



Aultman Health Foundation Aultman Ambassador Program Grant

Overview

Aultman Health Foundation is pleased to announce the Aultman Ambassador Program Grant opportunity to fund wellness-related programs in High Schools. Please direct grant questions to Liz Edmunds, Community Wellness Coordinator: E: liz.edmunds@aultman.com P: 330-363-3439.

Eligibility Criteria

- High School must be enrolled in the Aultman Ambassador Program.
- High Schools are eligible for one grant per year for a maximum of \$750.
- Requested funds are for school-based activities that align with the program's vision to make Greater Stark County schools the healthiest in the state of Ohio by 2032.
- Funded high school must agree to use funds as described during the *current school year* and plan on the student ambassador and advisor reporting on the project's impact at the year-end Aultman Ambassador Recognition Ceremony.
- Preference will be given to school action plan activities based on identified needs in the *Alliance for a Healthier Generation Healthy School assessment* and activities with multi-year use (e.g., supplies, equipment).
- Staff wages, marketing, promotions, and incentive give-a-ways are not eligible for funding.

Application Process

- Complete the application below.
- Submit the completed application by email to liz.edmunds@aultman.com.
- Grant applications accepted September 1st – January 31st
- A grants committee will convene to conduct a review of applications on an ongoing basis.
- The committee may have questions that could require follow-up with the grant contact.
- All applicants will be notified of the committee's decision via email.
- Checks will be sent to the High School following approval of grant application.

Vision: *Make Greater Stark County schools the healthiest in the State of Ohio by the year 2032.*



Aultman Ambassador Program High School Grant Application Cover Sheet	
Contact: Name & Email	
High School Name	
Amount Requested	\$
Initiative	

Approval:

Aultman Ambassador Advisor Signature

Date

High School Principal Signature

Date



Aultman Ambassador Program High School Grant Application	
Project Title:	
Identified Need Describe the need and how it was identified. How does it relate to nutrition, hydration, physical activity, sleep, or stress management?	
Proposed Project How will your initiative promote health and wellness in the school? In what way(s) would your initiative improve <i>one or more</i> of the focus areas for your school's students and/or faculty based off the <i>Healthy Schools assessment</i> ?	
Ambassador Role What role will the student ambassador have in the initiative/project?	
Project Budget List <i>all</i> expenses for your project/program using the provided format.	Item/s: Cost: Quantity: Total Cost:
Implementation Plan Approximately how many students and/or staff would be involved/impacted by the program initiative? Provide a time frame for implementing your proposal. Can the program or initiative be replicated?	
Evaluation Plan How will the school evaluate the success/impact of your wellness initiative?	

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