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**AREV MA Initiative 2019**

**Grant Request for Proposa**l

**Applications are due Friday, March 15, 2019 by 5:00 pm**

Synagogue Council of Massachusetts (SCM) is pleased to announce The AREV MA Initiative, four grants of $1,800 each, to support the development of innovative programming for both young leaders of any gender (ages 22-45) and women’s mentorship and leadership in congregations throughout the state. The endeavor furthers SCM’s mission to support congregations as vital centers of Jewish life.

The AREV MA Initiative honors and continues the legacy of Anita Redner, who had an immeasurable impact on the Boston Jewish community. AREV is a Hebrew word that means “connected” or “beautiful.” For SCM it stands for **A**nita **R**edner **E**mpowerment **V**ehicle, an initiative that is intended to perpetuate her legacy.

**Goals of the Grant:**

* To encourage the development and implementation/expansion of meaningful and impactful programming that will cultivate young leaders of any gender (ages 22-45) within congregational life.
* To support and enhance women’s mentorship and leadership by identifying areas of growth, encouraging the continued development of female involvement in all aspects of synagogue life *(i.e. from service leader, Torah reader, leading committees and initiatives to the Presidential path).*
* To advocate for collaboration with other congregations/agencies and work across denominational lines
* Serve as models of creativity and innovation that can be shared and replicated in other congregations/communities

For the purpose of process, ***innovative*** is defined as meeting one or more of the following:

* Creating something new in the congregation that responds to an unmet need
* Adding a new component to an existing program
* Redesigning an existing program in a creative way in order to increase the impact

**Grant Preferences:** Preference may be given to programs that:

* Involve collaboration between more than one congregation, especially across denominational lines, underscoring the value of Jewish pluralism
* Involve partnership between a congregation and another type of institution, Jewish or otherwise
* Showcase creativity and collaboration

**Synagogue Council of Massachusetts**

**Grant Application**

**Eligibility Criteria and Guidelines:**

To qualify, eligible applicants must be a registered 501(c)3 and be a dues paying member of Synagogue Council of Massachusetts. Multiple applications are permitted, but no more then one project will be funded for any individual synagogue.

Congregations must designate a person who will be responsible for staying in touch with the AREV MA Initiative Steering Team throughout the year.

All program/project publicity must include a Synagogue Council of Massachusetts logo and include the following statement: *“This program is supported by a grant provided by the Synagogue Council of Massachusetts.”*

All events/programs must also be posted on JewishBoston.com and shared in calendar sections of local papers, and electronic newsletters with the congregation and greater community.

**Grant Amounts & Use:**

Four grants will be awarded in the amount of $1,800 each to support new programs or the expansion of existing programs.

Grants can be used to cover expenses directly related to implementing new programs or expansion of existing programs such as outreach, marketing, supplies, materials, events or local travel. Grants cannot be used for salaries (i.e. salaried employees), non-local travel, gift cards, scholarships, or capital projects.

**Application and Grant Timeline:**

**Activity Month**

* Grant Application process opens January 3, 2019
* Grant application due electronically or by mail March 15, 2019
* Awardees notified April 16, 2019
* Funds awarded and grant year begins July 1, 2019
* Mid-year written report due & in person check-in January 2020
* End-of-year report and self assessment June 10, 2019

Mid-year and End-of year reports will be followed by an in person check-in with an AREV MA Steering Team Member.

Along with the funds, The AREV MA Initiative Steering Team will provide support and resources for recipients to maximize the impact of their programs.

**Applications are due by email** *(either as a PDF or word file. Please include AREV MA Grant Proposal in email subject line)* **or mail to David Bernat, Executive Director at dbernat@synagoguecouncil.org, March 15, 2019 by 5:00 pm.** Late applications will not be considered. Mailing Address: Synagogue Council of Massachusetts, 1320 Centre Street, #306, Newton Center, MA 02459. **For more information please call 617.244.6506 ext. 18.**

**Synagogue Council of Massachusetts**

**Grant Application**

**Name of Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Federal Tax ID Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Program/ Project Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Grant Contact Name & Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Executive Director/ Congregational Administrator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Senior Rabbi: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Congregation’s Website: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Total Program Budget: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Number of People to be served by program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Program Description:** Briefly describe the proposed program/project and purpose, and specifically how the money will be used. Please include if this is a new venture or an expansion of an existing project.
2. **Timeline:** If the money is awarded, what is the projects’ timeline for implementation?
3. **Core Mission:** describe how this program fits within the scope of your congregation’s core mission.

**Synagogue Council of Massachusetts**

**Grant Application**

1. **Target population:** What is your program’s target population and how does your congregation involve them in its organization/program planning process?
2. **Goals and objectives:** What are the goals and specific, measurable objectives for the program? Briefly describe both the immediate and long-term results anticipated from this project/program.
3. **Evaluation:** How do you plan to evaluate the success/impact of the program? Please explain how you will measure the program’s success/impact. Please include anticipated outcomes and indicators of success. How will results be used for program planning?
4. **Staffing:** Summarize the qualifications of the key individuals involved in carrying out the plans outlines in this request.
5. **Collaboration:** will your program involve collaboration with other organizations? Please describe the nature of the collaboration and with whom.
6. **Sustainability:** Please address the sustainability of the program beyond the timeline of this funding and provide long-term strategies for funding. How will the program be funded in the future?
7. If the grant is accepted, can your Congregation be represented at the Synagogue Council of Massachusetts Gala to be held the evening of May 23, 2019?

**Synagogue Council of Massachusetts**

**Grant Application**

**Total Program Budget**

**Time Period Represented: To**

|  |  |  |  |
| --- | --- | --- | --- |
| **Expenses** | **Amount** | **Revenues** | **Amount** |
| Supplies/Materials  | $ | In-Kind | $ |
| Printing/Publication | $ | Individuals  | $ |
| Food/Beverage | $ | Organizational Contributions | $ |
| Postage/Shipping | $ | Other Funding: Specify | $ |
| Marketing/Advertising | $ |  |  |
| Equipment | $ |  |  |
| Evaluation | $ |  |  |
| Other: Specify | $ |  |  |
|  |  |  |  |
|  |  |  |  |
| **Total Expenses** | $ | **Total Revenue** | $ |

**Additional Information you wish to share:**

**Synagogue Council of Massachusetts**

**Grant Application**

**Certification and Acceptance:** I certify that this request has been authorized by the governing body. I certify this organization does not discriminate on the basis of sex, age, race, color, sexual orientation, nationality, or disability. I certify the statements herein are true and complete to the best of my knowledge, and accept the obligation to comply with the terms and conditions if a grant is awarded as a result of this application.

By signing below, I acknowledge agreement with the enclosed Certification and Acceptance.

**Submitted by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Print Name Signature**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**