
MONTANA SWIMMING

REACH OUT GRANT APPLICATION



Big Sky. Big Dreams. Big Success!

The purpose of the Montana Swimming Reach Out Grant Program is to increase multicultural, socioeconomic, and ethnic diversity as well as encourage those who are disabled to participate in all levels of the sport of competitive swimming. Montana Swimming wants to encourage swimmers to achieve excellence in and out of the pool through this innovative grant program.

It is intended that this grant will be used to reach out to underrepresented groups - including ethnic minorities, low-income outreach persons, LGBTQ, and disabled persons - in the overall community. Applicants must be registered as a team/club of Montana Swimming.

Disability is defined by USA Swimming rules as a permanent physical or cognitive disability that substantially limits one or more major life activities. Applications for disability grants should conform to disabilities as recognized under the USA Swimming rules article 105. Disabilities include legally blind or visually impaired (not simply needing glasses to see); deaf or hearing impaired; physical disabilities (such as dwarfism, cerebral palsy, spinal injuries, limb deficiencies, wheelchair bound with high functioning upper body, non-ambulatory (wheelchair bound), and limited use of extremities); and intellectual/ cognitive disabilities (such as severe learning disorders, Downs Syndrome, and autism spectrum disorder).

Montana Swimming Reach Out Grant is funded in the amount of \$5000 per year. Grant applications will be accepted twice a year. There is a maximum amount of \$2500 total per grant period to be awarded.

The application deadline for the 2025 fall application period is October 8, 2025.

Successful grant applicants must submit a report detailing your program by September 1, 2026.

Grants are not intended to fund general team finances.

ORGANIZATION

MT Swimming Team/Club Name: _____

Web Site address (URL): _____

Mailing Address: _____

City: _____ State: MT Zip: _____

Tax ID#: _____ Date Submitted: _____

Contact Person submitting the application: _____

Contact Person Phone: _____ E-mail: _____

Is your team a member of Montana Swimming (required for the grant): Yes _____; No _____

MT Swim Year Around Club: _____ or MT Swim Seasonal Club: _____

New Grant Application/ Program: _____ or Previously MT Swim funded program: _____ (years)

Has your club received a grant from USA Swimming previously? If so, when and the amount? Is it a recurring grant amount such as the Community Impact Grants? _____

Your Club's Participation in USA Swimming and Montana Swimming Diversity and Inclusion Programs:

- How many outreach athletes are registered to your team this year? _____
- How many ethnic minority athletes are registered to your team this year? _____
- How many disabled athletes are registered to your team this year? _____
- Have you previously hosted a diversity camp? Yes _____ No _____
When? _____ Where? _____ What groups
benefitted from the camp? _____
- Have you previously hosted a 'learn to swim' program targeted for under-represented groups?
Yes _____; No _____ If yes, when? _____ What group(s) did you reach?

How many people did your program reach? _____
- Did you send any swimmers to the Western Zone Diversity Camp or National Select Diversity
Camp? Yes _____ No _____ Which camp? _____ How many? _____
When? _____ (years)
- Did anyone from your team participate in the Western Zone Diversity Summit? Yes _____ No _____
Who? _____ When? _____ (years)

Explanation for any question above: _____

GRANT PURPOSE:

NAME OF YOUR PROGRAM GRANT: _____

Funds requested from MT Swimming Reach Out Grant: \$ _____

- 1) Brief description of project goals and objectives:

- 2) Statement of need or problems to be addressed (including a description of the target population and how they will benefit from your organization's efforts):

- 3) How many participants will your grant serve? What age group/ages? (Example: ten 9-14 year old beginning swimmers)

- 4) Plans to accomplish the goals, objectives, and timeline for implementation. When will you be operating your program? Please quantify (examples: In 2 months of M-W-F 45-minute sessions 15 participants will be able to swim 50 yards of freestyle and back stroke. A camp will be held during the summer of 2020. Training fees used during short course season.)

- 5) Strategies that you will employ to implement your project. (i.e., Please quantify staff to participant ratios, training plan, projected meets, and testing)

6) If this is a continuing work that was previously funded by a Reach Out grant, please list/quantify past outcomes.

BUDGET

Total Project Budget: \$ _____

Any other funding sources for this project: (list below)

1. _____ Amount received: \$ _____
2. _____ Amount received: \$ _____
3. _____ Amount received: \$ _____

Any prior Reach Out grants received from Montana Swimming? Yes _____ No _____

Date(s): _____ Amount(s) received: \$ _____

ADDITIONAL INFORMATION (Please attach the following):

- A current budget for the project. Indicate the specific uses of the requested grant, if possible.
- Your organization's current annual budget (general budget -- need not include detailed specifics).
- Include general demographic breakdown of your club.

EVALUATION OF THE PROGRAM

Describe how the success of your program will be defined and measured:

Paint a Picture of Your Team Essay -- Help us to know you better!

SUBMISSION INSTRUCTIONS

- Please type or write clearly on this form.
- Include up to two additional pages, if needed, to include any other information relevant to your grant application. The two-page limit does not include the requested additional budget information or the paint a picture of your team essay.
- Limit the entire grant application submittal to 8 total pages plus the requested budget information and the paint a picture essay.
- Please answer all of the questions.
- Please submit your application and any questions to:

Montana Swimming Reach Out Grant Committee

Susan Huckeby, chair, at: shuckeby@msn.com

You may also contact Susan by phone with questions at 406-491-4698.

The application deadlines for the upcoming registration year are **October 8, 2025, and March 25, 2026.**

- Grant applications will be reviewed by the committee. Applicants may be asked to interview with the committee or submit written answers to additional questions.
- Successful grant applicants must e-mail a report detailing the program, how the funds were used, and outcome of the program to Susan Huckeby by September 1, 2026.

Montana Swimming Reach Out Grant Evaluation Criteria:

The committee evaluates the requests based on the following criteria:

- Team membership in Montana Swimming (required)
- Fulfillment of the USA Swimming outreach program mission, which is to provide opportunities in swimming to the underrepresented, economically disadvantaged and disabled youth in the United States.
- Fulfillment of the Montana Swimming mission, which is united in service, achieving excellence in and out of the pool.
- Benefit to the athletes and their families.
- Innovation.
- Likelihood of success including past successes.
- Groups the grant will benefit.
- Benefit to your team.
- Benefit to your community.
- Benefit to Montana Swimming.
- Other sources of funding.
- Other criteria as determined by the committee.