



**Kenosha County**

**Youth As Resources Board**

Kenosha County YAR ♦ 19600 - 75<sup>th</sup> Street, Suite #2 ♦ Bristol, WI 53104 ♦ 262-857-1945

## FUNDS FOR YOUTH-LED SERVICE PROJECTS!

### What is Youth As Resources (YAR)?

Youth As Resources is grant-giving organization that funds youth-designed and youth-led community service projects that benefit individuals in Kenosha County.

### How does it work?

A group of young people with one or more enthusiastic adults...

- Step 1:** Brainstorm about Kenosha County community problems or needs.  
Go to: [kenosha.extension.wisc.edu/youth/YAR](http://kenosha.extension.wisc.edu/youth/YAR) and look for "Service Opportunities in Kenosha County"
- Step 2:** Identifies a Kenosha County community need and designs a community service project to addresses that need
- Step 3:** Applies to YAR for project funding
- Step 4:** Gives a 3 minute presentation to the YAR Board in person about their project, and answers any questions the YAR Board may have about the project
- Step 5:** Completes the community service project with funding from YAR (If approved)
- Step 6:** Documents the implementation to the project, evaluates the benefit and celebrates the success
- Step 7:** Submit a summary of the project by completing the YAR Project Book and send to the Kenosha County UW-Madison Division of Extension office upon completion of the project

### Who can apply?

Groups of Kenosha County youth grades K-12 who want to make a difference in their community. Each youth group must have a sponsor organization such as a church, school, or community agency and an adult sponsor.

### How do you get involved?

- Read the grant guidelines and apply for grants of up to \$500 for funding needed to complete your project by filling out the attached application form. All projects must benefit individuals/groups in Kenosha County.

**\*The YAR BOARD meets the third Tuesday of the month September – May.  
Granting meetings occur during the months of October, February, and March.  
Grant applications are due one week before the Board Meeting.**

Presentations of grant proposals must be made in person to the YAR Board at the next scheduled proposal review meeting. If approved, funding will be made available in about 10-14 days following receipt of the YAR funding contract.

*Kenosha County YAR is a program of UW-Madison Extension Kenosha County  
in partnership with the United Way of Kenosha County.*



## **Youth As Resources Describes Community Service as:**

Youth and adults contributing time together to make a positive change which addresses a community need.

### **YAR Community Service also includes:**

- Service-Learning
- Youth Leadership
- Achieving a specific goal
- Team building and cooperation
- Realizing the importance of being an active community member

### **Service Project Guidelines:**

1. Projects must clearly be “community service” and include the components of the above definition. The project also needs to benefit residents in communities throughout Kenosha County, with an emphasis on youth volunteer service to others. Projects targeting communities outside of Kenosha County will not be considered.
2. Youth determine what they want to do as their service project. Youth must prepare the application, present their ideas to the Kenosha County Youth As Resources Board in person (unless inhibited by Covid, then may present online), and implement the project once it is funded.
3. A youth group consists of two or more youth. YAR funding is available to youth aged 18 and under and each youth group must have proper adult supervision for their projects.
4. Any youth group applying must have a non-profit sponsor organization, which receives the grant award check. An adult from that organization should serve as advisor. If you do not have a sponsor organization, contact YAR at 262-857-1945.
5. The time frame for your project will depend on the type of project. Most projects should be completed in 1-3 months. Upon project completion, a project book must be returned to the Extension Kenosha County office within 30 days.
6. Projects may request funding up to \$500. Funds may be used for the direct operation of the project, transportation, and limited youth recognition. Unacceptable requests include: Youth or adult wages, dinner/banquets, donations to other organizations, fundraisers, or out of town trips.
7. Applications should be submitted by the deadline for review by the Kenosha County Youth As Resources Board. All questions on the application must be answered.

| <b>Grant Application Due Date</b> | <b>Grant Presentation Date (5-6pm)</b> |
|-----------------------------------|----------------------------------------|
| Tuesday, October 13, 2026         | Tuesday, October 20, 2026              |
| Tuesday, November 10, 2026        | Tuesday, November 17, 2026             |
| Tuesday, February 9, 2027         | Tuesday, February 16, 2027             |
| Tuesday, March 9, 2027            | Tuesday, March 16, 2027                |

8. Grant recipients must use YAR grant monies in a manner that is consistent with YAR’s nondiscrimination policy, as stated below. Funded project recipients are required to acknowledge that YAR provided funding in any written communications and/or publicity.

