Grant Guidelines
APPLICATION FOR TARGETED ACTIVIST YOUTH

Definitions/Limitations: The RFC defines “targeted activist” as someone who, as a result of their activism, has: lost a job; suffered physical or mental injury or disability; been harassed or discriminated against; been imprisoned; or died. “Progressive activities” are actions taken to further the beliefs that:

- All people have equal worth
- People are more important than profits
- World peace is a necessity
- Society must function within ecologically sustainable limits

Who Can Apply?
Applications may be submitted by or on behalf of targeted activist youth (TAY) in the United States whose pursuit of progressive values (see above) has left them unable to fully provide for themselves for reasons such as:

- They have lost a job.
- They have been harassed, suffered physical injury or mental disability.
- They have been imprisoned.

What the Rosenberg Fund for Children Funds:
Subject to financial considerations, the RFC funds such things as:

- Counseling, school tuition, camp tuition, cultural lessons, and after-school programs for TAY up to age 18. TAY ages 18 to 24 are eligible for “Carry it Forward” awards of $600 per year to help pay for books and supplies for college or skills training courses designed to prepare them for adult life, and for Development Grants of $1,000 made once a year to further their education, support their emotional needs or develop their organizing skills. Whenever possible, the RFC prefers to make grants directly to programs or providers (e.g. tutors, programs, summer camp, etc.), but when necessary will process grants as reimbursements to parents, legal guardians, or TAY.

What the Rosenberg Fund for Children Does Not Fund:
The RFC is unable to consider grants for general living expenses, like housing, clothing, and food, or for applications who have sufficient alternative sources of support. The RFC does not pay for legal defense costs. The RFC does not make grants to institutions that the Board believes operate in opposition to one or more of the beliefs listed above.

Granting Process: Please see basic information sheet for application deadlines and granting programs. Grant requests requiring immediate attention because of special needs may be considered at other times on an individual basis. Applicants should complete the attached application form and mail or email it to the RFC at the above address or email address.

CHECKLIST: we must have all of the following before we can review your application

☐ Completed application forms
☐ Material verifying targeted progressive activity (Question 1)
☐ Letter of reference (Question 3)
☐ Brochure or website for service provider (only if applicable)
☐ Letter from service provider (only if applicable)

If you have ANY questions, please don’t hesitate to contact us.
Targeted Activist Youth Application Form

1A. Targeted Youth Activism (see guidelines for full definition).

In as much detail as is comfortable, please provide us with a summary of your progressive activities that caused you to be fired, harassed, injured, imprisoned, etc. as described in the guidelines and explain **how the targeting has had a significant adverse life impact**. We will be unable to review your application if your answer provides us with insufficient information; however, please limit your response to three pages. Documentation such as a newspaper article, when available, may be attached. *(Please type if possible.)*

1B. Please describe the targeted activist youth's current situation including work, living, finances and health.

**NOTE:** While we deplore discrimination based solely on identity or community affiliation, the RFC only funds those who have **suffered discrimination in direct response to their activism**. Please be sure to describe the relationship between your activism and the targeting you have experienced.
2A. Targeted activist youth contact and other info.

Name _____________________________ Email ____________________________
Address ____________________________________________________________ zip ___________
Telephone: cell (___) ____________ home (___) ____________ work (___) ____________
Date of birth _______/_____/_______ Gender: ________________ Pronouns: ____________

NOTE: The targeted activist youth is required to sign this application.

_________________________________ __________________________
Activist Youth Signature Date

2B. Name and address of legal guardian if the targeted activist youth is under age 18.

Name _____________________________ Email ____________________________
Address ____________________________________________________________ zip ___________
Telephone: cell (___) ____________ home (___) ____________ work (___) ____________

NOTE: The legal guardian must consent to this application if the activist youth is less than 18 years old.

_________________________________ __________________________
Parent/Guardian Signature Date

2C. Name and address of person completing this form if other than activist youth.

Name _____________________________ Email ____________________________
Address ____________________________________________________________ zip ___________
Telephone: cell (___) ____________ home (___) ____________ work (___) ____________

3. Reference: Please provide a letter of reference from a person who is familiar with the applicant’s activism and targeting (not a relative and preferably not a close personal friend).

Name _____________________________ Email ____________________________
Address ____________________________________________________________ zip ___________
Telephone: cell (___) ____________ home (___) ____________ work (___) ____________

4A. Request: (Please check all that apply) (See page 2 of Basic Information Sheet if uncertain of eligibility.)

☐ Regular Grant (only for those 18 or younger who have not yet completed high school)
☐ $600 Carry it Forward award (CIF)*
☐ $1000 Development Grant

*If applicable, please indicate the name of your college or university and your expected year of graduation, or the name and expected date of completion for training programs:

5. If you are requesting a Development Grant, please let us know how you plan to use the funds and the anticipated impact of the grant. Please be as specific as possible.
6A. Provider Info: The provider is whoever is offering the services that we will pay for. This section is only applicable to regular grants. If you are not applying for a regular grant, please skip to section 7.

Important: Maximum two providers per beneficiary. Grants are usually made directly to institutions or providers.

Provider 1 Name: ___________________________  Email: _____________________________

Nature of Service Provided (school, camp, music, counseling, etc.): ____________________________

Address: ____________________________________________________________________________

Phone: (___) _______________  Website: ____________________________________________________________________________

Provider 2 Name: ___________________________  Email: _____________________________

Nature of Service Provided (school, camp, music, counseling, etc.): ____________________________

Address: ____________________________________________________________________________

Phone: (___) _______________  Website: ____________________________________________________________________________

6B. Provider Letter and Brochure/Information: Please include a copy of each of the providers’ brochure (if they have one) and a letter from them indicating that they are aware of this application and are able to work with the RFC.

6C. Do you have a non-professional relationship with either providers listed above, such as familial ties or friendship?

☐ Yes  ☐ No  If yes, please specify:

NOTE: If you do not list a provider at the time of application, you may not receive the amount requested.

7A. Amount of Support Needed: $ __________

PLEASE NOTE: (CIF Awards are $600. Development grants are $1,000. Maximum grant amount is $2,000 per child, per cycle with a $3,000 yearly limit AND a maximum of $7,500 per family per granting cycle.)

7B. Computer Request: If you are planning to use your grant funds to buy computer, a Computer Request Form must be submitted with your application. (available on RFC website for download or upon request)

7C. If your request is $1,500 or more, please explain why this amount is needed:

7D. Date service to start: __________  Date service to end: __________  Any deadline we should know about:

7E. List any other sources of support for these services (Use additional page if necessary):

8. How did you learn about the RFC?

Please attach an additional sheet if the space provided for the answer to any question is inadequate.

RETURN TO: Rosenberg Fund for Children, 116 Pleasant Street, Suite 348, Easthampton, MA 01027  OR:  grant@rfc.org

FEEL FREE TO CONTACT US FOR ASSISTANCE.