

**GAY-STRAIGHT ALLIANCE  
NETWORK**



**Dear GSA Network-Youth Venture Applicant,**

GSA Network is proud to announce our new partnership with Youth Venture. The GSA Network Youth Venture partnership will help GSAs and LGBT and ally youth launch campaigns to create change in schools across California by offering start-up funds to youth-led teams.

GSA Network is a youth-led organization that empowers youth to fight homophobia and transphobia in schools throughout California. You can learn more about GSA Network at [www.gsanetwork.org](http://www.gsanetwork.org). Youth Venture is a national movement of young people who are proving that their dreams, creativity, and abilities make a positive difference to communities across the nation. Youth Venture has helped teams develop organizations and projects that do everything from tutoring children to assisting senior citizens to cleaning up the environment. You can learn more about Youth Venture at [www.youthventure.org](http://www.youthventure.org).

The GSA Network-Youth Venture partnership will provide start-up funds to help youth start GSAs where they don't exist and help established GSAs start new campaigns to create change at their schools.

As you prepare to join this movement by launching your own club or campaign, take the time to research and think through the questions posed to you in the application and develop a clear plan of action.

Applications are due on Friday, March 5, 2004. After you complete this application, we will ask you to present your venture idea and plan to a panel of people interested in helping you get started. These panels will be held at several locations throughout California in mid-March. The panelists use the Youth Venture criteria to evaluate and determine whether each Venture team is ready to launch as a Youth Venture. This is not a competition. All teams that meet the criteria will be invited to join the Youth Venture community. The GSA Network-Youth Venture partnership is in a pilot stage in 2004 and anticipates supporting 5-10 teams this year with grants of up to \$500.

Good luck! We look forward to helping you develop your idea and launch your project. Be sure to keep a copy of your application for your records.

Sincerely,

GSA Network Staff

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## **What is the GSA Network-Youth Venture Partnership?**

**A GSA Network-Youth Venturer is a young person who...**

- Is committed to creating social change.
- Is committed to social justice and non-discrimination.
- Develops an idea and actively controls the venture/project.
- Designs a lasting organization by planning for the future.
- Involves a strong team of young people in the venture/project.
- Has clear, attainable goals, a solid plan and budget, and a strategy to evaluate progress and community impact.
- Has the energy and skills to make the venture/project a success.
- Has an Ally committed to the venture's independence and success.
- Is ethical, trustworthy, and responsible.

**In addition to providing you with start-up funding, GSA Network and Youth Venture will help you out with your venture.**

**How can GSA Network help you?**

- Connect you to other GSAs engaged in activism across California.
- Provide grassroots organizing training for your GSA members.
- Provide leadership development opportunities for innovative leaders like you.
- Provide you with materials and resources for GSA activism at [www.gsanetwork.org](http://www.gsanetwork.org).
- Provide technical assistance for your GSA or LGBT and ally youth group.

**How can Youth Venture help you?**

- Provide you with materials to launch and sustain your venture.
- Network you with the growing network of Youth Venturers across the country.
- Help your work get publicity and recognition through local and national media.
- Nominate Youth Venturers for awards, scholarships, publicity, and other ongoing educational and recognition opportunities.
- Give you access to a "Youth Venturers Only" section of [www.youthventure.org](http://www.youthventure.org).

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## **Youth Venture Application**

Use additional paper as necessary to answer each question thoughtfully and completely -- just make sure to include all of the answers and the signatures that are required.

Once you complete this application, return it to GSA Network at 160 14<sup>th</sup> Street, San Francisco, CA 94103 or email it to us at <mailto:youthgrants@gsanetwork.org> or fax it to us at 415-552-4729.

Applications are due on Friday, March 5, 2004.

**Please answer the following questions:**

- 1. What is your venture's name?**
- 2. What is your venture/project idea? How did you come up with the idea?** (Approx. 100-300 words)
- 3. What is the purpose of your venture? Who will benefit from the solution you identified? How will your venture benefit your community, your school, or your peers?** Be descriptive and specific as to what goals you would like to reach. (Approx. 100-300 words)
- 4. Is anyone else already providing this service or similar solutions to the need you identified? Are they doing a good job? Can you learn from their strengths or weaknesses?** Learning about efforts made in your immediate community and beyond may help you in planning for your own venture/project. (Approx. 50-200 words)
- 5. What are the first steps you will take if you become a GSA Network-Youth Venturer?** It is a good idea to develop a timeline to chart your next steps. Please include a timeline of your tasks and activities. Think of what tasks and activities are necessary for reaching your venture goal/s and at what point in time each will need to occur. Tasks and activities vary by venture, but may include: developing outreach materials, purchasing materials, finding space to run the activities, recruiting volunteers, fundraising events, etc.
- 6. What income, if any, are you expecting to have from fundraising activities or any sale of products/services?** (Fundraising can be a great way to showcase your work and gain community support. Try to think of a fundraiser in which your services, products, etc. can be highlighted.)
- 7. How much financial support are you requesting?** (A maximum of \$500 is provided in the GSA Network-Youth Venture partnership. If your project requires more than this maximum,

be sure to explain how you've raised or intend to raise the remaining portion.) (Approx. 10-100 words)

