

Auxiliary Mission Statement:

The purpose of this organization is to render service to St. Luke's McCall Medical Center, its patients and community, and to assist St. Luke's McCall in promoting the health and welfare of the community in accordance with objectives established by the governing board of the hospital.

2023 Grant application will be accepted from:

- Community Children's Medical Fund
- Community Medical Fund (adult health services and programs)
- St. Luke's McCall Complex Care
- St. Luke's McCall Brighter Smiles
- Non-profit organizations for health-related projects

Eligibility:

Your organization must be a 501(c)(3) non-profit in order to apply. Proof will be required.

How to apply:

- 1. To apply for funding for a project which meets the criteria outlined in this packet, please submit the following application. See submission instructions below.
- 2. Please provide the Auxiliary Grant Committee with enough information to determine if your proposal is within St. Luke's McCall's Auxiliary's Mission Statement and guidelines (see above).
- 3. Clearly describe your proposal, including a detailed budget for your project.
- 4. Please limit proposals to not less than \$500 or more than \$25,000.

Note: The Grant program does not fund:

- Salaries
- Instructor/guest speaker fees
- Non-medical specific equipment (sports or athletic)
- Recreation-focused programs
- Tuition, scholarships, participation fees
- General office operating expenses/supplies
- Rental fees
- Surveys
- Marketing/advertising
- Construction materials/supplies
- Training/travel expenses

(The Grant Committee reserves the right to make decisions on a case-by-case basis.)

PLEASE CAREFULLY READ THE FOLLOWING SUBMISSION INSTRUCTIONS

APPLICATIONS MUST BE SUBMITTED ELECTRONICALLY

Deadline: 5:00 p.m. Friday, September 30, 2022

Applications received after this date and time will NOT be considered.

Email to Katie Morgan

morganka@slhs.org

Questions: contact Holly Thrash at 208-634-6996

REVIEW PROCESS:

- Grant applications must be submitted electronically by 5 p.m., Friday, September 30, 2022.
- Grant recipients will be decided in November 2022, with funds awarded in January 2023.
- St. Luke's McCall Auxiliary Grant Committee has the right to recommend acceptance or rejection of grant
 proposals, and/or to require further information regarding the proposal. Their funding recommendations
 will be forwarded to the Auxiliary Board of Directors for review. Final approval of all grant proposals will
 be finalized with a vote of the Auxiliary membership.

EXPENDURE and REPORTING PROCESS:

- Expenditures of grant funds, which vary from the original grant proposal, must be presented to the Grant Committee for approval. Use of excess funds from cost savings must also have Grant Committee approval prior to expenditure.
- An INTERIM Report must be submitted by May 31, 2023, and a FINAL Report by October 1, 2023. The
 Final Report will include a budget page showing how the money has been spent, or how any remaining
 money will be spent by December 31.
- If all funds are not expended by December 31, 2023, a verification of the need for an extension of time is required or the unspent funds will be returned to the St. Luke's McCall Auxiliary.

The Final Report must include the following:

- 1. Project outcomes as outlined in the original proposal.
- 2. A grant budget page. Include copies of invoices of purchases (see enclosed budget sheet).
- 3. Use of excess funds from cost savings. (Grant Committee approval needed prior to expenditure.)
- A representative of your organization may be invited to discuss your application with the Grant Committee and/or present an oral report at an Auxiliary membership meeting.

If you have any questions regarding the St. Luke's McCall Auxiliary Grant Program and its application, please contact:

Holly Thrash, Grant Committee Chair 208-634-6996

This grant is made possible through proceeds raised by the St. Luke's McCall Auxiliary Thrift Shop.

The Auxiliary Thrift Shop opened May 1, 1998. The first two years of operation were overwhelmingly successful. It became apparent there was a need for more space. The Auxiliary purchased and renovated the old post office building and opened for business in the new location July 1, 2000.

Donation of clothing, jewelry, and household goods are appreciated and new volunteers are always welcome. The Thrift Shop has made a positive difference for our regional community.

Thank you to all who volunteer their time for the St. Luke's McCall Auxiliary.

GRANT APPLICATION 2023

Date of Application Submission:	Amount of Request:
Organization/Agency applying for Grant funds. Must In qualify - required each year (even if you have applied in the	
Contact Person:	
Name of Authorized Representative of Your Organizat	on:
Mailing Address:	
Daytime Telephone: Email:	
Organization Mission Statement:	
Check which category this grant application represent	s:
 ☐ Community Children's Medical Fund ☐ Community Medical Fund (adult health services and post. Luke's McCall Complex Care ☐ St. Luke's McCall Brighter Smiles ☐ Other health related projects 	rograms)
1. Project Title:	
Brief narrative of project (overall picture of project, connec	ing the events in time):

2. Identify the need for this project:	
3. Describe target group for which grant proposal is intended (specific demographics such as age, grade level and numbers served):	1
4. Describe the project in detail, including a timeline:	
5. Describe the specific results (outcomes) of this project:	
6. Describe how you will measure the results (outcomes) of this project:	

7. In the event you would receive partial or no funding for this proposal, how would this affect the project?
8. Explain how the project will continue after the end of grant funding:
9. Will there be other sources of funding? Complete the attached budget sheet, indicating in-
kind contributions or matching funds.
10. If you have a cost savings within the scope of your proposal, what would be your next use of the excess funds? **
of the excess funds:
**USE OF EXCESS FUNDS FROM COST SAVINGS MUST HAVE GRANT COMMITTEE APPROVAL <u>PRIOR</u> <u>TO</u> EXPENDITURE.
Before you submit your application, did you include the following:
Name of authorized representative of your organization.
 Phone number, complete mailing address and email address. A copy of your tax-exempt 501(c)(3) document (even if you've submitted it in the past).
Response to all requested information and questions (number 1-10 on application)
□ Completed budget page.

Budget

Project Name:				
		Source of Funding		Auxiliary Use Only
Project Components	(C) Total Cost	(B) Matching/In-Kind	(A) Grant Request	Amount Approved
TOTALS	\$	\$	\$	
% OF TOTAL	%	%	%	%

Round to the nearest dollar and percentage. Be sure to check your addition. A+B=C.

Match/In-Kind Funds

(a.) List the source, (b.) amount, and give a (c.) description of matching/in-kind funds obligated to the project. Add column 'b' and put total at the bottom.

(a.) CONTRIBUTOR	(b.) AMOUNT	(c.) DESCRPITION
OTAL		