



**Request for Applications for
Peer-Operated Projects (POP) by and for psychiatric survivors, mad folks, and others
marginalized by the mental health system**

MadFreedom Advocates is seeking applications from individuals or entities in Vermont for independent peer-run initiatives designed and operated by psychiatric survivors, mad folks, and others marginalized by the mental health system.

POP Grant funding is available to support:

- Projects that have been started
- New projects being developed
- Projects that need support to become independent and peer run

**Note: New proposed projects should be unique offerings that do not duplicate local efforts.*

Examples of projects that might be funded by POP Grants include, but are not limited to, the following activities:

- Education in peer leadership (e.g. presenting at a conference, bringing in a speaker, holding a community dialogue)
- Events in the community such as at drop-in centers or other public spaces
- Peer Support Groups
- Group Activities
- Community art projects
- Media creation, zines, podcasts, etc.

POP Grants WILL NOT Fund:

There are many initiatives that fall within the purview of the POP grants, however, POP grants WILL NOT be able to provide funding for the following:

- (1) Inpatient services;
- (2) Cash payments for recipients of health services;
- (3) Money-generating projects (for-profit initiatives)
- (4) To purchase or improve land, purchase, construct, or permanently improve (other than minor remodeling) any building or other facility, or purchase major medical equipment;
—or—
- (5) To provide personal transportation.

Application Process:

Interested applicants can find the application form at the end of this Request for Applications. As needed, attach additional pages to complete the information requested. Applications may be submitted either electronically or through the mail to one of the following addresses:

MadFreedom Advocates
PO Box 1673
Brattleboro, VT 05302

- OR -

info@madfreedomadvocates.org

- OR -

[Complete this digital form](#)

Applications are accepted on a rolling basis, and are reviewed quarterly. Applications received after the review period has begun may be rolled over and considered in future quarters.

Application submissions are accepted and reviewed based on the following timeline (*some dates may vary):

Fall (Q1)

Applications open through: September 1 - October 15 at 5:00PM

Review Period: October 16 - October 31

Interview period: November 3 - November 14

Grants Awarded: by the end of November

Winter (Q2)

Applications open through: January 15 at 5:00PM

Review Period: January 16 - January 31, 2025

Interview period: February 3 - February 14, 2025

Grants Awarded: by the end of February

Spring (Q3)

Applications open through: March 1 - April 16 at 5:00PM

Review Period: April 17 - May 2

Interview period: May 5 - May 16

Grants Awarded: by the end of May

Summer (Q4)

Applications open through: June 1 - July 16 at 5:00PM

Review Period: July 17 - August 1

Interview period: August 4 - August 15

Grants Awarded: by the end of August

Policies & Procedures:

Who May apply:

1. Any individual, group, or non-profit organization, with or without official non-profit tax status, that runs independent peer-run initiatives designed and operated by psychiatric survivors, mad folks, and others marginalized by the mental health system for individuals or entities in Vermont may apply to receive funding from the POP Grants through MadFreedom Advocates.

Project and Funding Parameters:

2. Individuals, groups, or non-profit organizations may apply for funding for support for a specific independent peer-run project.
3. Awarded grants will be distributed through reimbursements pending submission of receipts.
4. Projects are expected to fulfill obligations and scope of work within one year of being awarded.
5. Applicants must give specifics about how their projects serve Vermont residents.
6. Individual grants are capped at \$3,000 per year.
7. Previous applicants or grant awardees may apply in future POP Grant cycles.

Application Review Process:

8. If an applicant does not provide the requested information, the POP grant review committee will consider the application pending and/or incomplete, and will not award funding until more information has been provided.
9. MadFreedom Advocates reserves the right to accept or reject any or all applications. Review of applications will be made by the POP grant review committee .
10. It is the discretion of MadFreedom Advocates and the review committee to recommend no, partial, or full funding of each POP Grant application, based on the review of each application, rubric scoring, and interview.

Selection Process:

11. Eligible applicants will be invited to a 30 minute interview by the review committee to discuss their project and ask questions.
12. Applicants will be informed of the review committee's decisions by the preferred method of communication indicated on the application (email, mail, or phone).

Additional Resources:

Questions about this program and requests for assistance in completing the application can be directed to hannah sorila, operations manager, MadFreedom Advocates, Inc. at hannah@madfreedomadvocates.org or 802-477-3783.

APPLICATION FOR STATE GRANT for PEER OPERATED PROJECT

1. Name(s) of Applicant(s): _____

Date of Application: _____

2. Mailing Address of Applicant: _____

3. Contact Information:

<i>Indicate communication preference</i>		<i>Your information below:</i>
<input type="checkbox"/>	<i>Email</i>	
<input type="checkbox"/>	<i>Phone Number</i>	
<input type="checkbox"/>	<i>Physical Mail*</i>	<i>Number & Street:</i> _____ <i>PO Box (if applicable)</i> _____ <i>City:</i> _____ <i>State:</i> _____ <i>Zip:</i> _____

**Note: While the project needs to impact and target Vermonters, a permanent address in VT is not required to apply.*

4. Name of Project: _____

5. Describe what you want to do with your project and how it empowers psychiatric survivors, mad folks, and others marginalized by the mental health system in Vermont:

Identified Need:

Note: Please provide specific examples or supporting evidence of the need (input from community, news, research, etc.) which demonstrate your familiarity with Vermont's community.

Planned Activities:

Participants and Outreach Plan:

Note: Please indicate how this project will specifically be impacting psychiatric survivors, mad folks, and others marginalized by the mental health system in Vermont.

Anticipated outcomes:

Location:

Success will be measured by:

Anticipated timeline for the project:

6. What relevant skills or experience do you have to implement this project, OR what is your plan to bring in additional project leadership through mentorship or external support?

7. MadFreedom Advocates is a grassroots, non-profit organization run by and for psychiatric survivors, mad folks, and others marginalized by the mental health system. We are working towards equal rights, better services, and ending discrimination and oppression based on perceived mental state. We work across Vermont to support leadership, education, and advocacy initiatives. How will your project be aligned with MFA's goals, initiatives, and mission?

8. Is your proposal a peer-operated project? A peer-operated project is a project run by psychiatric survivors, mad folks, and/or people with lived experience of institutionalization, neurodivergence, and/or extreme states.

9. What administrative support might you need from MadFreedom Advocates to carry out this project? (e.g., support with space reservations, receipt processing, adding events to MFA event calendar, etc.)

10. Amount of POP grant funding requested: \$ _____

11. Please provide a detailed breakdown of estimated expenses:

12. If you were to receive partial funding for this project, would the project still be feasible? If so, how?

13. Are you charging participants to participate in your project? Yes _____ No _____

14. Is this a profit-making project? Yes _____ No _____