



Request for Applications

The South Florida Affiliate of Susan G. Komen for the Cure® along with those who generously support us with their talent, time and resources is working to better the lives of those facing breast cancer in our community. We join more than more than 100,000 breast cancer survivors and activists around the globe as part of the world's largest and most progressive grassroots network fighting breast cancer. In the fiscal year ending March 31, 2010 through events like the Susan G. Komen South Florida Race for the Cure®, we have invested \$1.3 million in local breast health and breast cancer awareness projects in our three county service area. Up to 75 percent of net proceeds generated by the Komen South Florida Affiliate stay in Palm Beach, Martin and St. Lucie Counties. The remaining income goes to the national Susan G. Komen for the Cure Grants Program for energizing science to find the cures.

About Susan G. Komen for the Cure

Nancy G. Brinker promised her dying sister, Susan G. Komen, she would do everything in her power to end breast cancer forever. In 1982 that promise became Susan G. Komen for the Cure® and launched the global breast cancer movement. Today, Komen for the Cure is the world's largest grassroots network of breast cancer survivors and activists fighting to save lives, empower people, ensure quality care for all and energize science to find the cures. Thanks to events like the Komen Race for the Cure®, we have invested nearly \$1.5 billion to fulfill our promise, becoming the largest source of nonprofit funds dedicated to the fight against breast cancer in the world. For more information about Susan G. Komen for the Cure, breast health or breast cancer, visit www.komen.org or call 1-877 GO KOMEN.

Funding Opportunities

The South Florida Affiliate of Susan G. Komen for the Cure® is currently offering grants to nonprofits for innovative programs, to promote good breast health, that reduce breast cancer mortality, especially among those who are disproportionately affected by this disease. Through the Community Profile, available for review on our website at www.komensouthflorida.org/grants, we have identified the following funding priorities:

1. Provide breast health education, and emphasize the need for early detection in all three counties with special consideration for those in the Fort Pierce area of St. Lucie County, and areas of high concentration of senior adults
2. Breast Health Navigation in our three county service area with special consideration given for navigation in the Fort Pierce area of St. Lucie County
3. New avenues and innovative strategies to bring breast health services to the people in the Glades area of Palm Beach County and Indiantown in Martin County, so that they can have access to care.
4. Breast Cancer Screening in Palm Beach, Martin and St. Lucie Counties for those patients meeting Komen eligibility guidelines (attached)
5. Breast Cancer Treatment in Palm Beach, Martin and St. Lucie Counties for those patients meeting Komen eligibility guidelines (attached)
6. Provide patient care coordination for the BCCI (Breast and Cervical Cancer Initiative) program in Palm Beach County

Important Dates

Grant Writing Workshops:

- 9/28/10 Good Samaritan Hospital 6pm, WPB
- 10/6/10 Martin Memorial Hospital 6pm, Stuart
- 10/16/10 Lakeside Medical Center, Belle Glade 10am.

Application Deadline	11/30/10
Award Notification	04/01/11
Award Period	April 1, 2011 – March 31, 2012

Eligibility

Applicants and institutions must conform to the following eligibility criteria to be considered for funding:

- Applicants must ensure that all past and current Komen-funded grants or awards are up-to-date and in compliance with Komen requirements.
- Institutions must be non-profit organizations located in or providing services to one or more of the following locations:
 - Palm Beach County
 - Martin County
 - St. Lucie County
- Project must be specific to breast health and or breast cancer

Allowable Expenses

Funds may be used for the following types of program expenses:

- Salaries and fringe benefits for program staff
- Consultant fees
- Clinical services or patient care costs
- Meeting Costs
- Travel
- Other direct program expenses
- Equipment not to exceed \$2,000

Funds may **not** be used for the following purposes:

- Medical or scientific research
- Scholarships or fellowships
- Construction or renovation of facilities
- Political campaigns or lobbying
- Endowments
- Debt Reduction
- Indirect costs

Educational Materials and Messages

Susan G. Komen for the Cure® is a source of information about breast cancer for people all over the world. To reduce confusion and reinforce learning, we require that grantees provided educational messages and materials that are consistent with those promoted by Komen for the Cure. Please visit the following website before completing their application and be sure that your organization can agree to promote these messages: ww5.komen.org/BreastCancer/BreastSelfAwareness.html

Komen for the Cure grantees are eligible to receive preferred pricing for Komen educational materials. Komen for the Cure materials should be used and displayed whenever possible. To view our educational materials, visit www.shopkomen.org.

