



# A&D Hewitt Memorial Fund

OAK PARK-RIVER FOREST COMMUNITY FOUNDATION

## Enrichment Grant Application Guidelines 2023-2024

### **Background**

The A&D HEWITT MEMORIAL FUND has been established under the auspices of the Oak Park River Forest Community Foundation in memory of brothers Abel and Don Hewitt.

Don received an undergraduate degree in Chemistry and worked in this field until his passing at age 25 from an unfortunate accident. He had a strong interest in music and during his elementary and high school years played piano, drums and saxophone. He also participated in ROTC, marching band and was a member of the high school Cossack Dance team.

Abel was a decorated Marine and served during the Vietnam War. His post military career in Child Protective Services spanned over 30 years. During this time, he also excelled in the performance arts of acting and competitive dancing, but was also a musician, singer, writer/poet, and participated in the martial arts, achieving his black belt in Tae Kwan Do.

They both lived with a passion for life, love of humanity, and never allowed the limiting expectations of others to define or inform their goals. Their life motto: "Just Say Yes."

### **Description**

We believe that you inspire others when you are your most authentic self. The purpose of this fund is to encourage and enable young students to explore possibilities in new and varied areas of interests, expand cultural and social experiences, and develop new leadership skills. The grant awards are up to \$500 and will be awarded on a one-time basis.

Applications may be submitted to support creative interests or academic pursuits through upcoming enrichment classes or other opportunities provided by local institutions and organizations. *Applications for past experiences, or bills that may be past due, shall not be accepted.*

### **Eligibility**

You can apply if you

- Are a student between the ages of 11 and 14 (6<sup>th</sup> – 9<sup>th</sup> grades).
- Attend school in Oak Park, River Forest or surrounding west Cook county communities (Maywood, Forest Park, Berwyn, Cicero, the Chicago neighborhoods of Austin and Galewood, Elmwood Park, or Melrose Park).

- Require financial assistance in order to attend the program or participate in the opportunity.
- Please note that any grant funding must be for upcoming classes/experiences (not reimbursement for the past)

### **The Application Process**

Complete the application form.

Mail to:

A&D Hewitt Memorial Fund  
c/o Oak Park-River Forest Community Foundation  
1049 Lake Street, Suite 204  
Oak Park, IL 60301

OR

Email to: [Donorservices@oprfcf.org](mailto:Donorservices@oprfcf.org) with Subject Line: A&D Hewitt Memorial Fund

### **Deadline is March 15, 2024.**

If awarded, grant funds shall be paid directly to the provider of programs and materials by the Oak Park-River Forest Community Foundation upon submission of invoice. In cases in which this is not possible, award recipients may seek reimbursement for classes/workshops or purchased materials/supplies and shall be required to submit appropriate receipts to the Foundation.

Recipients and/or the program provider may be asked to provide the foundation with a brief written summary of the experience upon completion.

Information about this enrichment award and other opportunities can be found at [www.oprfcf.org](http://www.oprfcf.org). Questions? Call us at 708-848-1560.

**Please complete the following application.**



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## Enrichment Grant Application

### I. Applicant Information

Student Name \_\_\_\_\_

Address \_\_\_\_\_ Last \_\_\_\_\_ City \_\_\_\_\_ First \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Date of Birth (month/year) \_\_\_\_\_

Name of school \_\_\_\_\_

Address of School \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Email \_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Phone \_\_\_\_\_

### II. Financial Need

Current Family Situation (Check all that apply):

Free and Reduced Lunch Eligible: \_\_\_\_ Single Parent/Guardian Household: \_\_\_\_ Part-time Employment: \_\_\_\_ Unemployed: \_\_\_\_ Significant health concerns: \_\_\_\_ Multiple Dependents: \_\_\_\_

Dependents: \_\_\_\_

Other information you wish to share with the committee regarding financial need (optional):

### **III. Questionnaire**

Please respond to the following questions.

#### A. Program Details:

1. Class or Program Name (Please include, if available, a snapshot or a link to the course description after the Program name):

\_\_\_\_\_

2. Name of the organization that check should be made payable to:

\_\_\_\_\_

3. Dates, frequency and duration of the experience:

\_\_\_\_\_

4. Total cost of fees and/or materials or supplies to participate: \$ \_\_\_\_\_

5. Total amount student or family can contribute, including aid from other sources:

\$ \_\_\_\_\_

6. Total amount requested from A & D Hewitt Fund (may be up to \$500):

\$ \_\_\_\_\_

#### B. Student Response:

1. Describe the types of activities have you participated in (in or outside of school).

- A. What will this experience mean to you? Describe how this experience is different from your usual interests or activities, and embodies the spirit of "Just Say Yes."

**IV. Letter of Recommendation**

Provide brief statements below from a trusted adult *unrelated to the student*, such as a teacher, coach, counselor, clergy, or other community mentor.

Name: \_\_\_\_\_  
Last First

Position/Title, Organization: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

A. What is your relationship to the applicant including how long you have known her/him?

B. How you feel the requested award will benefit the student?

C. Signature: \_\_\_\_\_ Date: \_\_\_\_\_