

# 2013 Venture and Special Assistance Grants Request for Proposals



## ***PURPOSE AND AVAILABILITY OF FUNDS***

The United Way of Broome County is pleased to announce the availability of funding for the 2013 Venture & Special Assistance (VSA) Grant Program. This program makes one-time grants to programs whose primary purpose is to enhance the United Way's efforts to address identified community needs in the areas of Education, Income and Health and is focused on programs providing Quality Early Child Care, Chemical Dependency Prevention, Youth Mental Health, Physical Fitness & Wellness, Health Access, and Service Access for Seniors. Programs addressing other areas will be considered based on justification of community and financial need. The VSA Grant Program is administered by the United Way and is funded jointly by the United Way and the Helen T. Howland Foundation.

The total available for Venture & Special Assistance Grants in 2013 is anticipated to be \$50,000 from two sources: United Way Annual Campaign and The Helen T. Howland Foundation. United Way will provide grants ranging from a minimum of \$2,500 to a maximum of \$25,000. The total number of awards made will be contingent on the quality of the applications and availability of funds.

## ***ELIGIBILITY***

1. Eligible applicants must be an incorporated, not for profit, health and human service agency with IRS tax exempt 501(c) (3) status providing services in Broome County. Both United Way member agencies and non-member community agencies are eligible.
2. Pilot or demonstration programs are eligible and strongly encouraged to apply.
3. The primary purpose of eligible proposals must be to address community investment issues as identified by the United Way. These issues are defined in ADVANCING THE COMMON GOOD: United Way of Broome County Community Investment Strategy 2010 – 2012 and is available on-line at [www.unitedwaybroome.com](http://www.unitedwaybroome.com). Preference will be given to proposals addressing the areas of Income, Education and Health.

## ***TYPES OF GRANTS AVAILABLE***

1. A **Venture Grant** provides funding to support program related costs, both personnel and non-personnel costs, associated with start-up of a new program or the enhancement/expansion of an existing program.
2. A **Special Assistance Grant** provides funding to support a one-time, exclusively non-personnel cost, associated with the start-up of a new program or the enhancement/expansion of an existing program.

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## FUNDING PERIOD

Eligible projects will have a start date no earlier than September 1, 2012 and an end date no later than December 31, 2013.

## *EVALUATION OF PROPOSALS*

The United Way and the Howland Foundation will award the grants through a competitive process. The United Way Venture & Special Assistance Grant Committee will evaluate all proposals based on the following criteria:

1. Organization and Community Capacity (10 points)
2. Program Impact (50 points)
3. Program Innovation and/or Critical Need (10 points)
4. Sustainability (15 points)
5. Budget (15 points)

## *PROPOSAL REVIEW PROCESS*

1. Applicants must submit proposals **no later than 3 PM Thursday, March 15, 2012.**
2. The United Way VSA Grant Committee will evaluate all proposals using the criteria outlined in Evaluation of Proposals above.
3. The VSA Grant Review Committee will make its recommendations to the Community Impact Cabinet.
4. The Community Impact Cabinet (CIC) will consider the Committee's recommendations and forward its VSA Grant funding recommendations to the United Way Board of Directors.
5. The United Way will forward summaries of the approved grants to the Howland Foundation Board of Trustees. The Board will select grants it wishes to fund.
6. The United Way Board of Directors will determine which of the remaining approved grants to fund based on the availability of funds.
7. The United Way will negotiate grant contracts with grant recipients selected and approved by the United Way Board of Directors, and/or by the Howland Foundation Board of Trustees.

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## ***SUBMITTING A PROPOSAL***

You will need to submit **one (1) original and ten (10) copies** of your proposal. Proposals should be three-hole punched on the left-hand side and may be paper clipped. Do not staple or bind your proposals. All proposals must be **RECEIVED** by United Way no later than **3:00 PM on Thursday, March 15, 2012**. Applications submitted via fax or e-mail will **NOT** be accepted. Applications received **after 3:00 PM on Thursday, March 15, 2012** will be considered late and **will not** be reviewed by the committee.

