



Vision:

- *To have a healthy and resilient community that is educated, aware and actively prevents substance abuse.*
- *Families and community members are supported through local resources for substance abuse.*

Mission:

An alliance coordinating resources to prevent substance abuse and build resilient communities.

2020 Washburn County AODA Grant Proposal Guidelines

Washburn County Board of Supervisors has allocated \$7,500 to the Washburn County Community Alliance for Prevention (CAP) for groups/organizations that are looking at promoting family strength and stability for the development of healthy communities in Washburn County.

To be considered for funding, please complete the proposal and submit to CAP a maximum of \$1,000 per organization. Examples of drug and alcohol free activities or events include but not limited to: activities for adults and youth, guest speakers and programs, educational materials, personnel training for AODA prevention, printed materials including posters, t-shirts, bracelets, etc.

Requirements:

1. Member(s) applying for a grant must attend the grant awards meeting to present their idea to CAP; March 5th between 4-6pm, arrange with CAP Chairperson, Tammy Holman 715-645-9032 tholman@co.washburn.wi.us time to present.
2. Organizations must contribute at least 20% match of grant allotment
3. Event must include a clear AODA message conveyed throughout the event
4. Adult supervision is required at all events designed for youth and should be addressed in the grant proposal
5. Indicate program was sponsored by Community Alliance for Prevention (i.e. banner, logo, etc.)
6. Outcomes report and meeting with CAP Chair within 90 days of event.

Recommendations:

1. Grant proposals should seek to reach as many people as possible
2. Joint applications for larger grant awards may receive preference
3. Coordinate speaker dates to reduce cost
4. Youth participation in planning and developing grant and event

Not allowed:

1. Funding for political or other forms of advertising
2. Capital expenditures over \$250
3. Support for religious activities
4. Salaries/wages of staff

Application Deadline is February 28, 2020

Submit requests to: tholman@co.washburn.wi.us

Tammy Holman – AODA Prevention Specialist
Washburn County Health & Human Services Department
715-645-9032

2020 Washburn County AODA Mini-grant Proposal

Date:

Project Name:

Organization Name and address:

Contact Name:

Phone #:

Email:

Project Description and Location:

Goals:

Age of target audience:

- 11 and under
- 12-18 years
- 19-25 years
- 26-54 years
- 55+ years

Approximate # of communities members served:

Which communities served in Washburn County:

Organization contribution must be 20% of requested amount: Staff time, money, space, etc.

Amount requested from Community Alliance for Prevention:

We will meet with Community Alliance for Prevention Chair to report on our activity/project within 90 days of event:

_____ January _____ February _____ March _____ April
_____ May _____ June _____ July _____ August
_____ September _____ October _____ November _____ December

Proposed Itemized Budget

- Must include a minimum of 20% organizational contribution
- List speakers, activities, educational materials, supplies, etc. with actual amount
- Include additional spreadsheet if needed

Item/Activity Description	Quantity	Actual Cost	Request Amount

	Total	\$	\$
20% Matching Funds	Quantity	Actual Cost	Organizational Contribution Planned
	Total	\$	\$
Comments:	Grand Total	\$	\$
Project Contact Signature			Date
Agency Director Signature			Date

2020 Washburn County AODA Mini-grant FINAL REPORT

- **Submit FINAL REPORT within 90 days of completed event to be considered for future grants.**

Date of Event:	Project Name:
Organization Name:	
Project Description and Location:	
Describe any challenges and how it was addressed:	
How was AODA message presented?	
Actual # of people that were served with your event:	
Organization Contribution (minimum 20% of requested amount)	
\$	
Additional community contributions:	
Total Expenses:	
\$	
Additional Comments:	

	Total	\$	\$
	Grand Total	\$	\$
Project Contact Signature			Date:

Submit FINAL REPORT within 90 days of completed event to: tholman@co.washburn.wi.us

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