

Ruth Carlson – Starlight Foundation

It is the mission of the Ruth Carlson – Starlight Foundation (RCSF) to support residents of Tuscarawas County with developmental disabilities and entities that partner with these individuals to live a healthy and full life.

It is important to note that the RCSF acts as a funder of last resort. This means that other ways to fund this request must be reviewed prior to seeking RCSF funding. In order to provide funding opportunities to various worthwhile requests throughout the year, the RCSF generally caps funding requests at \$1,500 (individual) and \$3,000 (organization) per request with the exception of the legacy organizations of Starlight Enterprises, Inc. and the Starlight School.

Please complete the application form below and attach responses to the application questionnaire (no more than two pages) in order for the application to be considered complete. Applications are considered on a rolling basis. Please direct any questions to rcsftusc@gmail.com.

- Please provide a brief description of the funding request.

- Individual/Org. name: _____

- Address: _____

- Phone Number: _____ E-mail Address: _____

- Name and phone/e-mail address for a contact person (if different from what is already listed):

- Amount requested: _____ Date Needed: _____

- How many people will benefit from this request: _____

- Is this request co-sponsored by any other entity? YES NO

- If yes, please list the co-sponsor(s): _____

Once complete, submit the entire application packet to the Ruth Carlson – Starlight Foundation either by e-mail at rcsftusc@gmail.com or by mail to P.O. Box 1162 New Philadelphia, OH 44663.

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Application Questionnaire

Please respond to the following questions in two pages or less.

- 1) Provide an overview of the funding request. In this overview, describe how this funding request aligns with the mission of the RCSF to partner with residents of Tuscarawas County with developmental disabilities to become more independent and able to access their community.

- 2) The RCSF seeks to disburse funding to individuals/organizations who have sought additional ways to finance their request (i.e., funder of last resort). Please describe how you have sought to meet this request in other ways.

- 3) After the funding from the RCSF is spent, how will you continue to meet the need expressed in question one?

- 4) If your request was partially funded, what course of action would you follow to assist the individual or organization to fulfill this request?

- 5) Attach a breakdown of expenditures for which you are requesting support from the RCSF.

- 6) How do you plan to follow-up with the RCSF to demonstrate how the funding supported the identified beneficiaries?

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Proposal Rubric

Note: This rubric is intended to be utilized by RCSF Board Members when evaluating whether or not a proposal should receive funding. Please assign a score between one and five for each category listed below (one equating to a low score and five a high score).

1. ***Sustainability.*** How well does this proposal demonstrate the applicant’s ability to continue to meet this need after the funding from the RCSF is fully utilized?

1 2 3 4 5

2. ***Financial Stewardship.*** To what extent does this application demonstrate that this request is truly approaching the RCSF as a funder of last resort?

1 2 3 4 5

3. ***Mission Fit.*** If funding is awarded for this request, to what degree will the funding be used to support residents of Tuscarawas County with developmental disabilities to live a healthy and full life?

1 2 3 4 5

4. ***Follow-Up Plan.*** Does the applicant provide an appropriate follow-up plan in order to ensure that the funding is utilized in the manner expressed in the application?

1 2 3 4 5

5. ***Application Review.*** Does the application contain all of the necessary information?

1 2 3 4 5

Total Score: _____/25