

Dear grant applicant:

Thank you for your interest in the grant program of the Charleston Area Medical Center Foundation, Inc. The Foundation awards grants for the provision of health-related services for the benefit of people served by the Charleston Area Medical Center (CAMC).

Awards are made in three general areas:

- *Patient Care*
- *Education*
- *Research*

The CAMC Foundation Board of Directors will review and act on grant applications submitted to the Foundation. Applicants will be advised as to the approval or disapproval of the requests.

Below you will find the CAMC Foundation's grant guidelines and application. Please mail the completed application to CAMC Foundation, 3412 Staunton Ave., Charleston, WV 25304. If you have questions, call (304) 388-9860.

CHARLESTON AREA MEDICAL CENTER FOUNDATION, INC. GRANT APPLICATION GUIDELINES

The Charleston Area Medical Center Foundation, Inc. (CAMC Foundation) awards grants for the benefit of Charleston Area Medical Center, Inc. (CAMC). The CAMC Foundation is interested in funding innovative and special projects. The CAMC Foundation accepts grant requests throughout the year. All grant awards are for a one-year period. If the total grant funds are not used within the one-year period, the unspent money will be canceled unless a request has been approved to extend the grant period.

Application Form

A completed grant application form must be submitted with each grant request.

Review Procedure

Grant applications are reviewed by the CAMC Foundation Board of Directors. At its next scheduled meeting, the Board of Directors will take action on the grant requests. Applicants will be advised by the Foundation as to the approval or disapproval of the requests. Grant recipients are required to submit a report, upon completion of the project regarding the expenditure of awarded funds.

Research Projects

The CAMC Institute is responsible for research oversight and compliance for all research conducted at CAMC and/or the West Virginia University Charleston Division. All research proposals are subject to research and sponsored projects policies as defined by the CAMC Institute. Applications for research funding must be reviewed and submitted through the institute's Department of Research and Grants Administration and will require signatory approval of the Institute President before being submitted to the Foundation.

Grant Request Guideline

For proper consideration of grant applications, the application must fall within the mission of the CAMC Foundation and follow these guidelines.

1. Submit a completed grant request form.
2. Provide a description of the project that includes:
 - an identification of the CAMC strategic initiative to which the project relates.
 - a clear indication of the need that will be addressed by the project.
 - how the project will benefit CAMC including who will be served.
 - a description of the project goals, objectives, which should include outcomes or results you expect to achieve, and timetable.

3. Provide a budget that includes:
 - the amount of this grant request
 - the names of other resources whom you have received commitments or to whom you have applied for support
 - total cost for the project
 - how the project will be funded in future if it is to be an ongoing program
4. **Applicant information:**
 - **name, address, and telephone number**
 - **name, address, and telephone number of the contact person if different from applicant**
5. Signature authority will depend on the submitting organization.
 - a. Charleston Area Medical Center
 - Applicant
 - Corporate Director and Medical Director if appropriate
 - Vice President/COO
 - CAMC CEO
 - b. CAMC Health Education and Research Institute (CHERI)
 - Applicant
 - CHERI President
 - CAMC CEO or designee
 - c. Research related requests
 - Applicants
 - CAMC Institute President
 - CAMC CEO or Designee

CAMC Foundation Mission Statement

The mission of the Charleston Area Medical Center Foundation, Inc. is to support and promote Charleston Area Medical Center's (CAMC) delivery of excellent and compassionate health services, and its contribution to the quality of life and economic vitality of the region

All communications to be addressed to:

E. Gail Pitchford, President
Charleston Area Medical Center Foundation
3412 Staunton Ave.
Charleston, WV 25304
Phone: (304) 388-9860
Fax: (304) 388-9861
e-mail: gail.pitchford@camc.org

Grant Request No. _____ (assigned by CAMC Foundation)

CAMC FOUNDATION GRANT APPLICATION

Please Print or Type

Date of Application: _____

Organization Name: _____

Applicant: _____

Address: _____

Telephone: _____ / _____ Facsimile: _____ / _____

Contact person
if not applicant: _____ Telephone: _____ / _____

Amount of grant request: \$ _____

Total project budget: \$ _____

Date funds will be needed: _____

Brief summary of project: _____

Date of last grant award: _____ / _____ / _____ Amount of last grant award: \$ _____

PLEASE INCLUDE APPROPRIATE SIGNATURES AS INDICATED IN GRANT GUIDELINES.

Applicant: _____
Print Signature

Medical Director: _____
Print Signature

Vice President:
or CHERI President: _____
Print Signature

Associate VP WVU/
Charleston Division: _____
Print Signature

CAMC COO: _____
Print Signature

CAMC CEO or designee: _____
Print Signature