- 8. a) Tell us about your team and the tasks and responsibilities of each member.** You must have at least 2 youth members. In the past, Venturers have found that having at least 3 to 4 members is most helpful. Try to match members' skills and interests with the tasks and activities you identified earlier. A clear definition of responsibilities will make it easier for each member of the team to understand and meet their individual commitments; and will ensure that all areas of activity are covered. (Approx. 25-200 words)
- b) Who will be responsible for spending the money, keeping the receipts, and reporting back to Youth Venture? Why did you choose this person?** (Approx. 10-100 words)
- 9. How will your venture be an ongoing organization? How will you recruit the next generation of leaders for the venture?** (Approx. 100-300 words)
- 10. How will you evaluate your work and make changes to ensure that you make progress toward your goals, as well as a significant and lasting community benefit?** (Approx. 50-200 words)
- 11. Who will be your Ally? Why did you choose this person?** (Before being selected by GSA Network-Youth Venture, each venture team must have an Ally – a caring adult who advises, but leaves you in control. A GSA Advisor can be the Ally.) (Approx. 50-100 words)
- 12. What kinds of support do you need from GSA Network or Youth Venture?** (Approx. 25-100 words)

**Please define the Issue Area and Program Type of your venture** (Check all that apply):

- |  |   |
|--|---|
| <input type="checkbox"/> Arts                          | <input type="checkbox"/> Hip Hop                |
| <input type="checkbox"/> Business                      | <input type="checkbox"/> Media                  |
| <input type="checkbox"/> Civic Engagement              | <input type="checkbox"/> Music                  |
| <input type="checkbox"/> Community Organizing/Activism | <input type="checkbox"/> People of Color Issues |
| <input type="checkbox"/> Environment                   | <input type="checkbox"/> Sports                 |
| <input type="checkbox"/> LGBTQQI                       | <input type="checkbox"/> Women's Issues         |
| <input type="checkbox"/> Health                        | <input type="checkbox"/> Youth Empowerment      |
| <input type="checkbox"/> Human Rights                  | <input type="checkbox"/> Other_____             |

**Are you involved in any extracurricular activity?** (Check all that apply)

- Youth organization, please specify \_\_\_\_\_
- Sports, please specify \_\_\_\_\_
- Arts, please specify \_\_\_\_\_
- Religious/ Spiritual, please specify \_\_\_\_\_
- Cultural Club, please specify \_\_\_\_\_
- Other, please specify \_\_\_\_\_

## Key Venture Team Contacts

We certify that the information contained in this application is accurate. We also take full responsibility for all actions related to our venture, and understand that neither GSA Network nor Youth Venture is responsible for our venture or its activities.

NAME	NAME
ADDRESS	ADDRESS
CITY/STATE/ZIP	CITY/STATE/ZIP
EMAIL	EMAIL
TELEPHONE	TELEPHONE
NEED TO BE DISCREET? (Y/N)	NEED TO BE DISCREET? (Y/N)
DATE OF BIRTH	DATE OF BIRTH
SCHOOL/GRADE	SCHOOL/GRADE
ROLE IN VENTURE (PRESIDENT, FOUNDER, ETC.)	ROLE IN VENTURE (PRESIDENT, FOUNDER, ETC.)
SIGNATURE	SIGNATURE
DATE	DATE
NAME	NAME
ADDRESS	ADDRESS
CITY/STATE/ZIP	CITY/STATE/ZIP
EMAIL	EMAIL
TELEPHONE	TELEPHONE
NEED TO BE DISCREET? (Y/N)	NEED TO BE DISCREET? (Y/N)
DATE OF BIRTH	DATE OF BIRTH
SCHOOL/GRADE	SCHOOL/GRADE
ROLE IN VENTURE (PRESIDENT, FOUNDER, ETC.)	ROLE IN VENTURE (PRESIDENT, FOUNDER, ETC.)
SIGNATURE	SIGNATURE
DATE	DATE

**If selected, one person from your team will need to be designated to receive the money. That person must be at least 18 years old or, if under 18, they must have parental permission to receive the grant. If no one on your team meets these requirements, you can designate your adult Ally to receive the funds. Please identify who would receive the funds:** \_\_\_\_\_

## REFERENCES:

Please provide the name and contact information of two references (over the age of 18) who will attest to your integrity. References cannot include relatives.

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REFERENCE NAME

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REFERENCE NAME

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ADDRESS

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ADDRESS

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CITY/STATE/ZIP

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CITY/STATE/ZIP

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EMAIL

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EMAIL

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TELEPHONE

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TELEPHONE

## ALLY/PARTNER INFORMATION:

An Ally is a person who enjoys working directly with young people and who respectfully helps Youth Venturers - without taking over! Allies are committed to helping you overcome obstacles that get in your way as you try to launch your venture - they help you think through your venture idea, give advice as needed, and back you up when you talk with parents, teachers, and administrators...but they leave you in charge. Your Ally can be your GSA Advisor.

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ALLY NAME

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ADDRESS

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CITY/STATE/ZIP

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EMAIL

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TELEPHONE

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RELATION TO TEAM

Gay-Straight Alliance Network

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PARTNER ORGANIZATION NAME

160 14<sup>th</sup> Street, San Francisco, CA 94103

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ADDRESS

San Francisco, CA 94103

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CITY/STATE/ZIP

info@gsanetwork.org

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EMAIL

415-552-4229, 559-453-9040

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TELEPHONE