Submission Requirements

All proposals must be type-written on plain, white, single-sided 8 ½ x 11 paper using 12-point font. 10 copies (one original and 9 duplicates) should be submitted. The pages must be numbered and each copy stapled in the top left corner. No special packaging (binders, plastic covers, etc.) or additional material (videotapes, annual reports, brochures, etc.) should be included. In addition, please **email the proposal** and all attachments to tina@komensouthflorida.org; this must be in a **word document no pdf's** will be accepted.

Applications must be received on or before 11/30/10 to the South Florida Affiliate of Susan G. Komen for the Cure®, At Good Samaritan Medical Center, 1309 N. Flagler Drive- 5th Floor, West Palm Beach, FL 33401. No late submissions will be accepted.

Review Process

Each grant application will be reviewed by at least three independent reviewers. They will consider each of the following selection criteria:

Impact: Will the program have a substantial positive impact on breast cancer disparities and the priority area selected?

Feasibility: How likely is it that the objectives and activities will be achieved within the scope of the funded program?

Capacity: Does the organization, Program Director and his/her team have the expertise to effectively implement all aspects of the program? Is the organization respected and valued by the target population?

Collaboration: Does this program enhance collaboration among organizations with similar or complementary goals?

Sustainability: Is the program likely to be sustained? Is the impact likely to be long-term?

Budget: Is the budget clear, appropriate and reasonable? Does the budget justification sufficiently explain each budget item?

The grant application process is competitive, whether or not an organization has received a grant in the past. Funding in subsequent years is never guaranteed.

Support

Questions should be directed to:

Tina Jacobs

Programs Coordinator

561-514-3020 ext. 14

tina@komensouthflorida.org

Application Instructions

Cover Page

Complete the attached cover page including an abstract (project summary). The abstract **must be limited to 1,200 characters**, including spaces and punctuation (approximately 225 words). The abstract should provide a brief description of the proposal including the following: 1) the purpose of the program; 2) a description of key activities; 3) a summary of evaluation methods; and 4) the likely impact of the program. The signature of approving institutional personnel, other than the project director, is required.

Program Description (limit – 8 pages):

1. **Background:** Describe the organization's history, mission, and goals. Describe current programs and recent accomplishments.
2. **Statement of Need/Problem:** Describe why the proposed project is needed. Describe the population to be served. Review comparable programs offered in this service area and explain how this program is unique.
3. **Goals and Objectives:** State the program goals and measurable objectives, including the number of people to be served. Explain how the goals and objectives address the selected priority area.
4. **Activities and Timeline:** Describe the activities that will be conducted to accomplish the above goals and objectives. Provide a realistic, month-by-month timeline for implementing the program.
5. **Collaboration:** Describe the other organizations or entities, if any, participating in the Program.
6. **Evaluation Plan:** Describe how you will measure that you are achieving the objectives and how you will assess the impact of the program on the priority area selected.
7. **Organizational Capacity:** Describe the organization's experience serving the target population. Describe the other organizations, if any, participating in the program. Explain why your organization is best-suited to carry out the program.
8. **Sustainability:** Explain how this program and its impact will be sustained long-term. What resources (financial, personnel, partnerships, etc.) will be needed to sustain this effort over time? How will those resources be secured? Applicants should demonstrate that other sources of funding will be sought and used to support this project.

Budget (form attached)

Provide a detailed total program budget. All funding for this program, including other grants and general funds should be included in the budget. Please note that equipment costs **may not exceed \$2,000.**

Budget Justification

For each line item in the budget, provide a brief description of how the funds will be used and why they are programmatically necessary. List all other committed and pending sources of support for the program.

Attachments

1. **Information regarding Key Personnel** – for key personnel, who are currently employed by the applicant, provide a resume or curriculum vitae. For new or vacant positions, provide job descriptions (*Two page limit per individual*).
2. **Proof of Non-Profit Status** – To document your federal tax-exempt status, attach your determination letter from the Internal Revenue Service. Evidence of state or local exemption will not be accepted. Please do not attach your Federal tax return.