### *Mailing Address for Proposals:*

United Way of Broome County  
PO Box 550  
Binghamton, NY 13902-0550

### *Courier Service or Hand Delivery Address:*

United Way of Broome County  
101 S. Jensen Road  
Vestal, NY 13850

Your **ORIGINAL** proposal should consist of the following items:

1. Signed Cover Page (see Appendix I)
2. One-page Executive Summary
3. Program Narrative (see Format Guidelines below)
4. Program Budget (see Appendix II)
5. Budget Justification (see Appendix III)
6. Agency Operating Budget showing projected income and expenses for the period covered by the grant
7. IRS determination Letter \*
8. Most Recent Audit \*

*\* The ten copies of your proposal do not need to include your IRS determination letter or your most recent audit.*

If you are submitting a **Venture Grant** do not submit any additional materials such as cover letter, photos, diagrams, letters of support, etc. If you will be contracting with another group to provide a part of the program, a contract or letter of agreement signed by the partnering organization **MUST** be included.

If you are submitting a **Special Assistance Grant** please include relevant supporting documentation such as three written bids for services/equipment to be purchased and/or relevant contracts or letters of agreement with third party providers.

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## ***PROGRAM NARRATIVE***

Your Program Narrative must adhere to the following guidelines:

- Typed one-sided on 8.5” by 11.5” white paper
- 1” margins on all sides
- 12-point font or larger
- Provide responses to the questions below. **Responses should be numbered to respond to the question and may not exceed the page limits listed.** Information exceeding the page limits will not be considered during the review process.

### Organization and Community Capacity (2 pages maximum)

1. What is your organization’s mission and how does the proposed project fit within your mission?
2. What prior experience does your organization have with the proposed project or similar project?
3. Who will be the key staff involved in this project and why were they selected? If you will be hiring new staff for the project please describe the skills, experience, and education you will be looking for in the new staff.
4. What other agencies in the community offer a similar or parallel service? How is your project different?
5. What other agencies in Broome County will you be coordinating your project with? What other agencies might your participants also be involved with and do you have plans to coordinate your project with those agencies?

### Program Impact (4 pages maximum)

6. What is the need for this project and how did you determine the need?
7. How does your proposed project fit into the United Way’s Community Investment Strategy Report?
8. What do you hope to accomplish with this project? How will participants be better off because of your project? Please be specific and realistic in terms of the changes you hope to achieve.
9. Describe the innovative, creative, and/or non-traditional nature of your proposed project.
10. List the activities of the project in clear, concise terms and indicate the anticipated participation levels. Include the proposed time frame for each activity, start and end dates.
11. Describe the resources (i.e.: money, staff, volunteers, facilities, equipment, supplies) required to carry out the proposed activities identified in question 10.
12. Why will participants accept and participate in your project?

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13. What will you measure to gauge success and why did you chose those measurements?

## Sustainability (2 pages maximum)

14. Identify other funding sources your organization has approached for support of this project. How much was requested from each of those sources and what is the current status (i.e.: pending, approved, denied)?

15. Do you intend to continue this program beyond the period funded by this grant? If so, how will you maintain funding for the project? How realistic is your plan for continued funding?

16. If you were not funded at the requested amount, what would happen to the project? What modifications could be made to implement the project with less funding? If you were given less money, at what point (dollar figure) would you be unable to move forward with the project?

17. If you can not accept less funding for this project than your full request, please explain why.

## Supplemental Questions for Special Assistance Grants (1 page, not including supporting documentation)

Please answer the following questions **ONLY** if you are applying for a Special Assistance Grant.

18. Proposed type of Special Assistance Grant (i.e.: equipment, professional fees, etc.).

19. What is the total project cost and the percent of your organization's total annual operating expense the project represents?

20. How was the project cost derived?

21. Have competitive bids been obtained? If "yes", please include them in your proposal as an attachment. If "no", why have bids not been obtained?

