

FAMILY READINESS GROUP APPLICATION FORM AND PROCEDURES AS OF OCTOBER 6, 2010



[GUARD SUPPORT OF MASSACHUSETTS, INC.](#)

Family Readiness Group grant applications must be verified by the State Family Program Office or the Family Assistance Center Coordinator and emailed to Guard Support at application@guardsupport.org with a copy to maureen.serrecchia@us.army.mil. Attached is a list of the state Family Program Office (FPO) location with telephone number, as well as the State Family Assistance Center (FAC) locations and telephone numbers.

Guard Support of Massachusetts (GSMA) provides financial support to Family Readiness Groups of the Massachusetts National Guard that face needs not currently provided for by other organizations.

Grants to a single Family Readiness Group generally will not exceed \$1,000 per year if the unit is deployed – absent extraordinary circumstances.

Grants to a single Family Readiness Group generally will not exceed \$500 per year if the unit is not deployed – absent extraordinary circumstances. Upon deployment, the unit may be eligible for an additional \$500 per year.

Grants do not have to be repaid.

**GUARD SUPPORT OF MASSACHUSETTS, INC.'S BOARD OF DIRECTORS
REVIEWS APPLICANT'S INFORMATION AND
RESERVES THE RIGHT TO VERIFY ANY INFORMATION PROVIDED.**

INSTRUCTIONS:

- Applicant must complete the application form in its entirety.
- Family Program Office Validation Certification must be completed and signed.

IF YOU HAVE ANY QUESTIONS ABOUT THIS APPLICATION CALL THE MASS. NATIONAL GUARD
STATE FAMILY PROGRAM OFFICE IN WELLESLEY AT 888-301-3103, EXT. 7222

GUARD SUPPORT OF MASSACHUSETTS, INC.
FAMILY READINESS GROUP APPLICATION FOR EMERGENCY FINANCIAL ASSISTANCE

**THE EMERGENCY RELIEF COMMITTEE REVIEWS APPLICANT INFORMATION
AND RESERVES THE RIGHT TO VERIFY ANY INFORMATION PROVIDED.**

1. UNIT NAME: _____ DATE: _____
 2. UNIT STATUS: ____ CURRENTLY DEPLOYED ____ NOT CURRENTLY DEPLOYED (CHECK ONE)
 3. IF DEPLOYED: (IF UNIT IS NOT CURRENTLY DEPLOYED, SKIP TO QUESTION #4)
 - a. WAS THE ENTIRE UNIT DEPLOYED? ____ YES ____ NO (CHECK ONE)
 - b. WHERE IS THE UNIT CURRENTLY DEPLOYED ? _____
 - c. DEPLOYMENT DATES: FROM (MONTH/DATE/YEAR) _____ TO (MONTH/DATE/YEAR)
 - d. TOTAL DEPLOYMENT PERIOD (NUMBER OF MONTHS): _____
 4. TOTAL NUMBER OF GUARD MEMBERS IN UNIT: _____
 5. IF ENTIRE UNIT WAS NOT DEPLOYED, WHAT NUMBER OF UNIT MEMBERS WERE DEPLOYED? _____
 6. UNIT COMMANDER'S FULL NAME AND RANK: _____
PLEASE PRINT FIRST NAME, MIDDLE INITIAL, LAST NAME
- COMMANDER'S CONTACT INFORMATION:
- WORK #: _____ EMAIL: _____
7. UNIT STREET ADDRESS: _____
CITY, STATE AND ZIP: _____
 8. YOUR FULL NAME: _____
PLEASE PRINT FIRST NAME, MIDDLE INITIAL, LAST NAME
 9. YOUR ROLE (TITLE) WITHIN UNIT FRG: _____
 10. YOUR HOME STREET ADDRESS: _____
CITY, STATE AND ZIP: _____
CONTACT #: HOME: _____ CELL: _____ WORK: _____
 11. PERSONAL EMAIL ADDRESS: _____
 12. WORK EMAIL ADDRESS: _____
 13. IF YOUR FRG IS APPROVED FOR A GRANT, WHAT ADDRESS SHOULD WE MAIL THE GRANT CHECK TO? – CHECK ONE:
 MAIL TO THE UNIT ADDRESS, TO THE ATTENTION OF: _____
 MAIL TO THE APPLICANT'S HOME ADDRESS (NOTED IN # 10 ABOVE)

