## **Youth Philanthropy Contest Contact Information Sheet**

Please complete all 6 pages completely including media releases.



Project Name:		For the love of the community
Name of Individual or Group:		
Main Contact Person:		
Mailing Address:		
City:		Zip:
Home Phone:	Cell Phone:	
E-Mail:		
How do you prefer to be contacted? $\ \Box$	E-mail Text	Phone call
How did you hear about the Youth Conte	st?	
<ul><li>☐ School</li><li>☐ Club/Organization</li><li>☐ I have participated in the Youth Contest before</li></ul>	Social Media Radio/News	paper
<b>Age Group:</b> $\square$ K – 4 <sup>th</sup> $\square$ 5 <sup>th</sup> – 6 If a group has mixed ages, the age gr		
How many people are in your group?		
Please list the names/ages of each group	member below.	
A signed media release form is required f	or each person. (see page 6 of this	packet for the media release form)
Name	Age Nar	me Age
*You may attach a sheet for additional members if y	you do not have enough space here.	
Please include a one sentence summary	of your project. This summary will	he used to promote and help fund
i lease include a one sentence summary	or your project. This summary will	be asea to promote and neip fund

your project.

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

Projects can be dropped off at the Norfolk Public Library, 308 West Prospect Avenue, during the following times:

Friday, February 1st, 3:00-4:45 pm

Saturday, February 2<sup>nd</sup>, 9:30-11:30 am

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.

Revised 12/2018 1

# **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)
	<ul> <li>☐ Has a positive impact on the community</li> <li>☐ Can be completed before October 1st</li> <li>☐ Project results directly benefit Northeast NE</li> <li>☐ Is charitable in nature (which means it must focus on serving the public interest or common good)</li> <li>☐ Directly involves youth in the work and project completion</li> <li>☐ If the project benefits a community organization, that organization has been contacted and given permission (if applicable).</li> </ul>
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?
-	u have a video to submit, what is the link?  ase see contest guidelines for more detailed information about video submission.
If yo	ur project benefits a community organization or group, you must have permission from that group to
com	plete your project <b>BEFORE</b> you turn in this application. If this applies to you, who did you speak to?
Orga	inization Name:
Orga	inization Contact Person: Date:

## **Project Expenses**

How are you going to spend your project money? 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/Each		Total Cost (qty. x cost)
		Х	\$	Ш	\$
		Х	\$	II	\$
		Х	\$	=	\$
		Х	\$	=	\$
		Х	\$	=	\$
		Х	\$	=	\$
		Х	\$	=	\$
		Х	\$	=	\$
		Х	\$	=	\$
Total Amount Needed for this Project *			\$		

\* Project funding will equal your budget and will not exceed \$1000.

If your project exceeds your budget, how will you cover those costs?

<u>In-Kind/</u>	<b>Donations</b>

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

Item Description	<b>Donation Value</b>	Item Description	<b>Donation Value</b>

# **Project Application Checklist**

Youth Philanthropy Contest

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

Reviewed the 2019 Contest Guidelines	
Completed ALL sections on the Contact Information Sheet (page 1)	
Completed ALL questions on the Project Description Sheet (pages 2-3)	
Completed a DETAILED Project Expense Sheet (page 4)	
Reviewed the 2019 Event Details (page 6)	
Marked the required participation dates on your calendar:	
Youth Project Showcase (February 3 <sup>rd</sup> 2:30pm – 4:00pm)	
Project Kick-Off Pizza Party – Funded Projects Only (February 19 <sup>th</sup> 6pm – 7pm)	
Determined who will represent your project at these events	
Reviewed the sample project scoring rubric (page 7)	
Completed the Fundraiser Supplemental Application if your project is a fundraiser (page 8)	
Completed Consent/Media Release forms for EVERY participant (see page 9)	
Completed all pieces of my display and/or video (to be turned in with my application)	
Liked us on Facebook (Philanthropy Council of Northeast Nebraska)	
Followed us on Twitter (@YPcontest)	

## **Contact Information**

Youth Philanthropy Contest PO Box 714 Norfolk, NE 68702-0714

Kristi Carmichael, Contest Chair, 402-371-5734 Tracy Jacobsen, Project Coordinator, 402-841-1726 Callan Collins, Fund Coordinator, 402-379-9516

E-mail: <a href="mailto:youthcontest@philanthropycouncilne.org">youthcontest@philanthropycouncilne.org</a>

Website: www.philanthropycouncilne.org

#### **Youth Contest Event Details**

#### **Project Drop-off**

Projects can be dropped off at the Norfolk Public Library, 308 West Prospect Avenue, during the following times:

Friday, February 1st, 3:00-4:45 pm

Saturday, February 2<sup>nd</sup>, 9:30-11:30 am

**Business Casual Dress** 

#### **Youth Project Showcase**

Contest winners will be announced and participation is required at our Youth Project Showcase event. Each project must have at least one representative present. Participants will display their project and talk to potential funders during the Youth Project Showcase. Family members are invited to join us. Projects that are NOT funded through the contest may receive additional funding from guests at this event. Come ready to talk to people and sell your project idea.

The Youth Project Showcase is a free event.

