

STATE ADVISORY LEADERSHIP GRANT FORM

Guidelines

Purpose

The **Leadership Grant Program** is an initiative of the N.C. Cooperative Extension Service State Advisory Council to execute a major element of the State Advisory Council mission, which is development and strengthening of volunteer leadership across North Carolina. The State Advisory Council Leadership Grant Program will select and fund projects that build Advisory System leadership capacity and strengthen volunteer leadership in our communities.

Accountability

~~The contact for each approved/funded proposal MUST submit a report (within 30-days of grant completion) to the State Advisory Council Executive Committee Vice-Chair.~~ The report must describe the fiscal year's activities with the specified performance measurements and an accounting for the grant funds expended within that period. *For grants extending beyond the State Advisory Council fiscal year a progress report is due by May 15.*

The annual budget fiscal year for the State Advisory Council is July 1 through June 30.

Eligible Projects

Applications eligible for the program include those addressing

- the development of County Councils
- strengthening of State Advisory Council clusters
- identification and education of potential ALS members
- education of elected officials and government staff
- development of strategic planning capability within the leadership system

Eligible Applicants

Proposals will be accepted from

- SAC members
- CES County Council membership

Submissions

Proposals may be submitted to

- The Vice Chair of State Advisory Council in care of Jeanine Gaul at jegaul@ncsu.edu.

Application Procedure

- **ONLY EMAIL** applications will be considered.
- Applications(s) MUST be received by November 15th **and** May 15th depending on funding cycle.
- Annual SAC budget process will determine the maximum funds available for each funding cycle.
- Max amount of ~~reimbursable expenditures~~ awarded will be up to \$1,500. [A check in that amount will be sent out within 10-days of the Treasurer receipt of proper invoice/receipts]

After-The-Fact reimbursements will not be considered.

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Application

Criteria (Please follow ALL CRITERIA carefully to avoid package being DISQUALIFIED)

1. The purpose to be achieved?

2. Who is the targeted audience?

3. Any collaborators involved? ☐ Yes ☐ No If, Yes w/ Who _____

4. The requested Leadership Grant funding, **please write a brief narrative**

5. Are you receiving funding from any other sources? ☐ Yes ☐ No If, Yes from whom _____

6. Is there a budget for the project? ☐ Yes ☐ No If, Yes from what is the total budget \$ _____

Please List all

Funding Source _____	Amount \$ _____	Date: _____
Funding Source _____	Amount \$ _____	Date: _____
Funding Source _____	Amount \$ _____	Date: _____

7. What key progress measurements are in place?

8. Have you applied for this grant before? ☐ Yes ☐ No If, Yes when _____

Please check one box ☐ SAC membership ☐ County Council membership

Name: _____ **County** _____

Phone No.: _____ **Email:** _____