14. LIST THREE OTHER INDIVIDUALS WITH SIGNIFICANT ROLES IN THE FRG WHO THE GRANT COMMITTEE COULD CONTACT, IF NECESSARY:

1. FULL NAME: _____
PLEASE PRINT FIRST NAME, MIDDLE INITIAL, LAST NAME

ROLE WITHIN UNIT FRG: _____

HOME STREET ADDRESS: _____

CITY, STATE AND ZIP: _____

CONTACT #: HOME: _____ CELL: _____ WORK: _____

PERSONAL EMAIL ADDRESS: _____

WORK EMAIL ADDRESS: _____

2. FULL NAME: _____
PLEASE PRINT FIRST NAME, MIDDLE INITIAL, LAST NAME

ROLE WITHIN UNIT FRG: _____

HOME STREET ADDRESS: _____

CITY, STATE AND ZIP: _____

CONTACT #: HOME: _____ CELL: _____ WORK: _____

PERSONAL EMAIL ADDRESS: _____

WORK EMAIL ADDRESS: _____

3. FULL NAME: _____
PLEASE PRINT FIRST NAME, MIDDLE INITIAL, LAST NAME

ROLE WITHIN UNIT FRG: _____

HOME STREET ADDRESS: _____

CITY, STATE AND ZIP: _____

CONTACT #: HOME: _____ CELL: _____ WORK: _____

PERSONAL EMAIL ADDRESS: _____

WORK EMAIL ADDRESS: _____

15. WHAT IS THE NATURE OF YOUR NEED? - PLEASE EXPLAIN:

16. ARE THERE OTHER RESOURCES AVAILABLE TO MEET THIS NEED? – PLEASE EXPLAIN:

17. OUR FRG IS REQUESTING A GRANT IN THE AMOUNT OF \$ _____.

18. IF YOUR FRG IS PROVIDED GRANT FUNDING, WILL YOUR FRG COMMIT TO THE FOLLOWING?

- a. INVITE GUARD SUPPORT TO ATTEND UPCOMING FRG MEETINGS AND EVENTS? ____ YES ____ NO
- b. PROVIDE GUARD SUPPORT WITH PHOTOS OF FRG MEETINGS AND EVENTS THAT WE CAN USE ON OUR WEBSITE AND ON SOCIAL NETWORKING SITES? ____ YES ____ NO
- c. ENCOURAGE FRG MEMBERS TO FOLLOW GSMA ON FACEBOOK AND TWITTER? ____ YES ____ NO
- d. PROVIDE RECEIPTS FOR EXPENSES VERIFYING WHERE GRANT MONIES WERE USED? ____ YES ____ NO
- e. PROVIDE A TESTIMONIAL QUOTE ABOUT THIS GRANT THAT CAN BE POSTED ON OUR WEBSITE AND IN OUR MEDIA MATERIALS? ____ YES ____ NO

19. IF YOU ARE SEEKING TO USE A PORTION OF GUARD SUPPORT GRANT PROCEEDS FOR MERCHANDISE (T-SHIRTS, WRIST BANDS, ETC.), WILL YOU MAIL US A FEW OF EACH SO THAT WE CAN FEATURE THEM ON OUR WEBSITE AND ON SOCIAL NETWORKING SITES? ____ YES ____ NO

GUARD SUPPORT RESERVES THE RIGHT TO REQUEST COPIES OF RECEIPTS FOR FRG ITEMS PURCHASED, AND EXPENSES INCURRED UNDER THIS FRG GRANT.

