Hiwela Youth Campership Program

Oshkosh Area Community Foundation

PROPOSAL OVERVIEW

Program Name*

Character Limit: 100

Grant Start Date*

The Foundation will only consider funding requests for programs or services that have not yet occurred.

Character Limit: 10

Grant End Date*

Character Limit: 10

Grant Amount Requested*

Character Limit: 20

Annual Organization Operating Expenses*

Character Limit: 20

Executive Summary*

Briefly describe your campership request.

Character Limit: 1000

PROPOSAL DETAILS

Target Population*

What are your criteria for deciding who receives campership assistance? How many Winnebago County youth would be directly affected by the requested campership grant?

Character Limit: 3000

Camp Experience*

What is the typical length of the camping experience? Describe the camp activities and benefits for youth receiving camperships.

Character Limit: 3000

Campership Assistance*

What is the average camper scholarship amount? Remember that the amount of financial assistance provided by a Hiwela Campership to any individual cannot exceed 50% of the per

camper cost to attend camp. How much do youth without scholarships pay for the same camp experience?

Character Limit: 3000

Program Budget*

List the specific breakdown of how the requested campership dollars would be used.

Character Limit: 3000

Past Grant*

Did your organization receive a Hiwela Campership Grant last year?

Choices

Yes

No

REPORT ON PAST GRANT

Impact*

How many Winnebago County youth received camperships? What was the average scholarship amount for these youth?

Character Limit: 1000

ADDITIONAL INFORMATION

Additional Information

You may upload any additional information relevant to this request that you think would be helpful in the grant review process like a thank you letter from a Hiwela Campership recipient. Please note that videos cannot be uploaded, but you can include a link to an online video in the text area.

Character Limit: 1000 | File Size Limit: 25 MB