



Grant Application

Organization/School Name Woodland Hills Academy
 Organization/School Address 110 W Redwing St
 City Duluth State MN Zip 55803 County St. Louis
 Telephone 218-728-7492 Ext 203 Fax 218-728-7495
 Adult Contact Person Ann Ek Title Health/PE Teacher
 Telephone 218-7287492 Ext 203 E-Mail ann.ek@isd709.org
 Youth Contact Person Sylvanus Morris Grade 12
 Telephone (in treatment..not available) E-Mail (in treatment, not available)
 Principal's Name(if applicant is a school) Denise Clairmont
 E-mail (if applicant is a school) denise.clairmont@isd709.org
 Is your organization an IRS 501(c)(3) non-profit? Yes No
 Organization IRS Federal ID Number 41-6003776
 Please attach a copy of the Applicant Organization or Fiscal Agent's Internal Revenue Service Determination Letter.
 If no, please provide information about your Fiscal Agent in the following section.

FISCAL AGENT

Organization ISD 709
 Address 215 N 1st Ave E
 City Duluth State MN Zip 55802
 Contact Person Ann Ek Title Health/PE Teacher
 Telephone 218-728-7492 Ext 203 Fax _____
 E-mail ann.ek@isd709.org
 Organization IRS Federal ID Number 41-6003776
 Please attach a copy of the Applicant Organization or Fiscal Agent's Internal Revenue Service Determination Letter.

GRANT REQUEST

Project Title Saving Lives with CPR
 Amount of Request (not to exceed \$1,000) \$1000
 Date of Request December 8, 2015

Please provide narrative information and complete the budget form.

What is the goal of your proposed project? Describe the project. Please include details that give a clear picture of your project.

The goal of this grant is to get more tools to use for education and these manikins can add some much needed hands on experience because the manikins are the closest things to an actual human.

To certify kids so we can feel comfortable and confident to get in and try to help if someone gets hurt.

**Teacher note: this past semester one of my students said "I wish I had known this before now, cuz I watched a friend die, after he was shot because I didn't know what to do to help."

**Second Teacher note: we had an emergency this year and when a student went down, one of his classmates told the teacher "it's ok, we know CPR"

Who will benefit from this project?

Every student and teacher will benefit from this grant because videos and physical scenes with the manikins will help people be more prepared. We can practice on baby manikins to help us learn not only CPR but choking too. The adults will help us know how much pressure to put on the chest when we do compressions.

Identify how many people will work on the project;

Children ages 0-5 _____ Youth ages 6-12 10 Youth ages 13-19 110 Adults 25

Estimate the number of people to be served;

Children ages 0-5 _____ Youth ages 6-12 10 Youth ages 13-19 110 Adults _____

This is just for one school year. These can be used for multiple years. The impact can be far reaching because students may use it in their community.

Why is this project needed and important to your organization?

It would be nice to have many manikins so each student can have hands on practice. It impacts many people that we may be around some day in our community. This will give skills to many students who will help those who are hurt.

How will the project happen? List activities that will be done.

We will watch videos in Health class and stop the video to have hands on practice which helps us to learn. We will have scenarios in which we need to figure out what to do in each emergency. The hands on learning will help future generations and those in my community. We will also practice on the manikins how to use an AED.

When and **Where** will this project take place?

This project will take place each semester in Health class at Woodland Hills Academy. This will be done 2 times per year, every year.

PLEASE RETURN THIS FORM TO
Northland Foundation
202 W. Superior St., Suite 610
Duluth, Minnesota 55802
(218) 723-4040 (800) 433-4045 Fax: (218) 723-4048
info@northlandfdn.org • www.northlandfdn.org



Project Budget

Organization: Woodland Hills Academy

Project Name: Saving Lives with CPR

Implementation Time Line: From September To May (2 times yearly)

Budget Line Item (List each item separately)	KIDS PLUS Youth in Philanthropy (Not to exceed \$1,000)	LOCAL SUPPORT		TOTAL (Line Item)
		*Cash	**In-Kind	
1. 4 pack brown skinned baby manikins	\$ 426.00	\$	\$	\$ 426.00
2. 4 pack Adult Manikins	\$ 425.25	\$	\$	\$ 425.25
3. Adult Carrying case	\$ 45.00	\$	\$	\$ 45.00
4. 1 Pack Face Shield lung bag	\$ 21.95	\$	\$	\$ 21.95
5. 5 packs CPR practice face shields @ \$17.95 each	\$ 89.75	\$	\$	\$ 89.85
6.	\$	\$	\$	\$
7. 2 baby manikins	\$	\$	\$ 228.00	\$
8. 2 adult manikins	\$	\$	\$ 300.00	\$
9. Face wipes	\$	\$	\$ 10.00	\$
10.	\$	\$	\$	\$
11.	\$	\$	\$	\$
12.	\$	\$	\$	\$
Column Totals Total Each Column →	\$ 1007.95	\$	\$ 538.00	\$ 1007.95

Please explain the sources of cash and in-kind support listed above: _____

*CASH refers to funds donated by local businesses/civic groups/schools/churches/etc.; also fundraising efforts.

**IN-KIND refers to any supplies, staff time, use of space, or other non-cash contributions that are provided by your organization or others.