# Youth Project Showcase Youth Philanthropy Contest Winners Announced!! Sunday, February 3<sup>rd</sup> 2:30pm – 4:00pm Norfolk Public Library 308 West Prospect Avenue, Norfolk

#### **Project Kick-Off Pizza Party**

If your project gets funded through the contest or a private donor, we will see you again for our Youth Contest Project Kick-Off. Each project must have at least one representative present. Each classroom or large group project should select 2-3 representations to attend. This is where you will meet your mentors, review project expectations and begin the first steps to completing your youth philanthropy project. Please RSVP in the box to the right.

#### **Youth Project Celebration**

We will wrap up the year with a final Youth Project Celebration in October. All funded projects will be expected to report on their success and the impact their project had. Details on the Celebration event will be announced at the Kick-Off event.

Project Kick-Off Pizza Party
Tues, February 19 <sup>th</sup> 6pm – 7pm Norfolk Public Library 308 West Prospect Ave, Norfolk Casual Dress
Project Name:
Participants attending the Project Kick-Off Pizza Party:
Food Allergies:
Circle your favorite pizza toppings: cheese pepperoni sausage vegetables beef ham

# **Youth Philanthropy Project Scoring Rubric**

Project Name:	Evaluator:	

Project Qualifications (Must have all Yes's to be scored)	No	No
Has a positive impact on the community		
Can be completed by October 1 <sup>st</sup> of this year		
Project results directly benefit Northeast NE		
Is charitable in nature		
Directly involves youth in the project work		
If the project benefits a community organization, that organization has been contacted and given permission (if applicable).		)

Judging Criteria	1-3	4-7	8-10	Score
Project designed to benefit community	Change is mainly superficial, limited community benefit, or is not unique	Change is mainly superficial, but unique benefits realized in community	Change is significant; new and unique benefits are realized in the community in a substantial way	
Participants understand their impact	Does not state or imply that impact will be made	Implies, but does not clearly state the impact that will be made by the project	Clearly and passionately states the impact the project will have on their community	
Easy-to-understand project and attainable goals	Unrealistic, confusing and goals are not understandable	Somewhat realistic, goals are stated, but not clear	Realistic, clearly defined, and goals are understandable	
Philanthropy displayed through the project	Does not demonstrate key components of philanthropy	Will demonstrate the true meaning of philanthropy with proper guidance	Clearly demonstrates philanthropy through project presentation and application	
Budget itemized and within project guidelines	Not itemized and/or not within project guidelines	Not itemized; fits in guidelines but lacks details	Itemized; fits within project guidelines; and is well researched	
Visual Presentation and Application	Messy and unattractive project display and application	Neat project display and application; appealing to the eye	Attractive project display and application; enhances the application	
			Total	/60

# **Fundraiser Supplemental Application**

For more information, see Youth Philanthropy Contest Guidelines

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

1)	What is the goal of your fundraiser (to make money, to raise awareness, etc.)
2)	<b>Explain how the money raised through the fundraising event would be used.</b> (who it would be donated to or if it would go to purchasing things for an organization, etc)
3)	Provide a detailed plan of action for hosting the fundraiser. (date of fundraiser, steps to get there, etc.)

# **Media Release and Consent to Participate**

#### Required of <u>each</u> contest participant – please make copies as needed

Philanthropy Council of Northeast Nebraska Contact Person: Kristi Carmichael Address: PO BOX 714, Norfolk, NE 68702-0714

Phone: 402-371-5734 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 N similar promotional purposes.	Northeast Nebraska may use my comments เ	ipon approval for		
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 April Marten, her contact information is listed at the top of this page.				
I have read and understand the above:				
Participant Printed Name	Participant Signature	Date		
*Parent/Guardian Printed Name *Required if participant is 18 years of age or younger	*Parent/Guardian Signature	Date		
Mailing Address:				
City:	State:	Zip:		
Club or Organization (if applicable)				

# Comunicado de prensa y consentimiento para participar

#### Requisito de cada participante del concurso – por favor, haga copias según sea necesario

Comité de Filantropía del Noreste Nebraska Persona de Contacto: Kristi Carmichael Dirección: PO BOX 714, Norfolk, NE 68702-0714

Teléfono: 402-371-5734 Correo electrónico: youthcontest@philanthropycouncilne.org

#### Permiso para Fotografiar / Citar

Nombre de Participante:

Estoy de acuerdo en que el Comité de Filantro sin mi nombre y para cualquier propósito legal promoción, propaganda y contenido de web.	·	J
También estoy de acuerdo que el Comité de Fi sobre aprobación para propositos promocione	•	puede usar mis comentarios
Entiendo que el Comité de Filantropía del Nord Area Comunitaria de Norfolk y estan afiliados o Fundación, una organización no por ganancia, movilizar obras de caridad en dar apoyo para e Nebraska . Además, entiendo que no recibiré	con fondos de la Fundacion de C que existe para ayudar a los ciu el mejoramiento de las comunid	omunitari Nebraska Comunidad dadanos preocupados en ades y organizaciones de
Como padre, yo entiendo que mi niño(a) desea tengo alguna pregunta me puedo comunicar o superior de esta página. He leído y entiendo lo anterior:		
Nombre impreso de participante:	Firma de participante	 Fecha
*Nombre impreso del padre *Required if participant is 18 years of age or younger	*Firma del padre	Fecha
Dirección:		
Cuidad:	Estado:	Código postal:
Club o Organización: (si es applicable)		