



we do. so they can.

HRF GRANT Funding Criteria for Organizations

The Human Resources Foundation is a publicly supported charity dedicated to enhancing and empowering the lives of individuals born with disabilities, as well as the 55+ population. HRF promotes inclusivity, diversity, accessibility, equity, and opportunity for all in our region. Grants are awarded to new and existing programs and services as well as to special projects that serve and support the above goal.

A. Must aid or support the following:

Developmentally disabled individuals

Individuals on the autism spectrum

Individuals requiring adaptive equipment or support to maintain a meaningful quality of life

Individuals 55+ requiring assistance in their home and community

(limited to home modifications and adaptive equipment)

Individuals within Wayne, Monroe, Pike, Susquehanna, Lackawanna, or Carbon County

B. Must demonstrate how the service or project meets at least one area of Interest:

Community integration

Workplace mentorship

Home modifications, adaptive equipment, vehicle modifications, assistive technology

Improvements to the quality of life for older individuals 55+ requiring assistance in their home or community

C. Provide an overview of the proposed program, project, or individual request.

D. Provide anticipated impact of this program or project on the population to be served. If this is an existing program, also include proven success from previous years.

E. Provide a project budget which includes how this grant will be supportive. Include information such as estimates or previous year budgets of a similar program or project size.

***PLEASE NOTE:**

The Foundation reserves the right to evaluate each application based on circumstances.

Not all applications will be approved.

For details of State/Federal requirements see *Medical Assistance Bulletin 09-21-04;*

ODP Announcement 21-064

Application can be submitted through:

www.hrfnepa.org/receive

email: daniel.card@hrfnepa.org

mail: HRF 1006 Church St. Honesdale PA 18431



HRF GRANT Funding Application for Organizations (pg.1)

Date_____

Name of Organization_____

Address

Website if applicable _____

Name of Contact Person _____

Title of Contact Person_____

Email address _____

Phone _____

Amount Requested_____

Please provide a brief description of your organization:

Please provide a brief overview of the program, service or project:

Describe how program, service or project meets at least one area of interest (See Grant Criteria, section B) _____

Provide anticipated impact of program, service or project on the population to be served. If this is an existing program or service, include proven success from previous years_____



HRF GRANT Funding Application for Organizations (pg.2)

What is the expected/projected # of people who will be supported through this program, service, or project? _____

Do you serve and support individuals from multiple PA counties? _____

Do you serve and support individuals outside the state the of PA? _____

If yes for either of the above questions, can you provide a brief regional breakdown?
(If not applicable, please answer N/A) _____

Other sources of funding for your program, service, or project (if any):

Please include a proposed total budget for the project including income and expenses.
Please attach any document to help understand the reason for your request, including proposals, letter of support for the project, etc.

Signature
