

**South Carolina Campaign to Prevent Teen Pregnancy
Local Program Grant
2008 Letter of Intent Application**

Key dates for this proposal

- Letter of intent due: 4 pm **July 28th, 2008**. 1 original plus 6 copies.
- Mandatory Grant Writing Workshop (for those invited to submit full applications) **August 19th, 2008**
- Full Application Due: 4 pm **September 16th, 2008**
- Project Year: October 1, 2008 to June 30, 2009

For questions regarding the application process, please contact Polly Edwards Padgett at 803-771-7700. *Questions regarding the status of your application will not be answered.*

Overview

Since 1994, the South Carolina Campaign to Prevent Teen Pregnancy (Campaign) has worked throughout the state to carry out its mission to *decrease the incidence of adolescent pregnancy through education, technical assistance, advocacy, public awareness, and research*. Over the past 12 years the Campaign has established itself as the key leader and quality resource for comprehensive, science-based, sexual health education. The Campaign works in all 46 counties with approximately 180 organizations to provide educational trainings, technical assistance, public awareness and advocacy strategies.

Local Program Grant Overview

The SC Campaign is pleased to provide an opportunity for local programs to apply for grants to implement innovative science based programs that meet at least one of the funding priorities identified below. Projects will be funded between \$10,000-20,000 and are approved for one year.

Eligibility: An organization must be a CAPP or MAPPS provider and must have attended the *Bidder's Meeting* at the 2008 Annual Summer Institute Conference held by the SC Campaign to Prevent Teen Pregnancy. All applications must be in good financial and programmatic standing with the South Carolina Campaign and with their primary funding source (either SC DSS or SC HHS).

Funding Priorities: The Campaign has identified the following funding priorities. Applicants must indicate which priority is being met on the application cover page.

1. Preventing teen pregnancy among priority populations of youth
 - a. Hispanic/Latina youth
 - b. 18-19 year old teens
 - c. Youth in foster care and/or other support systems such as DJJ

- d. Pregnant/parenting teens
- e. Males
- 2. Improving services delivered for youth at reproductive health clinics
- 3. Implementing peer norms campaigns for underclassmen
- 4. Education and training programs for parents to improve parent-child connectedness
- 5. School-based implementation of Safer Choices (all 5 components)
- 6. Youth development programs (Teen Outreach Program, Aban Aya, etc.)

The SC Campaign to Prevent Teen Pregnancy funds do not allow for funding percentages of salaries for staff, equipment, funds given as scholarships or grants, operational expenses and/or utilities or rent. Funds should be used for the direct operation of programming to youth.

Letter of Intent Format: The first step to the application process is to submit a letter of intent. Download the letter of intent application from www.teenpregnancysc.org. The application consists of three parts: Cover page, narrative section and budget. The narrative section is limited to three pages maximum. Exceeding that limit will not allow the application to be judged in its entirety.

Signed original and 6 copies are due to the Campaign no later than 4 pm on July 28th, 2009. **Late applications will not be considered.**

Review and Notification: Applications will first be reviewed by Campaign staff for validation. Applications that meet all of the requirements will then be forwarded to a review committee for grading.

For additional information, contact Polly Edwards-Padgett at pedwards@teenpregnancysc.org.

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To be considered for a Local Program Grant, the letter of intent cover page, application and budget must be received no later than **4 pm on July 28th, 2008**. Send the original

plus 6 copies to
Polly Edwards Padgett
SC Campaign to Prevent Teen Pregnancy
1331 Elmwood Ave Suite 140
Columbia, SC 29201

Application Cover Page

Agency Information

Agency (Organization) Name: _____

(Check one) CAPP MAPPS

Title of Program: _____

Target Population:

Title of Curriculum seeking to replicate if applicable: _____

Amount Requested: _____

Priority Area: (please refer to application guidelines to select the priority funding area)

Physical Address: _____

County: _____

Phone: _____ Fax: _____

Website: _____

Mailing Address: _____

Application Contact Person/Position: _____

Email: _____

Executive Director (if different): _____

Signature: _____

Program Summary:

SC Campaign to Prevent Teen Pregnancy

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Section Two-Narrative

This section can be no longer than 3 pages

1. Describe your organization. Include the history, mission and its ability to carry out the proposed activities.
2. List the key staff who will work on this project along with their relevant experience, training and qualifications in fulfilling the requirements of this grant.
3. Describe the target population reached by this grant. Include the need for this project with the target population and the numbers you intend to reach.
4. List the overall goal of the project and the measurable objectives.
5. Describe how this project meets the funding priorities identified by the SC Campaign. Include rationale for how this program meets the requirements of a science based program.
6. Describe the evaluation plan.
7. How will success be measured?
8. How will the project be sustained?

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Section Three-Budget

Please submit a formatted budget that correlates with program for which you have submitted the application.