*Youth As Resources does not discriminate against anyone for reasons of race, color, gender/sex, gender identity, creed, disability, religion, national origin, ancestry, age, sexual orientation, pregnancy, marital or parental status, arrest or conviction record or veteran status*

### **Application Submission or Grant Questions:**

Youth applying for grants can submit their application via email ([camille.carlson@wisc.edu](mailto:camille.carlson@wisc.edu)), fax (262-857-1998), or mail (see bottom of last page). If you have any clarifying questions or concerns, please

contact Camille Carlson by email at [camille.carlson@wisc.edu](mailto:camille.carlson@wisc.edu) or phone at 262-857-1934.



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## **YOUTH-LED SERVICE GRANT APPLICATION**

Title of your project: \_\_\_\_\_

Project completion: \_\_\_\_\_ Project location(s): \_\_\_\_\_

Youth Contact Person: \_\_\_\_\_ Age: \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Address (street, city, zip): \_\_\_\_\_

Group Name: \_\_\_\_\_

Sponsor Organization: \_\_\_\_\_

Adult Advisor: \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Address (street, city, zip): \_\_\_\_\_

What Kenosha County community need are you addressing with your project?

What are you going to do as your service project?

Who will benefit from this project?

How many people will benefit? \_\_\_\_\_

How are youth involved or responsible for the work of this project?

How will youth be working in partnerships with adults to complete this project?

How will you know if your project is successful?

List the names of the youth who will be involved in this project.

| Number |                       | Gender* |            |        | Ethnicity* |              | Race* |       |                 |       |                  |
|--------|-----------------------|---------|------------|--------|------------|--------------|-------|-------|-----------------|-------|------------------|
| Youth  | Do not wish to answer | Male    | Non-binary | Female | Hispanic   | Non-Hispanic | White | Black | American Indian | Asian | Pacific Islander |
|        |                       |         |            |        |            |              |       |       |                 |       |                  |

For tracking and reporting purposes, **Kenosha County Youth As Resources** asks your group to estimate the number of youth participating in your project (not the people being served by the project) in these census categories:

\* When combined, numbers in these individual categories should equal the total number of youth.

## PREPARE A BUDGET FOR YOUR PROJECT:

| Budget Narrative                                             | Quantity   | Cost/Unit      | Total       |
|--------------------------------------------------------------|------------|----------------|-------------|
| <b>1. Supplies/ Purchase/Rental</b><br>(example: Latex paint | 12 gallons | @ \$18/ gallon | \$216. 00 ) |
| <b>2. Transportation</b><br>(example: Charter bus            | 5 trips    | @ \$20/trip    | \$100. 00 ) |
| <b>3. Miscellaneous</b>                                      |            |                |             |

Total Project Cost \$ \_\_\_\_\_

Total Amount Requested \$ \_\_\_\_\_

Youth Signature: \_\_\_\_\_

Date submitted: \_\_\_\_\_

Adult Name: \_\_\_\_\_  
Please Print

Title: \_\_\_\_\_  
Please Print

Adult Signature: \_\_\_\_\_

Date submitted: \_\_\_\_\_

Person responsible for keeping receipts and

submitting the financial report to YAR: \_\_\_\_\_

If the grant is awarded, please make check payable to: \_\_\_\_\_

Complete all sections of this application and make sure it reaches the Kenosha County Extension office by the due date listed on the first page. **Remember to keep a copy of the application for your records!** Send your completed application to:

### KENOSHA COUNTY YOUTH AS RESOURCES

Kenosha County UW-Madison Division of Extension  
19600 – 75<sup>th</sup> Street, Suite #2  
Bristol, WI 53104  
262-857-1945  
262-857-1998 (FAX)  
[camille.carlson@wisc.edu](mailto:camille.carlson@wisc.edu)



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