PARENT EDUCATION AND MEDIATION FUND
2012-2013 APPLICATION

Contact Information:

_____
Applicant:

_____
Street Address (City, County, State, Zip):

_____
Phone, Fax, Email:

_____
Tax ID #

_____
Primary Contact Person:

Narrative:
(Please answer the following questions. If you think a question is not applicable to your application, indicate so by writing N/A in the answer space provided.)

1. **Describe your organization, its history and purpose.**

2. **Describe the goals, planned activities, and a timetable for completion of the proposal.**

3. **Describe how the proposed activities will further the goals of the Parenting Plan legislation.**

4. **If this is an on-going project or program, describe the timetable for becoming financially self-sufficient? Specifically list any other grants or funding for which you have applied.**

5. **Describe the geographical area to be served, the number of people to be assisted. List the source of this information.**

6. **Describe existing or projected community involvement and support for the program/project.**

7. **Identify other organizations or projects within the geographical service area that provide the same or similar service. Describe any collaboration with the organizations listed.**

8. **Describe your efforts to obtain other funding for these proposed activities.**

9. **Describe the potential impact to those you propose to serve if these grant funds are not made available.**

10. **Are you exempt from income taxation? _____If not, describe your charitable, educational, or similarly related purpose.**

11. **Briefly describe any additional information that you think we should have.**

Attachments:

1. **One letter of support from each judge your project / program will be working with and the presiding judge for the county/district to be served**

2. **2012-2013 PEMF Financial Budget Form. See attached.**

3. **List the members of your board of directors / governing entity and the member's profession.**

4. **If your organization is incorporated, attach if applicable:**
   a) copy of corporation charter
   b) copy of IRS exemption letter.

This application must be provided to the presiding judge by April 23, 2012.

The AOC must receive this application from the presiding judge or applicant (if there is no presiding judge) on or before May 7, 2012.

The application and any questions should be addressed to:

Claudia M. Lewis
Administrative Office of the Courts
511 Union St., Suite 600
Nashville, TN 37219
(615)741-2687, ext. 1320
Fax: (615) 741-6285
claudia.lewis@tncourts.gov

Parent Education and Mediation Fund
2012-2013 Financial Budget Form

Name of Applicant _____

Please provide your projected program / project budget for July 1, 2012 – June 30, 2013 as an attachment to your grant application.

Personnel Costs

Category	PEMF Grant Funds Requested	Amount from Other Funding Sources	Total Budget
Professional Staff (No. ___)			
Support Staff (No. ____)			
Other Staff			
Employee Benefits			

Total Personnel Costs: _____

***For all personnel costs please attach a detailed description of the personnel and their roles.**

Non-Personnel Costs

Category	PEMF Grant Funds Requested	Amount from Other Funding Sources	Total Budget
Space			
Utilities			
Equipment			
Office Supplies			
Telephone			
Program Travel			
Training			
Insurance			
Dues/Fees			
Other – itemize on separate sheet			

Total Non-Personnel Costs: _____

Total Program Budget: _____