

Commission's Grant Application Form

Shelby County Board of Commissioners

GRANT APPLICATION

Legal Name of the Organization: Tri State Youth Baseball Academy , Inc.

EIN: 26-3344828

Street Address of Organization 895 Harbor Bend Rd. Memphis , Tn. 38103

Office Phone: 901 283-8984

E-mail tjames@tristatebaseball.org

(Section Break)

EXECUTIVE DIRECTOR

First Name Tony

Last Name James

(Section Break)

GENERAL CONTACT FOR THIS REQUEST(if other than Executive Director)

First Name Tony

Last Name James

Title: Chairman

(Section Break)

DESCRIPTION OF GRANT REQUEST

Program/Project Area: Inner City Memphis

Amount Requested \$20,000.00

Total Organizational budget (for current year): \$35,079.00

Total Project/Program Budget: \$40,000.00

Dates covered by this budget: 1-1-16 Thur 12-31-16

Project/Program Name: Tri State Youth Baseball Academy , Inc.

(Section Break)

INTRODUCTION AND BACKGROUND OF ORGANIZATION

Please summarize in a short paragraph the purpose of your agency. Briefly explain why your agency is requesting this grant, what outcomes you hope to achieve, and how you will spend the funds if a grant is made.

The organization purpose is to provide organized activity during the summer for inner city youth ages 4 thru 19 years of age. Our goal for the last [8] years , to re-introduce baseball as a wholesome activity that enhances values of self esteem , respect for authority and other associated values which contributed to everyone in the neighborhoods.

(Section Break)

Narrative - Organization

Current programs and accomplishments. Please emphasize the achievements of the recent past.

Past accomplishments in the area of south parkway and south Bellevue has provided encouragement for people in the surrounding neighborhood to see youth playing baseball rather than youth engaging in gang activity.

Numbers of paid full-time staff: none

Number of paid part-time staff: 1

Number of volunteers: 7

(Section Break)

Narrative - Funding Request

Please describe the program/project for

Not all neighborhoods have the resources to provide activities for youth during the summer. If [1] child does not get involved

which you seek funding and include how it will benefit the general welfare of residents in Shelby County, TN.

in criminal activity the program is on track to obtaining it's mission. Playing baseball in the summer was a major activity of volunteers associated with our program , the whole village benefited.

General Operating Support

If applying for general operating support, briefly describe how this grant will be used.

The grant will buy uniforms , balls , bats , gloves , and needed equipment as needed. To pay for facilities fees which is maintenance of the baseball fields , Liability Insurance D and O and Contract Services for umpires.

Project Support

Please explain the specific project including a statement of its primary purpose and the need or problem that you are seeking to address.

N/A

How does the project contribute to your organization's overall mission?

N/A

(Section Break)

Narrative - Evaluation

Please explain how you will measure the effectiveness of your activities. Describe your criteria for a successful program and the results you expect to have achieved by the end of the funding period.

1. Year over year we have had increased participation in the numbers of kids from single parent families . 2. For returning students we try to enhance their skillset to the next level. 3. The development of winning teams from ages 4 to 19 years of age. 4. Consistent attendance for practice sessions and games avoid the opportunities for children to get in trouble. 5. Increased self esteem and more disciplined behavior.

Attachments:

If your request is under \$25,000 please attach the following:

1. Copy of the entity's 501 (c) 3 certificate for charitable organizations or 501 (c) 4

certificate for civic organizations

2. Most recent IRS Form 990 or Financial Statements (balance sheet and income statement) as of the most recent fiscal year end certified by Chief Financial Officer/Treasurer of the entity.

3. Complete Budget for grant request

If your request is \$25,000 or more please attach the following:

1. Copy of the entity's 501 (c) 3 certificate for charitable organizations or 501 (c) 4 certificate for civic organizations

2. Copy of an annual audit as of a date within 18 months of the start of the current fiscal year.

3. Complete Budget for grant request

File 1 [image002 \(6\).jpg](#)

File 2 [image002 \(4\).jpg](#)

File 3 [image003 \(2\).jpg](#)

ACKNOWLEDGEMENT:

Read, and if you agree to the provisions, sign the following:

The information provided has been submitted in good faith and as completely as our records and recollections permit.

I understand that the information provided in this application shall be open to inspection upon filing with the office of the Shelby County Board of Commissioners.

Signature: Tony James

Printed Name: Tony James

Date 9/15/2016
