

# **JO DAVIESS COUNTY 708 MENTAL HEALTH BOARD**

## ***Format for 708 Funding Requests***

The following format is for use by organizations requesting funds from the Jo Daviess County 708 Mental Health Board. This format must be followed by each organization to provide sufficient information for the Board to make an informed decision in the allocation of funds.

**This application is to total no more than 12 pages.**

## **SECTION ONE – GRANT AMOUNT REQUESTED**

***To request funds for the coming fiscal year, please fill out the following Grant Schedule and provide a narrative description that includes the supporting information requested below.***

### **SCHEDULE FOR GRANT \***

Services to be Funded & Key Statistic (i.e. numbers served)	Four (4) Equal Payments	Maximum Payment Per Year
		<b>TOTAL REQUESTED</b>

### **NARRATIVE INFORMATION TO SUPPORT FUNDS REQUESTED ABOVE:**

Total grant amount requested and program(s) or service(s) to be funded by the Jo Daviess County funds.

Description of the plan for the program(s) to be funded by this grant.

The total budget for this program and also the specific budget for Jo Daviess County including income, expenses, and numbers of persons served.

List of other sources of funding for this program.

Description of the impact on this program if funds are not granted.

## ***Format for 708 Funding Requests, cont.***

### ***SECTION TWO – PREVIOUS 708 GRANT***

Describe how the previous year's 708 Grant was used, and include an evaluation of the program or programs funded.

Identify the other services you provide for persons with mental health needs, developmental disabilities, substance use disorders, or persons affected by sexual or domestic violence.

Provide examples of demonstrated or documented successes with clients in the past year.

### ***SECTION THREE – YOUR ORGANIZATION***

Purpose of organization

Brief summary of services offered to clients

Geographic area served

Brief history of origin

Current Board Members

Current staff members (designate full or part time)

### ***SECTION FOUR - FUNDRAISING***

Describe efforts and results of fund-raising your agency has done during this past year.

Identify plans for fundraising in the next fiscal year.

### ***SECTION FIVE – COOPERATIVE EFFORTS IN JO DAVIESS COUNTY***

Describe efforts and successes by your agency to cooperate and work with other 708 funded organizations in Jo Daviess County. Include your recommendations to the 708 Board to reduce duplication of efforts and expenses.