

# CAMP Program Proposal Form

*“The Community, Arts, & Movement Project exists to empower creative expression, celebrate interconnection, and promote healthy living in order to nourish a sustainable Cherokee neighborhood, and beyond!”*



Thank you for your interest in becoming a program facilitator/holding you class at CAMP. We are eager to learn more about you and your program. In order to understand your program and see where you fit in the CAMP, please apply as a program facilitator by:

- 1) Complete the enclosed “Program Proposal Form”
- 2) Write a short (no more than 2 pages) narrative describing your program
- 3) Gather any descriptive documents (such as fliers, news stories, pamphlets, etc)
- 4) Compile all documents and return to CAMP directly or send to:

CAMP Coordinator  
3022A Cherokee St  
Saint Louis MO 63118

Once we receive and review your application, you will contacted for a brief interview.

***Thank you for helping us to provide quality programming!***

For more information:

[www.stlcamp.org](http://www.stlcamp.org) - [coordinator@stlcamp.org](mailto:coordinator@stlcamp.org) - (314) 722-6774

Jan, 2011



## { Basic Info }

Name of Program Facilitator \_\_\_\_\_

Name of Proposed Program/Class: \_\_\_\_\_

Today's Date: \_\_\_/\_\_\_/\_\_\_ Your Phone Number (\_\_\_)\_\_\_-\_\_\_\_\_

What ages will this program target? *(check all that apply)*

- Children (5yrs-12yrs)  Children (12yrs-17yrs)  Young adults (18-30)  Adults (31-50)  
 Older Adults (51+)

Does this program target a specific population? (incarcerated, low income etc)

- no  yes (please describe below):  
\_\_\_\_\_

Ideal average number of participants? *(Check one)*

- 1-6  7-12  13-18  19+

How often will this program occur?

- one time only  weekly  monthly  yearly

Please describe \_\_\_\_\_

What is the total program fee for participants?

\$\_\_\_\_\_ How often? (daily, weekly, monthly)\_\_\_\_\_



### { Narrative Guidelines }

Please create a narrative of no more than 2 pages describing your program/class and how it is related to the CAMP mission. Please be sure to include the following:

- Activities (What will participants do?)
- Target Population (Who will be participants be?)
- Projected outcomes (How many participants, what will they learn, etc.?)
- Fee Structure (How much will participants pay?)
- Days, times, frequency and duration of program
- Budget (optional)

### { If you are under the age of 18 }

CAMP gives special priority to classes and programs led by youth. If you are under the age of 18 please note the following requirements:

- You must have a CAMP sponsor for your program
- You and a guardian must fill out a liability waiver

If you are under the age of 18, please complete this form and your program narrative. Once these documents are submitted, the CAMP coordinator will contact you and work with you on the details!

### { Directions for Submission }

Double check that you have completed program proposal form, 1-2 page narrative and any attachments to:

CAMP Program Proposal  
322A Cherokee Street  
St. Louis, MO 63118

Upon receipt of your application, the CAMP coordinator will contact you for a brief interview. All program proposals will be reviewed during the CAMP business meeting the **first Tuesday of the month**. You are encouraged (but not required) to consider attending this meeting to present your proposal to the Collective. Feel free to attach any additional information (pamphlets, fliers, photographs etc) as an appendix to your narrative.