Program Overview

Objective: The Masonic Youth Group Grant Program is designed to offer financial assistance directly to local Rainbow Assemblies, Job’s Daughter Bethels, and DeMolay Chapters, as well as to state level Masonic Youth organizations recognized by the Grand Lodge of Pennsylvania.

Overview: This grant program is established as of January 1, 2012. Beginning on that date, Masonic Youth Groups may apply for a financial grant from the Pennsylvania Masonic Youth Foundation. Grants may be requested for the subsidization of membership recruitment efforts, special programs, or activities that benefit the local community.

Amount: Groups may apply for a grant in any amount in excess of $500.00. While there is no cap on the amount that can be given, groups are encouraged to keep their requests to less than $2000.00 unless it is an exceptional program.

Application Process: A Masonic Youth Group may apply for a grant by completing the “PMYF Grant Application Form.” Each application must be accompanied by the following:

- Budget – detailing the expected expenditures of the money.
- Publicity Plan – detailing how the group is going to publicize the program.
- Rating Metrics – detailing ways in which the success of the program will be measured. These metrics should be SMART (specific, measureable, attainable, relevant, and time sensitive.)
- Time Line – an estimated schedule, beginning from the date of approval, through implementation, ending with the submission of the final project review (which should occur no more than 30 days after the completion of the project.)

Examples of these documents are included with the application.

Once the application is complete and all of the required documents are in order, they can be submitted to:

PMYF Grant Program
1244 Bainbridge Road
Elizabethtown, PA 17022

The application and documents will be reviewed by the PMYF staff. Applications that are consistent with the mission of the program and completed properly will be forwarded to the PMYF Board of Directors for their approval.

Each application submitted will receive a written response. In the case of a denial, an explanation will be included with suggestions for improvement should the group decide to reapply.

Please remember that submission of an application does not guarantee approval.

Questions regarding this program or the application process can be directed to the Pennsylvania Masonic Youth Foundation at the address above or by calling 800.266.8424 during regular business hours.
Pennsylvania Masonic Youth Foundation
Masonic Youth Group Grant Program

Application

Youth Group Name: ____________________________________________________

Name of Person Submitting Form: __________________________________________

Title of Person Submitting Form: __________________________________________

Correspondence Address: __________________________________________________

City: ___________________________ State: ___________ Zip: ___________

Phone Number: (______) _____ - _________ E-Mail: ________________________

Request Grant: $____________________ By what date do you need the funds?* ___/___/___

*Grants must be applied for at least six months prior to the desired date for disbursement of funds.

How many youth group members do you anticipate will directly benefit from this grant? _____

What is the scope of the impact that this grant could make? (Check all that apply.)

□ Assembly / Bethel / Chapter    □ Jurisdictional    □ National
□ Local Community              □ Regional Community    □ State-wide

Please provide an overview of the program or event for which you are requesting this grant:

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

Check each box when you attach the required documents:

□ Publicity Plan    □ Budget    □ Rating Metrics    □ Timeline

Plan approved by:

Signature 1: Youth Leader & Title

Signature 2: Adult Leader & Title

Please send completed application with all required documents to:

PMYF Grant Program
1244 Bainbridge Road
Elizabethtown, PA 17022