

DARE TO DREAM
GRANT PROGRAM APPLICATION



IMAGINE SOMETHING BIGGER



Ann Bancroft
FOUNDATION



DARE TO DREAM GRANT PROGRAM

Fund Art, Cultural, Leadership, Educational, & Outdoors/Wilderness Experiences for girls in grades 4-12 allowing them to begin exploring the outside world and begin recognizing their own abilities, values and strengths in the process.

GUIDELINES AND CRITERIA FOR GIRLS

- Girls in grades 4-12 are eligible (exchange students do not qualify).
- Applicants must reside in Minnesota.
- Requests cannot exceed \$500.
- The activity being funded must begin after the grant notification date (May 20 or November 20).
- Activity being funded must be completed by high school graduation.
- Former Ann Bancroft Foundation grantees may not reapply (one-time grant).
- **Each applicant must have a non-immediate family adult mentor (not the girl's mother, father, sister, brother, aunt, uncle) who will guide and support her through the application process and, if funded, support her through the activity.**
- **Parent/guardian and/or mentor cannot be the same as Activity Provider.**
- Applications must be completed and signed by applicant, mentor, and the parent/guardian.
- Dare to Dream Grant applications requesting items for purchase such as computers, cameras, and other tangible items are not fundable.
- Late, incomplete, and/or group applications will not be considered.

GRANT APPLICATION DEADLINES:

Spring—April 1 or Fall—October 1

For any questions, please call 612-338-5752 or e-mail info@annbancroftfoundation.org

OTHER IMPORTANT NOTES:

- Each application received will be screened by a representative from the Ann Bancroft Foundation (ABF) before going to the granting committee to ensure that it is complete and valid. If you have any questions, please contact ABF at info@annbancroftfoundation.org or 612-338-5752.
- Applicants will be notified of their grant status on or before the grant notification date—all decisions are final.
- The check for the activity will be made out to the organization providing the activity as listed on the application.
- Grant checks will be made out to only ONE activity provider and sent directly to the activity provider a few weeks after notifications have been sent.
- For any check cancellation requests due to lost or stolen checks, there will be a \$31 fee expensed to the grantee.
- If a grantee has not used her grant award and is no longer able to participate in the activity she applied for in her grant application, she may return the funds and withdraw her application. Once all funds are returned and the application is withdrawn, she is eligible to re-apply in future grant cycles should she meet all other grant guidelines and criteria.
- If for some reason all proceeds from the grant are not used, the grantee will return those funds to Ann Bancroft Foundation as soon as possible.
- Each grantee and mentor will be required to complete a post-activity follow-up survey to share their grant and activity experience with Ann Bancroft Foundation.

TO COMPLETE AND SUBMIT YOUR GRANT APPLICATION:

Online: www.annbancroft.fluidreview.com

Email: info@annbancroftfoundation.org

Mail: Ann Bancroft Foundation, 211 North 1st Street, Suite 480, Minneapolis, MN 55401

Fax: 612-339-2192

For your reference, The Ann Bancroft Foundation (ABF) does not investigate or inquire into the qualifications, competency, safety, or appropriateness of the activity, program, providers or mentor for which the grant application was made. ABF is a granting organization only and relies upon the applicant, mentors and activity providers to determine the propriety and safety of any given activity or program for a grantee. Therefore, by distributing a grant, ABF does not endorse or make any other representations regarding the chosen activities, programs, providers or mentors. The grantee's participation in any given activity or program will be governed by the activity provider's terms or use or activity requirements.



THE ROLE OF MENTORS

A mentor is someone who can support a youth as they navigate new territory. Having emotional support to fall back on in moments of self-doubt provides a level of comfort when trying new things (such as applying for a grant!).

The role of a mentor is multi-faceted, may be formal or informal, and may change or evolve as the needs of the mentee change. A mentor can be a role model, coach, sounding board, voice of reason, emotional support, counselor, and should be a trusted resource.

WHAT DOES A MENTOR DO?

- Share knowledge and life experiences
- Provide guidance and advice
- Listen, coach, support
- Offer encouragement
- Be open and honest
- Discuss goal setting
- Identify resources
- Help to develop leadership skills
- Advise on personal and professional development
- Help overcome obstacles and adversity
- INSPIRE

WHY MENTOR?

