**Donors Are Heroes *Spirit for Life* Grant Program Application**

*(Please print or type)*

**2024 - 2025 APPLICATION CYCLE**

*Early Application Deadline: November 29, 2024 5:00pm*

*Late Application Deadline: January 12, 2025 5:00pm*

*Project Period: Until June 2025*

The *Spirit for Life* Grant Program provides financial support to Philadelphia County high schools to create new and innovative projects which provide sustainable organ and tissue donation-related learning opportunities for their students and/or enhance, supplement, and enrich existing programs.

Lead Teacher Responsible for Project

School

Address

Email Phone Fax

*(To be completed by applicant)*

I am employed by a high school in the County of Philadelphia (public, charter, parochial, or private).

I have notified and received approval from a school administrator for my application for this grant.

If I receive funding for this project, I will adhere to all program requirements & guidelines, which include:

1. Submission of a signed project agreement/grant application confirming project information and budget items.
2. Submission of a mid-grant and final report as requested by Gift of Life Donor Program.
3. The proposal will be implemented as described herein. Any changes must be approved by Gift of Life Donor Program.
4. Any publicity regarding the project shall name Gift of Life Transplant Foundation (a charitable organization supporting the mission of Gift of Life Donor Program) and Donors Are Heroes as the funding source, and copies of any publicity will be provided to both funders.
5. All project activities are in accordance with school district policies and procedures, including releases needed to waive student and adult participant claims for using their image(s) in photographs, slides, film, videotapes, audiotapes, or other audiovisual representations.
6. Full and complete permission is given without restriction to Gift of Life Donor Program, Gift of Life Transplant Foundation, and/or Donors Are Heroes to use projects (in full or part) for promotion and public relations.

Signature and Date

*(To be completed by applicant’s supervisor)*

This is to certify that all information contained herein is accurate, complete, and current, and that the proposed project

is in accordance with school district policies and procedures.

Supervisor’s Signature and Date

Print Supervisor’s Name and Title

## GRANT APPLICATION GUIDELINES

#### SUMMARY

Gift of Life Donor Program and Donors Are Heroes partner with Philadelphia high schools to implement campaigns that will increase education and organ & tissue donor designations in Philadelphia County through grants of up to $5,000 per school. Grants can be used to initiate a program or to enhance existing activities of schools currently promoting organ and tissue donation. Schools that have received a grant in the past can reapply for continued education if the new grant proposal expands on past activities or reaches a different audience. The primary purpose of the grant is to supplement classroom teaching on organ and tissue donation and to give students the skills and experience of sharing the message with their peers and communities.

#### ABOUT GIFT OF LIFE DONOR PROGRAM

Gift of Life Donor Program is the non-profit, federally designated organ procurement organization, serving 11.3 million people across the eastern half of Pennsylvania, southern New Jersey and Delaware. Its annual donation rate ranks among the highest in the world. Since 1974, Gift of Life has coordinated more than 58,000 life-saving organs for transplant, and more than two million tissue transplants have resulted from the generosity of donors and their families. One organ donor can save the lives of up to eight people, and a tissue donor can enhance the lives of more than 100 others. For more information or to register, visit [donors1.org.](file:///C:\Users\ToddF\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\0IJ7E9AZ\donors1.org)

**ABOUT DONORS ARE HEROES**

Organ Donors Are Heroes, founded in 2001, is a committed group of volunteers supporting the Gift of Life Donor Program and its charitable supporting organization, Gift of Life Transplant Foundation. Its mission is to raise public awareness about the importance of becoming an organ and tissue donor and to dispel the myths surrounding this process.

#### TIMETABLE

Grant applications are reviewed by members of the Donors Are Heroes Committee, a volunteer group supporting the mission of Gift of Life Donor Program. **Half (50%) of the total grant award will be distributed to the school within three weeks of project approval. The other 50% of the grant award will be released after an update is received that shows clear progress toward the overall project goal.** The grant project period will run until June 2025.

#### EVALUATION AND MONITORING

As a condition of accepting the funds, applicants will be required to document project activities, document financial expenditures, submit samples of outreach programs, submit periodic information/reports and meet with grant representatives for overall management and monitoring. **In May or June 2025, each school will be required to attend an event at Gift of Life Donor Program to showcase their grant projects to the funding committee.** All grant recipients must complete a final report form which will be provided by Gift of Life.

