
# The Bill and Lynn Schumacher Therapeutic Horseback Riding Grant Application

The **Michigan 4-H Proud Equestrians Program (PEP**) is an educational recreation program designed to extend the therapeutic benefits of horseback riding to persons with disabilities. **Proud Equestrians Program** is a part of **Michigan 4-H. Kent County 4-H Youth Development program** is part of Michigan State University Extension. Each year, thousands of young people, ages 5-19, explore what interests and excites them as they grow with Michigan 4-H.

# Mission Statement:

Kent County 4-H Youth Development is accepting proposals to develop a Kent County Proud Equestrian Program (PEP). Our goal is to oversee applications, develop a selection committee, and determine which applicants best embody the goals of the previous Kent Special Riding Program (1976-2018). Upon awarding this grant, we will work with the Michigan 4-H Foundation to assist in ongoing fund development and request funds annually to provide to the grantee. Michigan 4-H Foundation agrees to assist in fund management, as well as the investment of any additional funds to the program. This grant will provide low-cost therapeutic horseback riding, driving, and horsemanship to individuals with disabilities, as KSRP did in years past.

# Vision Statement:

To deliver low-cost therapeutic riding to people with disabilities in Kent County, Michigan utilizing the 4-H Proud Equestrian Program.

**Please review the following to make sure that your program fits, or may be developed to fit our guidelines: (***Please note: Even if you do not feel that your program meets the majority of these requirements, please still apply. You may be able to meet more of these requirements through MSU Extension staff assistance.* ***We welcome all applications.****)*

# Requirements for a fully-developed program:

1. Must be a 4-H PEP program with active PEP and PATH Certified instructors in Kent County.
2. Must follow all Michigan 4-H guidelines for 4-H clubs and volunteers, including undergoing our Volunteer Selection Process for each volunteer with your program.
3. At the start of programs, must be a chartered 4-H PEP club or group.
4. Must be able to deliver a low-cost, 6-8 week therapeutic riding program for 4-H PEP participants.
5. Must be able to develop a successful, finalized program with lessons in progress by May 2026.
6. All parties must be 4-H Gold Level volunteers or be willing to become 4-H volunteers in Kent County.
7. Required to follow all 4-H rules and regulations, including but not limited to financial reporting each year.
8. Applicants should be PATH instructors willing to undergo bi-annual training/re- certification.
9. Willing to develop a planning committee, or currently familiar with those who would best serve on a planning committee for a 4-H PEP program.
10. Grant dictates that a plaque be placed on a ramp, or a near a ramp onsite detailing the history of the previous Kent Special Riding Program. This plaque should also have the statement, “The Bill and Lynn Schumacher Therapeutic Horseback Riding

Grant.”

# Please note what the grant does not cover:

* + The purchase of horses not required by program.
	+ The cost of initial certification for PATH instructors.
	+ Cost of facilities rental.
	+ All costs must be directly related to the development of a PEP program using existing resources.
	+ All expenses that can be directly correlated to PEP needs will be considered. Proposal Guidelines:

Page Limit: Sections 3 - 12 cannot exceed 12 pages Font size: 12 points

PDF

Electronic submission by e-mail to msue.kent@county.msu.edu Subject Line: Kent County 4-H PEP Grant Submission Contact for questions:

Kent County 4-H Program Coordinators Samantha Griffin, Tyler Lidgard Griff807@msu.edu, lidgardt@msu.edu

Kent County MSU Extension, 616-632-7888

Application will be reviewed quarterly by a determined selection committee.

# Bill and Lynn Schumacher Therapeutic Horseback Riding Grant Applicant Cover Page:

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| --- | --- |
| Date |  |
| Name of Agency |  |
| Lead Contact Person’s Name and Title |  |
| Phone Number |  |
| Email Address |  |
| Mailing Address |  |
| Describe your experience with 4-H programs,write N/A if not applicable. If you belong to a 4-H club, write the name of that club here. |  |
| Describe your experience with equine programs and youth, write N/A if notapplicable. |  |
| Describe your experience working or volunteering with individuals withdisabilities, write N/A if not applicable. |  |
| Please print the names of all other individual applying alongside your program. If individuals will have equal stake in the KSRP PEP program, please provide all relevantcontact information. |  |
| Name of individual responsible for finances, and title if applicable. |  |
| Administrative contact’s phone number |  |
| Administrative contact’s email address |  |
| Administrative contact's mailing address |  |

**Please provide the following information:**

1. How do you or your organization plan to implement a 4-H Proud Equestrians Program in Kent County, Michigan? A planning phase is crucial in the development of this program. **Objectives should be SMART goals.**
2. What is your experience in delivering therapeutic horseback riding lessons or leading these programs?
3. Include any previous evaluations of your existing program here:
4. What is the mission or purpose of your organization?
5. What are the primary goals or objectives of your organization?
6. What is your current level of success in meeting your objectives?
7. How will your program support Michigan 4-H Youth Development? Please connect your organization’s mission to the mission of 4-H programs. (The 4-H Motto is to “Learn by Doing”; how can you connect your organization’s mission to that statement?)
8. Who will your planning committee be composed of? How will you recruit non-biased individuals invested in this program’s success within the Kent County community to serve on this committee?
9. How will you recruit youth for this program?
10. Do you have PATH-certified instructors? What are their qualifications? (Please note that we are not funding initial certifications in this grant.)
11. How will you recruit, train, and manage volunteers for this program? (Please note that all volunteers must go through the 4-H Volunteer Selection Process).
12. Instructions: Please summarize anticipated program expenses, including existing resources and expected program income. (Please note that the Michigan 4-H Foundation agrees to manage this fund and direct any subsequent donations to this grant’s funds. A

successful applicant can direct any new donations to the Michigan 4-H Foundation, who will process them for future use.)

