

Youth Philanthropy Contest Contact Information Sheet

***Please complete all pages completely including signature.**



Project Name: _____

Name of Individual or Group: _____

Main Contact Person: _____

Mailing Address: _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

How do you prefer to be contacted? ☐ email ☐ text ☐ phone call

Age Group

Grades K-4

Grades 5-6

Grades 7-8

Grades 9-12

Young Adult (thru age 25)

How many people are in your project group? _____

*****If a group has mixed ages, the age group will be determined by the age of the oldest youth participating.*****

Please list the names/ages of each group member below.

A signed media release form is required of each. (please see page 6 of this packet for the media release form)

What do I do with my contest application and display once they are done?

Projects can be dropped off at the Lifelong Learning Center in Norfolk on the campus of Northeast Community College, 801 East Benjamin Avenue, during the following times:.

Friday, January 30th, 3:00-7:00 pm

Saturday, January 31st, 8:00-10:00 am

***online applications accepted until 3pm on Friday, 1/30/15**

When you drop off your projects, a committee member will check through all your paperwork and then escort you to a table where you can set up your project display for judging. The Selection Committee will review projects that same day, during which time they will select the contest winners.

Please list the items included in your display: _____

If you have a video to submit, what is the link? _____

****Please see contest guidelines for more detailed information about video submission.***

If your project benefits a community organization or group, you must have permission from that group to complete your project **BEFORE** you turn in this application. If this applies to you, who did you speak to?

Organization Contact: _____ Date: _____

Media Release Forms can be found on page 6 of this packet.

Project Description

For more information, see Youth Philanthropy Contest Guidelines

Here is your chance to tell us what you want to do to make your community a better place. Please respond to each of the following questions. Please feel free to use additional paper.

1) What is your project?

2) Does your project meet ALL of the following qualifications? (Please check each box indicating your project meets these criteria.)

Has a positive impact on the community

Can be completed by October 1st, 2015

Take place in Northeast Nebraska

Are charitable in nature (which means it must focus on serving the public interest or common good)

Directly involves youth in the project work

3) WHO will this project serve and how will they benefit from it?

4) WHAT impact will this have on your community?

5) HOW are you going to do it? Please explain the goals of your project and how you will meet them.

6) WHO is going to help you make it happen?

7) Why do you think your project should receive funding?

8) What type of display have you included with your application to help better explain your idea?

Please include a one sentence summary of your project:

Project Expenses

How are you going to spend the \$1,000? Determining the actual expenses ahead of time will make your project flow much more smoothly. **Please detail all expenses related to your project.**

Item Description	Qty.		Cost/Ea.		Total Cost (qty. x cost)
		X	\$	=	\$
		X	\$	=	\$
		X	\$	=	\$
		X	\$	=	\$
		X	\$	=	\$
		X	\$	=	\$
Total Amount Needed for this Project					\$

If your project exceeds the \$1000 contest award, how will you cover those costs?

In-Kind/Donations

(What other support do you expect for your project?)

<u>Item Description</u>	<u>Approximate Value</u>
_____	_____
_____	_____
_____	_____
_____	_____

Project Application Checklist and Event Details

Youth Philanthropy Contest

Before you turn in your project, please be sure to review all of the following:

Completed ALL sections of the Contact Information Sheet

Completed ALL questions of the Project Description Sheet

Completed and printed Consent/Media Release forms for EVERY person participating in my project (*see page 6 of the packet*).

Completed a DETAILED Project Expenses Sheet

Reviewed the 2015 Contest Guidelines

Completed all segments of my display and/or video for the project
(*to be turned in for judging with my project*)

Marked the required participation date & time on my calendar
(*January 31st 5pm – 7pm*)

Like us on Facebook (Youth Philanthropy Contest) and follow us on Twitter @ypcontest

If your project is a fundraiser fill out the Fundraiser Supplemental Application (*page 7*)

Event Participation

Contest winners will be announced, and **participation is required**, at an event held at the Lifelong Learning Center on **Saturday, January 31st**. Family members are invited to join us. Projects that are NOT funded through the contest may receive additional funding from guests at the event. Come ready to talk to people and sell your project idea.

Contact Information

Youth Philanthropy Contest

PO Box 714

Norfolk, NE 68702-0714

Phone: Tammy Day, 402-379-7322

Email: youthcontest@philanthropycouncilne.org

www.philanthropycouncilne.org

Remember to attend the

**Youth and Family Event
Youth Philanthropy Contest Winners
Announced!!**

**Saturday, January 31st
5pm – 7pm
Lifelong Learning Center on the campus
of Northeast Community College**

Consent to Participate and Media Release

Required of each contest participant – please make copies as needed

Philanthropy Council of Northeast Nebraska

Contact Person: Tammy Day

Address: PO BOX 714, Norfolk, NE 68702-0714

Phone: 402-379-7322 Email: youthcontest@philanthropycouncilne.org

Permission to Photograph/Quote

Participant's Name: _____

I agree that the Philanthropy Council of Northeast Nebraska may use photographs of me with or without my name and for any lawful purpose, including such purposes as publicity, illustration, promotion, advertising and web content.

I also agree that the Philanthropy Council of Northeast Nebraska may use my comments upon approval for similar promotional purposes.

I understand the Philanthropy Council of Northeast Nebraska is an account of the Norfolk Area Community Foundation Fund, an affiliated fund of the Nebraska Community Foundation, a nonprofit organization, which exists to help concerned citizens to mobilize charitable giving in support of the betterment of Nebraska communities and organizations. I further understand that I will not receive compensation for the use of my photographs or comments.

As a parent, I understand that my child wishes to participate in this contest. I will support them in their efforts. If I have questions I can contact Tammy Day, her contact information is listed at the top of this page.

I have read and understand the above:

Youth printed name _____

Club or organization (if applicable) _____

Address _____

City _____ State _____ Zip _____

Participant signature _____ Date _____

*Parent signature _____ Date _____

***Required if participant is 18 years of age or younger**

Fundraiser Supplemental Application

Youth Philanthropy Contest

This form is only necessary if your contest application includes fundraising:

What is the goal of your fundraiser? *(to make money, to raise awareness, etc)*

Explain how the money raised through the fundraising event would be used *(who it would be donated to or if it would go to purchase things for an organization, etc).*

Provide a detailed plan of action for hosting the fundraiser *(date of fundraiser, steps to get there, etc).*