- Mentoring guarantees young people that someone genuinely cares about them, assures them they are not alone in dealing with challenges, and makes them feel like they matter.
- Research confirms that quality mentoring relationships have powerful positive effects on young people in a variety of personal, academic, and professional situations.
- Mentoring connects a young person to personal growth and development, and social and economic opportunity.

GUIDELINES AND CRITERIA FOR MENTORS

PLEASE MAKE SURE YOU ARE ELIGIBLE:

- **You are not an immediate family member** (parent, guardian, brother, sister, aunt, uncle). Immediate family member is defined as: biological parent or individuals who act as parents to children who have been legally adopted, are foster children, stepchildren, or legal wards.
- **You are not the activity provider, nor are you employed by the activity provider.** You will not derive personal financial gain in any way from the activity provider.

PLEASE BE SURE YOUR MENTEE IS ELIGIBLE FOR AN ANN BANCROFT FOUNDATION GRANT:

- She is a resident of Minnesota (exchange students do not qualify).
- She meets the age and grade guidelines for the program to which she is applying.
- She has never received an Ann Bancroft Foundation grant previously.
- She needs this grant support in order to realize her potential.

YOUR RESPONSIBILITIES AS A MENTOR FOR AN ANN BANCROFT FOUNDATION GRANT APPLICANT ARE:

- Guide your mentee during her path to completing her goals and obtaining her dreams.
- Encourage your mentee to develop strength, a frame-of-mind, and self-confidence so she may become self-sufficient and independent.
- Inspire her to reach her full potential and overcome her fears.
- To oversee all aspects of the application process, making sure that the application is complete and questions thoughtfully answered.
- The grant selection is based upon the girl's answers as well as the mentor's answers, so please make sure that both sections contain complete information and that the grant is received in the Ann Bancroft Foundation (ABF) office on the date it is due as posted at AnnBancroftFoundation.org via postal service (postmark date accepted), email, fax, or online application website.
- To submit a post-activity follow-up survey and to ensure that your mentee also completes her post-activity follow-up survey within six weeks of the completion of her activity.
- Each application received will be screened by a representative from ABF before going to committee to ensure that it is complete and valid. If you have any questions, please contact the ABF at info@annbancroftfoundation.org or 612-338-5752.

88% Eighty-eight percent of grantees indicated that without the Ann Bancroft Foundation they would not have been able to participate in their dream or know if it would be possible.



PART A: APPLICATION COVER SHEET

Please print clearly and ensure each section is complete. Incomplete applications will not be considered by the granting committee. Submit the original completed forms prior to deadline and make copies for your mentor and you to keep.

Application Program : **Dare to Dream**

Grant Year: _____ Grant Cycle: Spring Fall

Girl Name (first and last): _____ Date Submitted: _____

Home Street Address: _____

City/State/Zip: _____

County: _____

Phone: _____ Type: Home Mobile Other

Email: _____

Preferred Method of Contact: Phone E-mail

Date of Birth: _____ Age at time of application: _____

Grade: _____ School Girl Attends: _____

Ethnic Background (check all that apply):
 Asian American African American Caucasian Hispanic Hmong Native American
 Pacific Islander Somali Other (please specify): _____ Choose not to share

How did you hear about this grant?:
 Friend/Family Neighbor School/Teacher Coach/Group Leader E-Newsletter Social Media
 Television/Radio ABF Website Online search Print Media Other

If you were referred by someone or an organization, what is their name? _____

Parent/Guardian Name (first and last): _____

Home Street Address (if different from applicant): _____

City/State/Zip: _____

Phone: _____ Type: Home Mobile Other

Email: _____ Type: Personal Work

Preferred Method of Contact: Phone E-mail

Mentor Name (first and last): _____

Mailing Address: _____

City/State/Zip: _____ Type: Home Work

Phone: _____ Type: Home Mobile Other

Email: _____ Type: Personal Work

Preferred Method of Contact: Phone E-mail

Grant/Activity Description: _____

Grant Request Amount: _____ Total Cost of Activity: _____

Activity Start Date: _____ Activity Registration Date (if applicable): _____

Activity Provider Name (as would be written on grant check): _____

Activity Contact Name (first and last): _____

Activity Mailing Address: _____

Activity City/State/Zip: _____

Activity Phone: _____ Activity Email: _____

FOR OFFICE USE ONLY

Date Received: _____ Reviewed By: _____ Data Entry Date: _____

Notes: _____



PART B: GIRL APPLICATION

Applicant Name (first and last): _____

Application Program : **Dare to Dream**

Grant Year: Grant Cycle: Spring Fall

This section must be completed fully by the girl to be considered by the selection panel. Please answer the following questions on a separate sheet(s) of paper, answering clearly and thoroughly in your own words. The more detail you can share about your activity and dream, the more we will be able to understand.