*The detailed budget justification should include start-up and operating expenses for at least one year and up to 5 years*

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| **Budget Categories** | **Phase****One: Start-Up** | **Phase Two: On-Going Operating Expenses** | **Existing Resources** | **Program Income** |  |
| Materials/Supplies |

Facility/Equipment

Programmatic Fees

Other

1. **Riding/Driving Equipment:** Describe the equipment needs that will be used for your PEP program. Discuss what you have, what you will need to purchase, and what can be borrowed or leased. \*This should include *properly fitted, American Society for Testing and Materials/Safety Equipment Institute (ASTM/SEI) approved riding helmet for each rider. Safety stirrups and a handhold are required for each saddle. A fleece saddle cover, bareback pad, or other adaptive equipment may be required for specific disabilities. \**
2. Do you have access to mounting blocks or ramps for your program? Please state the specifications of each. *\*PATH International states that a ramp should have the following characteristics: gradual incline, adequate height for all horses, offside barriers, area for side walking, should be located outside the area with a straight line from outside to inside area. \**
3. Facilities: Describe the location of the facility in which you plan to host your PEP sessions.
	1. Is this arena indoor or outdoor?
	2. Are there adequate bathrooms? Or will portable restrooms be provided onsite
	3. Describe the area in which lessons will take place; For example: Are there fences? Is there a suitable groundcover? Where will spectators watch lessons from? Where will the equipment be stored? How will the equipment be transported?
4. This program is required to have *Commercial General Liability insurance with a minimum limit of$1,000,000 for each occurrence/$2,000,000 general aggregate with an endorsement naming Michigan State University and its Board of Trustees as “Additional Insureds.”*

*The facility/volunteer must provide evidence of general liability coverage.* **Do you understand this requirement?**

1. Do you have existing financial resources in the community? Please list them. If you have a plan to apply for outside grants or other financial support, please list that in detail.
2. Will you have fundraisers?
3. How much will your program cost?
4. What other grants are you aware of that you can apply for?
5. Are you already being supported by a community organization or sponsor?
6. What existing partnerships does your current program have?

i. What types of support are available to your program? (i.e financial, volunteer hours, facilities, expertise...etc)

1. How will you evaluate the program's success over time? For example:
2. Will you distribute surveys that evaluate participants and family's satisfaction with the program?
3. Will you measure program numbers? Volunteer hours?
4. Will you measure changes in overall horsemanship abilities and progress?
5. Did this program fulfill an existing community need? Is that a measurable value?
6. Insert a Timeline of Milestones: (For example, first date of initial 6–8-week pilot lessons, first meeting of committee members, first volunteer meeting...etc.)
7. Please attach detailed letters of commitment for your program. For example, letters that detail specific commitments to your program from other community organizations, non-profit groups, companies, individuals, etc. Support can take many forms; financial, organizational, volunteers, facility rentals...etc.
8. Please attach any additional supporting documentation for your proposal (ex., news articles, photographs, legal documentation of certificates that you or others within your group hold, references, or data tables, graphs, charts, etc. that show evaluation or program data, etc.).

# Rubric:

**Scoring Factors (0-20)**

(15-20) Meets all requirements, serves a diverse audience in an urban setting, has established programs, existing pool of PATH and PEP volunteers and youth, needs minimal assistance to connect programs to PEP requirements and goals. The program is located in Kent County, Michigan, or intends to be based out of Kent County. Has plans to continue building on grant funds beyond initial funding, with budget included. Application includes financial and/or programmatic timelines. Application has a plan of recruitment and retention of community partners. The program can be provided at a low cost.

(10-15) Meets all requirements of grant, serves an established audience, and has a detailed, multi- year plan for funding and programming. The program is located in West Michigan near Kent County, in Kent County, or in the region. The program may intend to be based in Kent County or relocate to that area. Program includes PEP Certified and PATH Certified Instructors. Project is sustainable financially beyond grant fund awarded. Application includes financial and programmatic timelines. Application has a plan of recruitment and retention of community partners. The program can be provided at a low cost.

(5-10) Meets minimum requirements of grant, has two primary signatories. But, lacking in specific implementation. Has an idea of partners or potential community input. Includes PEP and PATH-certified signatories. May lacks or have insufficient sustainable funding elements/goals.

The program intends to be based in Kent County, West Michigan, or a nearby geographic area.

(0-5) Application lacks sufficient details to successfully implement based on grant requirements and/or incomplete application. Does not include PATH certified instructors but may have previous PEP experience. No plans or insufficient plans to continue sustainably building funds. The program intends to be based in Kent County, West Michigan, or a nearby geographic area.

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The Michigan 4-H Foundation is a 501 (c)(3) non-profit organization which supports Michigan 4-H Youth Development.