_\_ No

If so, what is the fee per player?

4. Will scholarships be offered to participants who cannot afford the program?

Yes \_\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_\_

**Please check ok-button-4308-large[1] below that the following information is included with the application at the time it is submitted (if not, the application will be returned):**

\_\_\_\_\_\_ Detailed budget (revenues and expenses) for entire tennis program being submitted for funding request including breakdown of all items;

\_\_\_\_\_\_ Current certificate of liability insurance for organization (or copy of check/other form of payment if certificate is not available);

\_\_\_\_\_\_ Previous year program actual expenses and revenues (if not a new program);

\_\_\_\_\_\_ Proof of tax exempt status or 990 Form submitted in its entirety.

**The following information is recommended for inclusion with the application (if available):**

* Program flyers, brochures, annual reports, newsletters, fact sheet;
* Letter(s) of agreement if collaborating with other organizations.

Authorized Signature **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Date **\_\_\_\_\_\_\_\_\_\_\_**

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

Title **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Submit applications and additional information via mail to:   
USTA/Midwest Tennis & Education Foundation**

**Attn: Grant & Scholarship Review Committee**

#### 1310 East 96th Street, Suite 100, Indianapolis, IN 46240

**Or submit application and additional information via email to: kathy@midwest.usta.com**