



GO INGENUITY AWARD APPLICATION

Sharing Invention & Innovation with Youth

The GO Ingenuity Award (GIA) is awarded to artists, inventors, and small business entrepreneurs to stimulate the next generation of "makers." Building on the momentum of [Maker Faire Africa](#), GO Campaign will award one-year, one-time fellowship grants to individual applicants who are eager to share their skills with marginalized youth in developing countries in ways that educate and inspire youth to harness their own ingenuity. The GIA emphasizes the sharing of innovative artistry and technology in informal, hands-on learning workshops in places where youth already gather.

Complete Guidelines and Award details available at www.GOCampaign.org/GIA

IMPORTANT INFORMATION

ALL APPLICATIONS MUST BE RECEIVED BY DECEMBER 1, 2009.
AWARD RECIPIENTS WILL BE ANNOUNCED IN JANUARY, 2010.

Applications may be submitted via email (preferred) to gia@gocampaign.org or via regular post mail to:

GO Campaign
ATTN: GIA
2461 Santa Monica Blvd. #437
Santa Monica, CA 90404
USA

If submitting application by post, we request that you notify us by telephone at +1 (310) 396-6343 of your submission and leave a contact number where you may be reached. (This number is provided only if sending the application via post mail. No other phone calls please.)

If you have any questions, please email gia@gocampaign.org

GO INGENUITY AWARD Application

APPLICANT CONTACT INFORMATION

*Name:	
*Address:	
*City:	*Country:
*Telephone number(s) including Country code:	
*Email address:	Website:
PERSONAL INFORMATION	
*Occupation:	How long?
Current employer:	
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	Age:
*1) How did you learn of the GO Ingenuity Award?	

* Items above marked with (*) are required. ALL ITEMS BELOW THIS SECTION ARE REQUIRED & MUST BE COMPLETED.

NARRATIVE DESCRIPTION

Note: If you are selected as a recipient of the GO Ingenuity Award, you will be required to hold a minimum of 3 youth workshops at schools, orphanages or youth organizations within 6 months of receiving the Award. Youth is defined as ages 25 and under.

Please answer all of the following questions. Concise, informative answers are best. If you are using a PDF or mailing your Application by post, please attach a separate document that includes the questions & answers. This narrative section should not exceed 1000 words.

1) DESCRIBE THE INVENTION/ART/PRODUCT YOU WISH TO SHARE WITH YOUTH.

Please attach at least 1 photo(s) of your product. If you are emailing your application, please attach the photo as a separate .JPG file attachment - do not cut and paste the photo into this document.

2) DESCRIBE WHERE AND HOW YOU LEARNED TO MAKE THIS PRODUCT?

3) DESCRIBE THE WORKSHOPS YOU WILL BE CONDUCTING.

Please include information about the youth participating in the workshops. For example, will the workshops include only girls, students in public or private school, youth living in rural or urban setting, etc?

4) PRODUCT IMPACT: HOW WILL LEARNING ABOUT YOUR PRODUCT BENEFIT YOUTH AND THE GREATER COMMUNITY?

5) HOW WILL YOU MEASURE THE SUCCESS OF THE WORKSHOPS?

6) WHAT, IF ANY, PRIOR EXPERIENCES DO YOU HAVE SHARING YOUR SKILLS WITH YOUTH?

7) WHAT ARE THE CHALLENGES, IF ANY, ASSOCIATED WITH ORGANIZING AND CONDUCTING THE WORKSHOPS?



LINE-ITEM BUDGET

Your line-item budget should include all necessary and anticipated costs, as well as a stipend for yourself. The below itemization is for your reference. You can use this form (adding rows where needed) or submit your Budget & Timeline as a separate Excel or Word document.

Please indicate which items will be required to purchase prior to the first workshop.
Award amounts will vary between \$500 and \$2,500 each.

TOTAL BUDGET:

Program Development (if any):	Description:	Cost:
	Description:	Cost:
Promotion (if any):	Description:	Cost:
	Description:	Cost:
Supplies (if any):	Description:	Cost:
	Description:	Cost:
Transportation (if any):	Description:	Cost:
	Description:	Cost:
Other:	Description:	Cost:
	Description:	Cost:
Recipient Stipend:	Description:	Cost:

1) HOW WILL YOUR PROPOSAL BE DIFFERENT IF YOU ARE ONLY AWARDED A PORTION OF THE AMOUNT REQUESTED?

2) WILL THE SCHOOL, ORPHANAGE OR YOUTH GROUP BE REQUIRED TO USE ANY OF THEIR RESOURCES? IF SO, PLEASE ELABORATE:

PROPOSED TIMELINE

Include the proposed timeline of when you anticipate each workshop will be held.

Workshop #1	Location:	Date:
Workshop #2	Location:	Date:
Workshop #3	Location:	Date:
Additional Workshop(s):	Location:	Date:
	Location:	Date:
	Location:	Date:

SIGNATURE OF APPLICANT:

DATE:

