



## Strategic Program Grants Application for Oct 1, 2026- Sept 30, 2027

**Grant Name:** \_\_\_\_\_

### Program Information

Lead Agency Requesting:

### Applicant Contact Information

Designated contact person for this grant and contact information, [organization address, telephone, email]:

For an application submitted by a consortium or as a partnership, please identify the other participants:

Amount Requested: \$

Amount from applicant organization[s] and from other sources \$

Total cost of Program: \$

Program start/end date:

### Program Description

*Please try not to exceed the space provided for each answer.*

1. Specific program goals and objectives [use these for the table in question 6]:
  
  
  
  
  
  
  
  
  
  
2. Description of program:
  
  
  
  
  
  
  
  
  
  
3. Program site:
  
  
  
  
  
  
  
  
  
  
4. Intended target population – e.g., geographic area, age, gender, etc.:

5. Anticipated number of participants

6. Desired outcome & outcome indicators

*It is important to identify the desired outcomes of a program and to have a plan in place to monitor achievement of those outcomes. Both in-progress and a final evaluation is required for measuring the success of a program. Please use the following table to describe the desired outcomes of the program and how success will be measured.*

Definitions:

- Desired outcomes – expected participant benefits or changes during or after their involvement in the program, such as new knowledge to be gained, improved skills or condition, larger social networks, etc. These outcomes should be measurable.
- Outcome indicators - Specific and measurable information that will be used to track the implementation of the program, such as number of participants, number of new volunteers or contributors, number of classes, etc., as well as the success or impact of the program such as reaching the targeted # of participants, participant satisfaction levels, or other measures of success.
- Information collection methods – method and timetable for collecting outcome information (e.g., questionnaire, follow up telephone calls, other reporting methods) and how this information will be used to adjust or improve the program.

**Please use this table to evaluate the program for in-progress and completed programs.**

Desired outcome(s)	Outcome indicators	Information collection methods	Results (Completed program)
1.			
2.			
3.			

This table is to be completed with application.

7. Proposed Detailed Budget. Please attach a spreadsheet which includes the following: Program income (amount and sources of income), Expenses (amount and description), Total project cost, Total Request.

**Please note**

- **Current or final operating budget and completed or in-progress evaluation are required for previously funded programs.**
- For newly applying organizations we need a tax-exempt status letter (or for organizations that previously applied if one has been updated recently- please include it).
- **We may request further documentation related to Section E, [and elsewhere] on Program Funding Guidelines form.**
- *Contact information for your current membership will be requested from Central MA allocation recipient organizations.*

Submit completed application by email to: [L.Thurlow@ifcm.org](mailto:L.Thurlow@ifcm.org) no later than 2:00 pm on Wednesday, May 20, 2026. **Deadlines will be strictly adhered to.** You will receive an email confirmation when your application is received in the office. Please write the name of your organization and program in the email subject line.