1. What activity are you looking to participate in with this grant?

2. Why do you want to participate in this activity?

3. What is your dream related to this activity?

4. What do you hope to learn or accomplish from this activity?

5. Is anyone helping you achieve your dream? If so, who?

6. Are you raising additional money to make participation in this activity possible? If so, how?

7. Please provide a short cost breakdown for this activity (how much it costs, etc.).

8. Optional: Attach brochures and/or information web links about the activity if available.

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PART C: MENTOR APPLICATION

Mentor First and Last Name: _____

Phone: _____ Type: Home Mobile Other

E-mail: _____

Preferred Method of Contact: Phone E-mail

Mentee First and Last Name: _____

Please answer the following questions on behalf of your mentee:

1. How do you know/what is your relationship to your mentee?

2. Why do you feel that this experience will be important to this girl?

3. What criteria do you use to assess the need of the applicant?
For example, financial need, personal challenges, or other barriers?

4. Why is this a good time for this girl to participate in this activity?

5. What do you hope your mentee will learn or achieve from this experience?

6. How will you support your mentee in her activity?



PART D: APPLICATION CHECKLIST AND SIGNATURES

The following information is complete and included in this application:

Part A: Application Cover Sheet

Part C: Mentor Application

Part B: Girl Application

Part D: Application Checklist and Signatures

REMEMBER: Make copies of all application materials for yourself and your mentor before submitting to Ann Bancroft Foundation for consideration.

I have fully completed all sections and questions in my application for a Dare to Dream or Let Me Play grant. I have read (or was read to) and understand all the requirements and guidelines to be considered for a Dare to Dream or Let Me Play Grant. I am aware of all deadlines for the application process and the consequences of not meeting those deadlines. I acknowledge that the Ann Bancroft Foundation (ABF) does not investigate or inquire into the qualifications, competency, safety, or appropriateness of the activity, program, providers or mentor for which the grant application was made. ABF is a granting organization only and relies upon the applicant, mentors and activity providers to determine the propriety and safety of any given activity or program for a grantee. Therefore, by distributing a grant, ABF does not endorse or make any other representations regarding the chosen activities, programs, providers or mentors. The grantee's participation in any given activity or program will be governed by the activity provider's terms or use or activity requirements. Should any major plans change once I have applied and/or been granted funds, I will contact the appropriate Ann Bancroft Foundation staff.

Girl signature: _____ Date: _____

I assisted my mentee in completing this application and have reviewed all sections and questions to ensure its accuracy. I am aware of the requirements and guidelines of the Dare to Dream/Let Me Play grant that my mentee is applying for and will continue to support her throughout the completion of her activity. I acknowledge that the Ann Bancroft Foundation (ABF) does not investigate or inquire into the qualifications, competency, safety, or appropriateness of the activity, program, providers or mentor for which the grant application was made. ABF is a granting organization only and relies upon the applicant, mentors and activity providers to determine the propriety and safety of any given activity or program for a grantee. Therefore, by distributing a grant, ABF does not endorse or make any other representations regarding the chosen activities, programs, providers or mentors. The grantee's participation in any given activity or program will be governed by the activity provider's terms or use or activity requirements. Should any major plans change once she has applied and/or been granted funds, I will contact the appropriate Ann Bancroft Foundation staff.

Mentor signature: _____ Date: _____

I recognize that it is the applicant and mentor's responsibility to fulfill the requirements for a Dare to Dream or Let Me Play grant, including all deadlines, and understand she must uphold all guidelines. I acknowledge that the Ann Bancroft Foundation (ABF) does not investigate or inquire into the qualifications, competency, safety, or appropriateness of the activity, program, providers or mentor for which the grant application was made. ABF is a granting organization only and relies upon the applicant, mentors and activity providers to determine the propriety and safety of any given activity or program for a grantee. Therefore, by distributing a grant, ABF does not endorse or make any other representations regarding the chosen activities, programs, providers or mentors. The grantee's participation in any given activity or program will be governed by the activity provider's terms or use or activity requirements. Should any major plans change once she has applied and/or been granted funds, I will contact the appropriate Ann Bancroft Foundation staff.

Parent/guardian signature: _____ Date: _____

Send the completed forms to:

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