100,000 Opportunities Demonstration Cities

**Pathways to Careers Fund**

**CHICAGO/COOK COUNTY - Application COVER SHEET**

**Please complete all shaded portions and check appropriate boxes.**

|  |
| --- |
| **GENERAL INFORMATION** |
| Name of Applicant Organization:  |  |
| Address: |  |
| Point of Contact: |  |
| Contact Email Address and Phone Number: | Email: | Phone:  |
| Project Start and End Dates: | Start:  | End:  |
| Total number of opportunity youth served by proposed project: |  |
| Employer partner(s): |  |
| Target sub-population:(if applicable, check all that apply) | [ ]  Parenting youth [ ]  Young men of color [ ] Youth involved in the juvenile/criminal justice system [ ]  Youth transitioning out of foster care[ ]  Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Sectoral-based pathway:(if applicable)  | [ ] Health care [ ]  Hospitality [ ]  Manufacturing [ ]  Technology[ ]  Retail [ ]  Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| Project Summary:(max 250 word overview of the proposed project) |  |
| Total amount requested:  | **$** |
|  |
| Authorized signature:*By signing, you attest to the accuracy of the proposal to the best of your knowledge, that you are authorized to submit the proposal on behalf of your organization, and of your intent to execute the project and to participate in learning and evaluation activities as described in the RFP. [Electronic signatures are accepted.]* |
| [Name] [Title / Organization] [Date] |
|  |

|  |
| --- |
| **BUDGET** |
| **FUNDING REQUEST:** List the project expenses that will be paid for with the Pathways to Careers Fund investment.  |
| **Category** | **Description** | **Amount** |
| Staff:  |  Position and amount per position | $ |
| Consultant/Professional Services: |  |  |
| Materials/Supplies/Food:  |  List types and amount for each | $ |
| **Add major expense categories/rows as needed:** |  | $ |
| **Project Expenses Total for Funding Request**  | **$**  |
|  |  |
| **OTHER FUNDING:** (complete as applicable; estimates are fine) |  |
| Other costs to be covered by CBO partners (include in-kind) |  |
| Other costs to be covered by education partners (include in-kind) |  |
| Other costs to be covered by employer partners (include in-kind) |  |
| Additional funding still to be raised (other than Pathways to Careers fund request) |  |
| **TOTAL PROJECT BUDGET** |  |

|  |
| --- |
| **ATTACHMENTS** |
| **•** Letters of commitment and/or Memoranda of Understanding from employer partners of the proposed pathway or otherwise needed for the success of the project. • If a K12 or post-secondary connected pathway, please attach letters of commitment and/or Memoranda of Understanding from any educational institution partners.• If the proposed pathway has any existing documentation of the approach or outcomes (descriptive report, evaluation, etc.) please include as an attachment.* Copy of organization’s 501(c)3 letter; if organization is applying as a fiscal sponsor for another organization, also include a copy of the fiscal sponsorship agreement.

**Electronic submission of proposals is required. Proposals are due to the attention of: Emma Uman (Emma.Uman@aspeninstitute.org). Deadline for submission is March 10, 2017 6:00 p.m. Pacific Time.** |