



## NF MIDWEST CARE IMPACT GRANT

NF Midwest Care Impact Grants provide up to \$10,000 to individuals or organizations for a program or project that directly impacts and improves the care of adults and children with neurofibromatosis and/or schwannomatosis in NF Midwest's region of Illinois,

Indiana, Iowa, Kentucky, Wisconsin, or Missouri.

The Care Impact Grant program reflects NF Midwest's commitment to not only cure neurofibromatosis and schwannomatosis, but to help people with NF live full and productive lives. It is impossible to achieve this important part of our mission alone, and we know that physicians, clinics, social workers, and other members of our community have ideas about new and important ways to serve the NF communities. A Care Impact Grant can help make that happen.

The NF Midwest Care Impact Grant program seeks to fund projects that will make a tangible difference in the lives of people with NF. Grant applications must meet program requirements and will be selected through a review process. This program is supported by the proceeds of our Walk4NF events and generous individual donors.

### PROPOSAL REQUIREMENTS

To be considered for funding, the program or project should meet the following requirements:

1. Contribute to the mission of NF Midwest which is to improve the lives of adults and children with neurofibromatosis through C.A.R.E.S. (**C**linics, **A**wareness, **R**esearch, **E**ducation, and **S**upport) and specifically to improving care or access to care.
2. Benefit individuals in the NF Midwest region or an underserved segment of our NF Midwest community and demonstrate real and identifiable change.
3. Be achievable within a year of granting.
4. Improve care or include active and ongoing involvement of people with NF or family members who will benefit from the program or project.
5. Have a description and general understanding of the necessary processes and resources needed to implement and disseminate the program/project.
6. Be an original idea, or an ongoing program/project that has measurable impact in the NF community.
7. Must not be dedicated to clinical or basic research, be used solely to purchase equipment, or be used for lobbying and fundraising activities.
8. Describe processes and resources needed to implement and disseminate the program/project, including:
  - Clearly stated and focused aim or aims
  - Specific milestones and measures of success
  - A completed application, a summary covering the requirements above, detailed budget, budget justification and other funding sources.

### ELIGIBILITY

Applicants may be NF care institutions, individuals, or from a nonprofit organization. For-profit companies are not eligible to apply.

The following types of project/programs are not eligible for funding:

- Clinical or basic research
- Lobbying or fundraising activities
- Solely for the purchase of equipment. No more than 50% grant may be used to purchase equipment

## **FUNDING AND REPORTING**

The maximum grant amount is \$10,000 per year for direct costs only. Programs under \$5,000 are preferred. Grant applications are for a one-year period and may be renewed for a second year, but funding for year 2 is contingent upon submission and approval of a renewal progress report and available funds.

## **EXAMPLES OF PROJECTS OR PROGRAMS**

Examples of projects that might be funded by a Care Impact Grant include, but is not limited to...

- Providing travel funds or other assistance to patients to increase access to care
- Creating a support group, OT/PT group, kids' group, parents' group
- Improving NF knowledge of a physician or clinical staff

## **FOR MORE INFORMATION**

If you have an idea or question, please email NF Midwest at [info@nfmidwest.org](mailto:info@nfmidwest.org) or call 630-945-3562. You may also provide a good summary of your project/proposal and we can get back to you as to the likelihood that your proposal may be funded.

## **SUBMITTING**

Please submit your application and completed proposal with the details required above via email to [info@nfmidwest.org](mailto:info@nfmidwest.org) or via mail to NF Midwest, 473 Dunham Rd, Suite 3, St. Charles, IL 60174.



# NF Midwest Care Impact Grant Application

473 Dunham Rd, Suite 3, St. Charles, IL 60174 info@nfmidwest.org

Project/Program Name \_\_\_\_\_ Date \_\_\_\_\_

Name of Institution (if applicable) \_\_\_\_\_

## Program/Project Leader

Name: \_\_\_\_\_

Address: \_\_\_\_\_

*Street Address*

*Unit #/Dept #/MC#*

*City*

*State*

*ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

## Program/Project Information

Requested Amount: \_\_\_\_\_ Total Budget: \_\_\_\_\_

Is this program/project being funded through any other additional means?                
Yes No

If yes, please provide details \_\_\_\_\_

\_\_\_\_\_

### Please provide here or in separate documentation....

Main focus or aim of program/ project: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How will this program/project contribute to improving care and/or quality of life? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Approximately how many people with NF or schwannomatosis in the Midwest region will benefit: \_\_\_\_\_

What will be your milestones or measurements for success? \_\_\_\_\_

\_\_\_\_\_

What would be the estimated length of this program/project? \_\_\_\_\_

Be sure to include a detailed summary, budget etc as described in the proposal requirements 1-8.