**ACCEPTANCE OF LIABILITY & INDEMNIFICATION**

As a condition of accepting the funds, applicants accept all liability associated with their use of the funds and agree to indemnify and hold harmless Gift of Life Donor Program, Gift of Life Transplant Foundation, Gift of Life Howie’s House and their officers, directors, employees, volunteers, and agents, from and against any and all actions that arise directly or indirectly from an applicant’s use of the funds, together with any claims, causes of action, proceedings, liabilities, or costs (including reasonable attorneys’ fees).**SUBMISSION INSTRUCTIONS**

# APPLICATION PROCEDURE

All applicants must adhere to these instructions to be eligible for review. Applicants must submit the completed cover letter and application form typed (or neatly handwritten), double spaced and no less than 12-point font. One original completed application with signature must be submitted.

**RESOURCES**

Gift of Life Donor Program will provide free educational materials, speakers, and overall guidance to help make the program a success. For additional educational information, visit: <https://www.donors1.org/about-gift-of-life/community-outreach/high-school-programs-and-resources/>

**Application Deadlines:**

*Early Application Deadline: November 29, 2024 5:00pm*

*Late Application Deadline: January 12, 2025 5:00pm*

*Project Period: Until June 2025*

* Original application can be hand-delivered or mailed through US Postal Service, UPS, or FedEx.

Submit one original hard copy of the completed application packet to:

**Greta McKnight**

**Community Relations Coordinator**

**Gift of Life Donor Program**

**401 North 3rd Street**

**Philadelphia PA 19123**

* Questions should be directed to Greta McKnight at 215-557-8090, ext. 1154 or by email at [gmcknight@donors1.org](mailto:gmcknight@donors1.org). Contact Greta for the electronic version of the grant application.

All applications are retained by Gift of Life Donor Program and will not be returned to the applicant.

# PAST PROJECTS

The following are activities have been successfully implemented by past partner schools. Feel free to replicate one of the examples below or to create your own. Each school is encouraged to work within a framework that is suitable for its unique community.

* Video public service announcements addressing common myths about donation
* Student donation skits and performances focused on dispelling common myths about organ and tissue donation
* School displays with donation information and pictures of school supporters of donation
* Student project leaders teaching their peers about donation
* A webpage featuring student donation projects
* Speakers for students and teachers sharing their connection to donation
* Participation in Gift of Life public activities such as the DASH for Donor Awareness *(April 2025)*
* T-Shirt and poster contests for students
* Student research projects
* Presentations at Health Occupations Students of America (HOSA) conference
* Creation of a student club to promote donation
* Article in a school newsletter or community newspaper

## DONORS ARE HEROES GRANT APPLICATION FORM

*(Please print or type and include school name and page number at the bottom of each page of your application.)*

**The following completed items are required for an application packet to be reviewed:**

1. **Application Cover Sheet** signed by applicant and applicant’s supervisor.
2. **Application Form** (Attach separate sheets if necessary)
3. **Budget Form** (Attach separate sheets if necessary)

**Incomplete applications will not be considered.**

**Applications will be evaluated based on the following criteria:**

* **Project goals -** Goal(s) should be clearly stated, measurable, realistic, and aligned with those of the grant program.
* **Need for project –** A reasonable and clear need should exist for this project that is not addressed by the current school curriculum.
* **Project description –** How the project will address the need and meet goal(s) should be clearly described including methods/activities, materials, resource personnel, and timeline. Focus should be given to using multimedia projects to reach the entire school and surrounding community.
* **Impact of the project -** Project should positively impact learning, and the extent of impact should justify the investment in the project. Applications will be judged on how many people will be reached during the program.
* **Project evaluation plan -** An evaluation plan should be provided which will clearly measure the success of the project in meeting project goal(s) and addressing identified need. **Additionally, all projects will use an attitude survey tool either as part of the project plan, or as a stand-alone survey**. Gift of Life can provide the survey tool if needed.
* **Budget -** Budget should thoroughly reflect funding for project activities, be reasonable, and show cost-effective use of Transplant Foundation funds. **Two thousand dollars ($2,000) is the limit for any single piece of equipment (for example: a computer, a video projector, lab equipment**). The committee will review grant funding requests during the review process. **The awarded grant total may be less than the requested amount. Schools that have received grants in recent school years may receive reduced funding.**

