



COMMUNITY OUTREACH GRANT APPLICATION
Call for Proposals: 2026 Grant Cycle

Boca Raton Regional Hospital’s Community Outreach Grant Program is designed to advance community health by addressing identified local healthcare needs. Funding requests must be submitted by a qualified 501(c)(3) nonprofit organization, and all required information and documentation must be included for an application to be considered complete and eligible. Priority is given to proposals that serve the Hospital’s designated service area, spanning from north Broward County through Delray Beach.

BRRH accepts proposals supporting health related grants that align with the following identified needs according to the hospital’s Community Health Needs Assessment:

- Behavioral Health / Mental Health Services to treat depression, anxiety, or other conditions – excluding substance abuse
- Elder Care and Geriatrics
- Availability of Primary Care

We encourage you to review the Community Health Needs Assessment report as well as the associated Implementation Plan to assist in developing proposals that align with these strategic priorities and programmatic strategies.

The Hospital funds projects over a maximum 12-month timeframe. Boca Regional does not fund rents or other capital expenses but will consider salary support. Proposals may require a site visit.

The application process is fully electronic. Please sign and scan the completed application, including the below cover sheet, project narrative, and associated attachments, to BRRHFoundation@BaptistHealth.net by **Monday, June 2nd, 2026**, at 5:00 PM.

Organizational Background

1. Name of Organization: _____
2. Mailing Address: _____
3. Website: _____
3. Organization’s Operating Budget: _____
4. Name and Title of Organization Leader: _____
5. Name and Title of Project Contact: _____



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6. Contact Telephone Number: _____
7. Contact Email Address: _____
8. If applicable, when was the most recent grant award to your organization from Boca Raton Regional Hospital, and what was the amount awarded? _____
9. If applicable, when was the most recent Community Benefit grant award to your organization from Baptist Health South Florida, and what was the amount awarded? _____
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Project Background

1. Name of Project: _____
2. Amount of grant request: _____ Total project budget: _____
3. Estimated program reach (how many individuals impacted/served): _____
4. Target Population: _____
5. Strategic Priority (please choose one):
- Behavioral Health / Mental Health Services
 - Elder Care and Geriatrics
 - Availability of Primary Care
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Proposal Narrative and Supporting Documentation

- A. Please include the following in your application narrative (4 pages maximum):
- Organizational background and mission
 - Project description including the target population to be served and the related need.
 - Specific goals, primary activities to be implemented, and measurable outcomes.
 - Status update if your organization has a project currently funded by BRRH.
 - Proposed budget narrative that identifies the line items requested from BRRH and how other project components are funded.
 - Potential for program sustainability.



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- How your project and Boca Raton Regional Hospital will be recognized by your organization if funded.

B. Along with the narrative, please submit the following supporting documentation:

- Copy of IRS 501(c)(3) determination statement.
- Organization's most recent 990.
- List of the applicant organization's trustees and officers.
- List of other major supporters from whom you have requested funding for this project.

C. Optional Attachments:

- Letters of support from collaborating organizations/agencies
- Organization's most recent Annual Report
- Program/Organizational collateral