

randy shaver

CANCER RESEARCH & COMMUNITY FUND

THE RANDY SHAVER CANCER RESEARCH AND COMMUNITY FUND GRANT APPLICATION COVER PAGE

GENERAL INFORMATION:

Name Of Organization (Legal Name) _____

Address _____
Street/PO Box City State Zip

Contact Person _____ Title _____

Telephone # _____ Fax # _____

Tax Status (Check One) _____ 501c3 _____ Public Agency (Gov't. Created)
_____ Unit of Gov't _____ Other: _____

PROJECT DESCRIPTION:

Name of Project _____

Name of Physician _____

Statement of Project Purpose _____

Geographic Area To Be Served By Project _____

CHECK TYPE OF PROJECT:

_____ Cancer Research
_____ Technology or Screening Tools That Would Enhance Early Detection of Cancer
_____ Aid or Assistance To The Minnesota Cancer Community
_____ Program Expansion or Special Projects
_____ Other _____

Project Beginning Date _____ Project Ending Date _____

Total Project Budget _____ Amount Requested _____

(Please Attach Narrative Guidelines) and Electronically Email To:
roseann@randyshavercancerfund.org

The Randy Shaver Cancer Research and Community Fund Request For Proposals

PURPOSE:

The Randy Shaver Cancer Research and Community Fund is seeking proposals from non-profit organizations and other public entities with innovative and creative projects that will result in benefiting Minnesota's Cancer Community. This fund's primary objective is to support organizations, hospitals, research facilities and other public entities that are involved in cancer research, cancer patient aid and cancer oriented community endeavors.

The Randy Shaver Cancer Research and Community Fund will grant over \$500,000.00 to groups/researchers that submit proposals through this (Request for Proposal) process. Please be specific in nature as to your request and what benefits or intended outcome your proposal will make on Minnesota's Cancer Community.

FUNDS MAY BE USED FOR:

- Technology or tools that would enhance early detection of cancer
- Costs for promising new programs that promote research that would help prevent cancer relapses
- Projects that demonstrate research in the area of cancer
- Programs that enhance the lives of Minnesota's Cancer Community by providing aid or assistance
- Program expansion or special projects of a time limited nature

FUNDS WILL NOT BE USED FOR:

- Ongoing Operational Costs
- Personal Grants to Individuals
- Individual Salary or Salaries

HOW TO APPLY:

Applications **MUST be submitted electronically** no later than October 31, 2018. Organizations are encouraged to submit proposals prior to deadline. Funded projects will receive grant monies in January of 2019 and must reapply each year for future consideration.

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PROPOSALS MUST INCLUDE NARRATIVE GUIDELINES:

- 1) Description of the organization(s) or facility submitting the request and the primary populations served
- 2) Description of the applicant's, organization or individual researchers' experience in working with cancer related issues
- 3) If this is a collaborative request, names and affiliation of planning and implementing partners and a description of the role of each partner in completing this project
- 4) Description of how this project will serve the lives of Minnesota's cancer patients (i.e. improvements in care, specific updated screening methods or cutting edge cancer research)
- 5) Description of the programs' specific action steps with regard to timelines and completion of this project
- 6) Description of what will constitute success and how it will be measured at the end of the grant period
- 7) Description of long-term funding plans (if applicable) and how the program will be sustained
- 8) Description of the qualifications and experiences of the principal staff members of the project in relation to its purpose and objectives.

A. PROPOSAL BUDGET:

Provide a detailed budget of the project's income and expenses, including a narrative description of each category of income and expense.

B. ATTACHMENTS:

Complete and submit electronically

- ___ Attached Application Form
- ___ Evaluation Plan Summary
- ___ Copy of Your 501(c)3 Designation Letter
- ___ List of Your Board of Directors
- ___ Evidence of Board Endorsement of this Proposal

C. TIMELINE DEADLINE:

October 31, 2018	Electronically Sent Deadline
January, 2019	Proposal Presentation
July 1, 2019	Progress Report Due
January, 2020	Project Completed

D. Please Email Your Proposal To:

roseann@randyshavercancerfund.org



Grant Proposal Electronic Submission Requirements

Please be advised All grant proposals MUST BE sent to us electronically. Each proposal must be in **12 point, Arial type font**.

Each grant proposal accepted for consideration will be distributed electronically in a secure document to the Randy Shaver Cancer Research and Community Fund Advisory Board. The grant proposals will not be web viewable or accessible to the general public.

Also, any exhibits, attachments, or handouts must accompany the grant proposal. We will not permit any distribution of material to the Advisory Board if your grant proposal is accepted for consideration and you are invited to present to the Advisory Board.

Signature

Date