



The Arc Maryland  
 8601 Robert Fulton Dr, Ste 140  
 Columbia, Maryland 21046  
 T 410.571.9320  
 www.thearcmd.org

## Grant Application

*To Ignite Innovation and Advance the Mission of The Arc Maryland  
 2024-2025*

### Organization Information

Name of Organization:

EIN of Organization:

Date:

Organization Website:

### Contact Information

Contact Name:

Contact Title:

Email:

Phone:

Mailing Address:

Are you a current member of The Arc?

Yes; With what chapter of The Arc are you associated?

No; What is your connection to The Arc, if any?

### Certifications from Organization:

*If you agree to each of the following grant terms, please indicate it by checking each box below.*

If selected, I will attend the in-person "pitch" presentation of proposal to The Arc Maryland Board of Directors in Columbia, MD **on the evening of Thursday, November 21, 2024.**

If awarded, I will submit two reports during the course of the grant. One midterm status report and one final report. The final report should include final outcomes with data and pictures.

If awarded, a representative from my organization will present outcomes of my project at The Arc Maryland's Innovations Event **in November/December, 2025** on a date and time to be determined, in Howard County, Maryland.

My proposal asks for grant funding between \$2,500 and \$7,500 from The Arc Maryland.

## Submission Details

Please include the following in your application submission:

1. The title of the innovation for which you are requesting grant funding.
2. A brief summary of your idea and how you will execute your project for which you are seeking funding (not to exceed a few sentences).
3. An explanation of your project's innovation(s) that will address an unmet need of individuals with intellectual and developmental disabilities (IDD), and/or their families that, if replicated, could have broader implications and applications. (Please note that projects must be in alignment with the [mission of The Arc Maryland](#).)
4. A description of the specific activities the grant funds will support:
  - a. What are you going to do?
  - b. Where will you conduct the grant activities?
  - c. Explain your qualifications to receive and manage grant funds?
5. Expected outcomes: What will happen as a result of your grant activities?
  - a. Provide at least three specific goals you will achieve (Including the number of people with IDD and their families impacted).
6. How will you demonstrate that you achieved your outcomes: How will you know you were successful? (What data and artifacts will you gather? How will you measure success?)
7. Who will work on the grant activities/project?
  - a. Provide resumes for all key personnel as attachments.
8. Plans for disseminating findings and outcomes of the project.
9. A timeline of activities. Note that all activities and expenses must be completed by Friday, September 12, 2025 and final reports are due for final disbursement of funds by Friday, October 3, 2025.

## Additional Attachments

The following documents must be included alongside your application submission:

1. Attestation that you are in good standing with the state of Maryland and the IRS.
2. Resumes or CVs for key personnel.
3. Letters of reference/support (Highly recommended but not required).
4. A completed copy of the SpArc Tank Grant Budget Form.
  - a. Please also attach additional documentation to the budget form to detail expenses.
5. Other documents to support your proposal as applicable. Examples may include:
  - a. Training materials.
  - b. Communications between partner organizations.
  - c. Designs for new adaptive devices.
  - d. Descriptions of technology you may develop.

## Documentation Guidelines

- We have simplified reporting requirements for the 2024-2025 SpArc Tank application.
- Please number all your pages.
- The application submission should not exceed 5 pages, single-sided, and double-spaced with at least size 10 font.
- Additional attachments including resumes, letters of support, the SpArc Tank Grant Budget Form, among other forms of back up documentation, may be included as numbered attachments but **do not** count toward the 5-page proposal limit.

Persons with intellectual and developmental disabilities are encouraged to apply. If you require accommodations to complete your proposal, please contact Coni Nepomuceno at [CNepomuceno@TheArcMD.org](mailto:CNepomuceno@TheArcMD.org), or by phone at 410-571-9320.



The Arc Maryland  
8601 Robert Fulton Dr, Ste 140  
Columbia, Maryland 21046  
T 410.571.9320  
www.thearcmd.org

## Submitting your Application

Email the application with all attachments to [Grants@TheArcMD.org](mailto:Grants@TheArcMD.org) no later than **12 PM (noon) on Tuesday, October 15, 2024.**

If, by Wednesday, October 16th, you have not received confirmation that your application was received, please contact Coni Nepomuceno at [CNepomuceno@TheArcMD.org](mailto:CNepomuceno@TheArcMD.org).

I certify that the information I have provided with this application is true to the best of my knowledge.

Name of Person Authorized to Submit this proposal on behalf of the organization:

Signature (required):

Date:

Name of Contact Person for this proposal (if different from name above):

Contact Email:

Contact Phone: