Dear Applicant,

At Moorings Park Foundation, we are committed to supporting education and workforce development that enhances the well-being of our senior community. One of the most meaningful ways we achieve this is by funding nonprofit organizations that align with our mission to prepare the next generation of professionals serving seniors.

Our Community Grants Program is made possible through the generosity of our residents and is guided by a dedicated committee. This program ensures that donor contributions create a lasting impact—whether by supporting future healthcare providers, caregivers, or other professionals dedicated to serving the senior population.

We invite you to apply for funding by completing the attached application. Please submit your completed application and budget to foundation@mooringspark.org by April 11, 2025.

Thank you for your dedication to serving seniors. We look forward to learning more about your organization and the important work you do in our community.

Best regards,

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**GEORGIA NORTH**

Foundation Administrator

**Moorings Park Foundation, Inc.**

120 Moorings Park Drive | Naples, FL 34105

Direct 239.919.1692

gnorth@mooringspark.org

[https://foundation.mooringspark.org](https://foundation.mooringspark.org/)

**Mission**

Promote a culture of philanthropy to enhance successful aging through support for Moorings Park residents, employees, and the greater community.

**Moorings Park Foundation**

**2025 Educational Grant Application**

**Organization Information**

Name of Organization:

EIN:

Organization Address:

Website:

Contact Person & Title:

Phone Number:

Email:

Name of Executive Director/President:

Annual Salary of Executive Director/President:

Number of paid employees:

Number of volunteers:

Mission Statement:

Name of project or program needing funding:

Amount of grant request:

1. **Program Overview**
	1. Briefly describe the scholarship or program for which you are requesting funding.
	2. How many students will benefit from this scholarship/program annually?
	3. How will this funding help develop and train a workforce dedicated to serving seniors?
2. **Target Population**
	1. Describe the demographics of the students who will benefit (e.g., age range, income level, geographic location).
	2. Will any specific populations or groups be prioritized? If so, please explain.
3. **Goals & Objectives**
	1. What are the primary goals and objectives of the program?
	2. How do these align with Moorings Park Foundation’s mission and the needs of the senior community?
4. **Implementation Timeline**
	1. What is the proposed start and end date of the program?
	2. Are there any key milestones or deadlines?
5. **Budget & Funding**
	1. Provide a detailed budget, including personnel, materials, supplies, and other costs.
	2. Are there additional funding sources contributing to this program?
6. **Measuring Impact & Reporting**
	1. How will you assess the success and impact of the program?
	2. What specific metrics or indicators will be used?
	3. What percentage of students remain in Collier County after completing their education?
7. **Organizational Capacity**
	1. What resources and support systems does your organization have to implement this program successfully?
	2. How will board members, staff, and volunteers be involved?
8. **Partnerships & Collaboration**
	1. Will any partner organizations or stakeholders be involved?
	2. Are there any matching funds available?
	3. How will collaboration with other organizations strengthen the program’s impact?
	4. Do any Moorings Park Foundation Board of Directors volunteer in any capacity (e.g., board or committee member)? If so, list their name(s) and role.
9. **Sustainability & Future Plans**
	1. How will the program continue beyond the grant period?
	2. Are there plans to expand or replicate the program in the future?

**Authorization**

I confirm that all information provided in this application is accurate and has been submitted with full knowledge and endorsement of the organization’s Board of Directors and Executive Leadership.

Name/Title of Applicant:

Authorized Signature:

Date:

**Thank you for your application!**