APPLICANT CERTIFIES THAT GMSA FRG GRANT PROCEEDS WILL BE USED SPECIFICALLY FOR THE FOLLOWING ANTICIPATED EXPENSES. LIST PLANNED USE OF GRANT. PROVIDE ESTIMATES FOR HOW MUCH OF THE GRANT WILL BE USED FOR EACH EXPENSE:

EXAMPLE:

<i>EXPENSE/PAYEE:</i>	<i>AMOUNT:</i>
ADMINISTRATION (MEETING EXPENSES, POSTAGE)	\$200.00
CHILDREN'S EVENT AT THE HIGGINS ARMORY MUSEUM IN WORCESTER ON XX/XX/2011 (PROVIDE SPECIFIC DATE AND LOCATION OF EVENTS, IF KNOWN AT THIS TIME).	\$200.00
HOME COMING CELEBRATION ON XX/XX/2011 AT THE ARMORY (PROVIDE SPECIFIC DATE AND LOCATION, IF KNOWN AT THIS TIME).	\$400.00
HOLIDAY PARTY FOR FAMILIES ON 12/10/10 AT THE ARMORY (PROVIDE SPECIFIC DATE AND LOCATION, IF KNOWN AT THIS TIME).	\$200.00

EXPENSE TOTAL MUST ADD UP TO THE TOTAL GRANT AMOUNT REQUESTED: \$1,000.00

COMPLETE THE FOLLOWING TABLE OF ANTICIPATED FRG EXPENSES BY EXPENSE CATEGORY:

<i>EXPENSE/PAYEE:</i>	<i>AMOUNT:</i>

EXPENSE TOTAL MUST ADD UP TO THE TOTAL GRANT AMOUNT REQUESTED:\$ _____

FAMILY PROGRAM OFFICE / FAMILY ASSISTANCE CENTER VALIDATION CERTIFICATION

I, the undersigned, have examined this application and certify the claim to be valid. I also verify that we have pursued all other resources reasonably available for assistance.

PRINTED NAME: _____

FPO/FAC LOCATION: _____

TITLE: _____ DATE: _____

VERIFICATION SIGNATURE: _____

CONTACT INFORMATION: WORK #: _____ CELL #: _____

OTHER #: _____ EMAIL: _____

APPLICANT INFORMATION VERIFICATION AND RELEASE AUTHORIZATION:

1. I authorize verification/release of the information I am providing on this application. This authorization applies to organizations inside or outside of the Massachusetts National Guard for the purposes of evaluating this application and/or for disclosure to raise additional funds and/or awareness of Guard Support's activities.

Please initial: _____

2. The information I have provided on this Application Form is true and correct to the best of my knowledge.

Please initial: _____

APPLICANT'S SIGNATURE: _____

ROLE IN FRG: _____

DATE SIGNED: _____

PLEASE KEEP THIS PAGE FOR YOUR RECORDS- - DO NOT SUBMIT THIS PAGE WITH YOUR GRANT APPLICATION



National Guard Family Program

FAMILY PROGRAM NETWORK

Massachusetts National Guard State Family Program Office:

14 Minuteman Lane 888-301-3103 x7222
Wellesley, MA 02481

Army National Guard Family Assistance Centers:

Taunton:	Family Assistance Center 111 Gen Owens Blvd., Taunton, MA 02780	508-823-0891
Springfield:	Family Assistance Center 1505 Roosevelt Avenue Springfield, MA 01109	888-301-3103 ext 7950
Worcester:	Family Assistance Center 50 Skyline Dr. Worcester, MA 01605	508-753-3164
Reading:	Family Assistance Center 25 Haverhill Street Reading, MA 01867	888-301-3103 ext 7444
Wellesley:	Family Assistance Center 14 Minuteman Lane Wellesley, MA 02481	888-301-3103 ext 7221
Milford:	Family Assistance Center 50 Maple Street Milford, MA 01757	888-301-3103 ext 7358

Air National Guard Wing Coordinators:

102nd Intelligence Wing Otis Air NG Base	Family Program Center 158 Reilly St., Box 70 Otis ANG Base, MA 02542	508-968-4855
104th Fighter Wing Barnes Air NG Base	Family Program Center 175 Falcon Drive Westfield, MA 01085	413-568-9151 ext 1183