

Better Together Application

Please note the following about the applying for this Better Together Grant:

Eligibility

The following middle school, high school, and college programs are eligible to apply:

- Jewish day schools
- Congregational school programs
- Hebrew high school programs
- Youth group programs
- Hillel, JLIC, Chabad on Campus

VERY IMPORTANT: If your institution was in a previous cohort of Better Together, you are not eligible for this grant unless you are new to Better Together since 2020.

Grant Parameters

The following elements must be present in each program:

- A 2:1 ratio of students to seniors, with a 10-student minimum
- Minimum of 8 training/education sessions for students rooted in Jewish values and text
- Minimum of 8 thoughtfully planned, Jewish-themed visits with senior citizens during the school year
- Culminating school event for students and seniors
- Better Together presentations at end of year events in the school and community
- Participation in the national Better2Write Writing Contest
- Supervision of a teacher/admin (e.g., Dir of Student Activities, Guidance Counselor, Youth Group Leader, Hillel Prof, etc.)

* Required

1. Email *

2. Your First Name *

3. Your Last Name *

4. Your Preferred Phone Number *

5. Your Professional E-mail Address *

6. Your Personal E-mail Address

Legacy Heritage Fund may offer courses, events, or grants that are relevant to you. By providing your personal e-mail to this question, you will be opting in to our mailing list. We will send occasional newsletters with updates and opportunities.

7. Your Job Title *

8. Are you the person who will be the Program Coordinator/Teacher for this program? *

Mark only one oval.

Yes *Skip to question 12*

No *Skip to question 9*

Program
Coordinator/Teacher
Information

Since you are not the person who will be the Program Coordinator/Teacher Information for this program, please provide the following information for that person.

9. Please provide the first and last name of the program coordinator/teacher. *

10. Please provide the phone number of the program coordinator/teacher. *

11. Please provide the e-mail address of the program coordinator/teacher. *

Your Organization's Information

12. Please provide your organization's name. *

Please provide your organization's mailing address in the following fields.

13. Street Address *

14. City *

15. State *

16. Zip *

17. Please provide your organization's phone number. *

18. Please provide your organization's website. *

19. Please provide your organization's EIN. *

20. If your organization is part of a larger organization (youth movement, college campus, etc.) please provide local and national details.

21. How would you identify the religious affiliation of your institution? *

Mark only one oval.

Community/Pluralistic

Conservative

Orthodox

Reform

Reconstructionist

Not Applicable

22. Target population age group of your organization *

Check all that apply.

0 - 4 Preschool

5 - 13 Elementary School

14 - 17 High School

18 - 22 College

23 - 30 Young Adult

31 - 70 Adult

71+ Senior

23. Organization Type *

Please select as many as are applicable.

Check all that apply.

- Adult Education
- Advocacy/Israel Education
- Camp
- College/University
- Day School
- Digital Media
- Environmental
- Federation
- Hesder
- Hillel
- Holocaust Center
- Hospital/healthcare
- JCC
- JCRC
- Museum
- Poverty
- Preschool
- Senior
- Social Justice
- Social Service Agency
- Special Needs
- Supplementary School
- Synagogue/Rabbinat
- Umbrella Organizations
- Women's Leadership
- Youth Group
- Other: _____

Senior
Facility
Information

We recommend partnering with a nursing home or assisted living. You may also partner with a "formal" group of seniors in the synagogue (although there must be an administrator in charge of the senior group - who must be a different person than the one in charge of the teens).

24. Name of Senior Facility *

25. Senior Facility's Website *

26. First & Last Name of Contact Person at the Senior Facility *

27. Position/Title of Contact Person at the Senior Facility *

28. Phone Number of Contact Person at the Senior Facility *

29. Email Address of of Contact Person at the Senior Facility *

30. Will you have a minimum participation of one senior for every two teens? *

Mark only one oval.

Yes

No

Grant Details

31. Please indicate your status: *

Mark only one oval.

We are new to Better Together and are applying to begin "Year 1" of the grant.

We are currently running the Better Together in the box program, and we are applying to start with "Year 2" of the grant. (We did *not* receive a Better Together grant prior to 2019.)

32. Target Population Age Group *

Please choose as many or as few that pertain to the population your project will be serving.

Check all that apply.

- 0 - 4 Preschool
- 5 - 13 Elementary School
- 14 - 17 High School
- 18 - 22 College
- 23 - 30 Young Adult
- 31 - 70 Adult
- 71+ Senior

33. Location of Project Beneficiaries *

For example, if you are an organization in Israel that is funding teachers in the United States, you would select "US." If you are in the US providing assistance to schools in Israel and South Africa, you would select both "Israel" and "Other."

Check all that apply.

- United States
- Israel
- Other: _____

34. How many teens/college students will be in your program? *

(minimum 10)

35. Please select the rising grade(s) of the teens participating in your program. *
- If you don't have a group selected yet, please select the rising grade(s) of the teens you plan to target.

Check all that apply.

- Fifth Grade
- Sixth Grade
- Seventh Grade
- Eighth Grade
- Ninth Grade
- Tenth Grade
- Eleventh Grade
- Twelfth Grade
- College students

36. Do you commit to holding at least eight educational sessions with your teens per year? *

Mark only one oval.

- Yes
- No

37. Do you commit to holding at least eight inter-generational interactions per year? *

Mark only one oval.

- Yes
- No

38. Do you plan to use Better Together curriculum exclusively for both teen education and intergenerational sessions? *

Mark only one oval.

- Yes
- No

39. If you answered no to the prior question, and will be supplementing or using another curriculum, please describe what curriculum or program additions you plan to use.

40. Do you agree to the following: Hold a celebration and presentations at end of year events in ^{*} the school and community? Participate in the national Better2Write Writing Contest? And have your Program Supervisor attend quarterly informational webinars?

Mark only one oval.

Yes

No

Requested
Budget for
each of
years 1
and 2

Please note that the grant limit is \$10,000/year in years 1 and 2. We recommend \$5,000 for staffing and \$5,000 for supplies and programming expenses, but please tailor to your specific programmatic needs.

41. Requested Budget for Material Expenses ^{*}

42. Requested Budget for Staffing Expenses ^{*}

43. Let us know how (or from whom) you heard about this grant opportunity. ^{*}

44. If your grant application is accepted, we will be encouraging your Program Coordinator/Lead Teacher to join our private Facebook page, which will give Program Administrators access to ideas from other educators running the program, foundation reminders, and other opportunities that will assist your Program Coordinator/Lead Teacher. To pre-opt-in to this page, please share the Program Coordinator's email address associated with their Facebook account so we can send them an invitation.

45. If your grant application is accepted, we will be encouraging your Program Coordinator/Lead Teacher to join our WhatsApp group, which will give your Program Coordinator/Lead Teacher access to ideas from other educators running the program, foundation reminders, and other opportunities that will assist your Program Coordinator/Lead Teacher. To pre-opt-in to this group, please share your Program Coordinator/Lead Teacher's cell phone number if they have a WhatsApp account.

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