Rise Above Holistic Wellness Center 29 FOR IMMEDIATE RELEASE ~ Call for Instructors, Practioners, and Creators Creative Wellness Stipend for Instructors, Practitioners, and Creators at Rise Above Holistic Wellness Center

Purpose:

To retain affordable Creative Wellness services at a rate that benefits local residents, we are creating a provisional fund to support local practitioners, instructors, and creators in providing affordable, equitable access to activities and resources which support sustainable, independent individual and community wellness to the extent possible in the existing physical structure of the Rise Above building.

Eligibility:

Wellness Practitioners, Instructors, and Artists/Creators aged 18 and over, residing or working in Allegany County, NY.

Application Deadline

Applications will be accepted on a rolling basis as funding permits and must be received one month prior to the proposed start date of the applicant's service schedule.

Applicants will be notified of results within two-weeks of date of submission.

Opening Stipend and Support

\$20 per hour of direct service with a maximum additional reimbursement of \$10 per month to assist with cost of materials. Description of service posted on the Rise Above website and announcement shared on the Rise Above facebook page.

Stipend and materials reimbursement to be paid at the end each service month upon receipt of the monthly service report.

Application Process:

Each applicant will submit a CV/Resume showing their background in the area of their proposed service and the Creative Wellness Stipend Application form which includes:

- A brief summary of the proposed class or service
- Wellness Statement: How does this support individual or community wellness?
- Number of community members to be served per month
- Description of the service/class schedule
- Agreement to program marketing, attendance, and monthly reporting requirements.

for Review and Approval by participating members of the Rise Above Board of Directors.

Applications should be submitted via email to: sheila@sheilalynnkart.com

Subject: Creative Wellness Stipend

Requirements:

Approved practitioners, instructors, creators will be required to:

- Sign the Rise Above Practitioner's agreement which outlines the terms of use of the Rise Above Holistic Wellness Center and show proof of insurance as indicated in the agreement.
- Promote the service being offered
- Track attendance and services for documentation in a monthly report to the Board of Directors

Rise Above Holistic Wellness Center

return application via email to: sheila@sheilalynnkart.com Subject: Creative Wellness Stipend 2024Application

Applicant's Name			
Contact Information			
Address			
Email			
Social Media Name/Provider/Page			
Description of Proposed Services			
(Circle all that apply) One-on-One S Details:	-	•	vent
Wellness Statement (How does this	support individual o	r community wellne	255?)
Number of Community Members to			
Proposed Schedule (Subject to available)	<u>lability)</u> Requested	Start date	
Number of sessions Req	uested Start Time	End 1	-ime
*For Multiple Sessions ~ Weekly/Da	• • •		
Monday Tuesday Wedn	esday Thu	sday Friday	Saturday
Estimated cost of supplies/materials (Maximum monthly reimbursement Your signature below confirms that compensation, benefits, or marketin by the Rise Above Holistic Wellness selected to receive the stipend will be will be expected to sign a Practition that recipients will be paid an hourth month following receipt of the mon service" is defined as practical/instr	for materials \$10) you understand that og materials, and you Center Board of Dire oe notified of the de er's Agreement befo y stipend of \$20 per thly Creative Wellne	ir proposed service ctors. You acknowle cision two weeks af re beginning service each hour of direct ss service tracking r	and schedule are subject to review edge and understand that those ter the application is submitted and es at Rise Above. You understand service at the end of the service eport. You understand that "direct