*(Please provide information about your proposed project by completing the following items.   
You may attach additional pages if necessary.)*

**Project Title:**

**ALIGNMENT WITH GRANT PROJECT GOALS:** At least one goal must be selected.

*Check as many as apply:*

**□ Project provides organ and tissue donation-related learning opportunities.**

**□ Project is new and innovative yet reinforces the goal of sustainability.**

**□ Project enhances, supplements, and enriches an existing program.**

## Grant Project Description

1. **PROJECT GOALS:** List the goal(s) of your proposed project.

### NEED: How does the project focus on a need not addressed by the current curriculum or program? How will the project educate the school community about organ and tissue donation? Describe the age groups and/or community that you expect to reach with your proposed project/activity.

### PROJECT DESCRIPTION: Describe your project including methods/activities, materials needed, resource personnel, and a timeline with completion date. Timeline should include tentative dates for activities such as school assemblies, poster presentations, class presentations, etc. Describe specific project/activities planned for the grant (include date and time). Describe how you will implement the program/activities.

1. IMPACT AND SUSTAINABILITY: Describe how the project will positively impact learning. Include the number of staff, teachers, students, and community members anticipated to be affected by the project. Address how this grant will enhance the sustainability of organ and tissue donation-related education at your school. If you have previously been awarded the *Spirit for Life* grant, please describe how your project/activity will be changed or improved to engage a larger or different audience.
2. EVALUATION: How will you measure the effectiveness of your project/activity (i.e. register new organ donors, program evaluation, the number of participants, etc.)? How will you determine whether your goal(s) have been achieved? What measurement tool(s) will you use? If surveys are used, how will they be distributed to students (teachers/staff/parents, etc.) and tallied for results?
3. BUDGET: Include a detailed, itemized budget for the entire project, indicating how grant funds will be spent and for what purpose. Please include other funding sources, if applicable. *Use the Grant Budget Form and additional pages to provide this information.*

## GRANT BUDGET FORM AND INSTRUCTIONS

1. Grant requests should be within the range of $1,000 to $5,000.
2. The lead teacher or her/his supervisor named on this application cover sheet will purchase all approved items.
3. The budget form must be filled out for each line item.
4. If a line-item cost is shared between Donors Are Heroes and another funding source, please detail what amount will be charged to Donors Are Heroes, and what amount will be charged to the other funder. Name the other funding or donation source.
5. If your budget and/or your project change through the course of project activities, an amended budget sheet must be submitted.

|  |  |
| --- | --- |
| Donors Are Heroes Will Fund: | Donors Are Heroes Will Not Fund: |
| * One single piece of equipment up to $2,000 (e.g., computer) | * Equipment installation costs not included with purchased item(s) |
| * Contracted services | * Salary and/or benefits for school district employees |
| * Honoraria and other fees for non-school employees (e.g., guest speakers) | * Salary for substitute teachers |
| * Mileage and travel | * Out-of-state trips |
| * Materials, supplies, equipment, computer software | * Similar equipment as purchased by school in previous *Spirit for Life* grants |

**Total Grant Request**: $\_\_\_\_\_\_\_\_\_\_\_\_

* + I would like Gift of Life to purchase my electronic equipment and subtract the total from my grant award.

**SAMPLE LINE-ITEM PROJECT BUDGET**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Item** | **Vendor/Contractor** | **Why this item is needed for your project** | **Unit Cost** | **Quantity** | **Total Cost** | **Funding Source** (Grant, Other Funder, School, Donation, etc.) |
| Teaching Torso | Torsos Unlimited | Use in Anatomy and Health Class | *$500.00* | *1* | *$500.00* | DAH Grant |
|  |  |  |  |  |  |  |

**Complete the following budget form for all items for your project for which you are requesting Donors Are Heroes funding. Use additional pages as needed.**

**LINE-ITEM PROJECT BUDGET**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Item** | **Vendor/Contractor** | **Why this item is needed for your project** | **Unit Cost** | **Quantity** | **Total Cost** | **Funding Source** (DAH Grant,  Other Funder, School, Donation, etc.) |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

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