City Youth Now provides grants that support the holistic development of youth in the Juvenile Justice and Foster Care systems. These grants typically address educational, extracurricular, and emergency needs.

**Instructions:** Please complete and submit this form to CYN **via email (yvette@cityyouthnow.org).** Applications are due on the 15th day of each month. Please allow 2-3 weeks after the deadline to receive a response from CYN staff. If you have questions about our application process or the status of your request, you may email yvette@cityyouthnow.org. Due to the high volume of requests, phone calls will be redirected to email. Although we will make every effort to meet the needs of your client, **funding is not guaranteed**. Thank you!

|  |
| --- |
| Date Request Submitted:       |

**I. Youth’s Information:**

|  |  |
| --- | --- |
| Last Name:      | First Name:      |
| Date of Birth:      | Age:       | Gender: [ ]  Male [ ]  Female [ ]  Other:       |
| Court System: [ ] Juvenile Probation System [ ] Foster Care System | Ethnicity (check all that apply):[ ]  Asian/Pacific Islander [ ]  Native American[ ]  African American [ ]  White [ ]  Latino [ ]  Other:       |
| Caretaker Name:      | Caretaker Relationship to Youth:       |
| Brief History of Minor:       |

**II. Grant Request:**

|  |
| --- |
| Item Requested:      |
| Date Item is Needed:       | Amount of Request: $      |
| Please explain why this grant is necessary:      |

**II. Grant Request cont’d:**

|  |  |
| --- | --- |
| Have you made any other attempts to secure funds?[ ] YES [ ] NO | If yes, from whom?       |
| How much has been secured?: $      |
| Make Check Payable to:       | Send Check/Item to:  Name:        Address:             |

**III. Youth Advocate’s Information:**

|  |  |
| --- | --- |
| Last Name:       | First Name:       |
| Email Address:       | Phone numbers:       |
| Agency Name:       | Agency Address:              |
| Relationship to youth: [ ] Social Worker [ ] Case Manager[ ] Probation Officer [ ] Other:      [ ] Attorney |  Questions:       |

**IV. Price Sheet/Receipt**

Please attach a price sheet for the item or service requested. If the item or service has already been already been purchased, please attach receipts and any other relevant documentation.