22. What impact will this special assistance grant have on your annual operating budget?

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## *INFORMATIONAL SESSION AND QUESTIONS*

An informational session will be held on Thursday, January 26, 2012 at 1 PM at the United Way located at 101 S. Jensen Road, Vestal, NY 13850. Potential applicants are strongly encouraged to attend this meeting. United Way staff will provide a brief overview of the 2010 – 2012 Community Investment Strategy Report and discuss how the plan will impact funding decisions for the 2013 Venture and Special Assistance Grants. United Way staff will also review and answer any questions about the format of the Venture and Special Assistance Grant Application.

If you are unable to attend the session but have questions regarding the submission of an application please submit your questions in writing to:

Phillip A. Ginter, Director of Community Impact & Engagement  
United Way of Broome County  
101 S. Jensen Road  
Vestal, NY 13850  
E-mail: [pginter@uwbroome.org](mailto:pginter@uwbroome.org)  
Fax: (607) 240-2009

Questions regarding the 2013 Venture and Special Assistance Grants will be accepted up until Tuesday, February 14, 2012. Responses to questions will be posted on the United Way's website ([www.unitedwaybroome.com](http://www.unitedwaybroome.com)) Monday February 20, 2012.



# APPENDICES



# **APPENDIX I: COVER PAGE**

# 2013 Venture and Special Assistance Grants Request for Proposals



## COVER PAGE

### TYPE OF APPLICATION

(please check **ONLY one**)

**Program Grant:**

**Special Assistance Grant:**

### PROJECT SUMMARY

Project Title:

Total Project Cost:

Amount of United Way

Funds Requested:

Timeline for Proposed Project:

Start Date:

End Date:

### Primary Community Issue to be Addressed (Please check **ONLY one**)

Quality Early Child Care

Youth Mental Health

Chemical Dependency Prevention

Physical Fitness & Wellness

Health Access

Service Access for Seniors

Other (please specify):

### APPLICANT INFORMATION

Name of Applicant Organization:

Mailing Address:

Executive Director Name:

Telephone:

Fax:

E-mail Address:

Board Chair Name:

Mailing Address:

(Home or Work)

Is your agency a non-profit organization as defined by IRS 501(c) (3)?

(Enclose **one** copy of your current IRS determination letter)

Please indicate who should be contacted regarding questions on this application:

Contact Name:

Title:

Telephone:

Fax:

E-mail Address:

Mailing Address (If different from above):

Has your agency applied for a Venture or Special Assistance Grant within the past five years?

If "Yes", please indicate when you applied.

Has your agency received a Venture or Special Assistance Grant within the past five years?

If "Yes", please indicate when you received funding.

### APPLICANT AUTHORIZATION AND ACKNOWLEDGEMENT

I acknowledge I am authorized to submit this application on behalf of the agency above. I further acknowledge the information contained in this application is, to the best of my knowledge, truthful and accurate. I understand that submission of an application does not guarantee funding. Approval for Venture and Special Assistance Grants is contingent upon review of the application and acceptance by the United Way Board of Directors and the Board of Directors of the Howland Foundation. I understand the funding decisions made by those bodies are final.

Signature of Authorized Representative

Print or Type the name of person signing

Title

Date Submitted



# **APPENDIX II: PROGRAM BUDGET**

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## PROGRAM BUDGET

<b>Expenses of Program</b>	<b>I. VSA FUNDING REQUEST</b>	<b>II. OTHER FUNDING /CONTRIBUTIONS</b>	<b>GRAND TOTAL (I and II)</b>
Salaries and Wages			
Health and Retirement Benefits			
Payroll Taxes			
<b>TOTAL STAFF COSTS</b>			
Professional Fees/Contract Payments			
Program, Recreation, Other Supplies			
Telephone			
Postage and Shipping			
Rent of Space			
Utilities			
Other Occupancy Costs			
Miscellaneous Occupancy Costs			
Rental & Maintenance of Equipment			
Printing and Publicity			
Travel/Conference			
Financial (Food, Shelter, Clothing)			
Transportation for consumer			
Other Assistance for consumer			
Miscellaneous Expenses			
<b>TOTAL NON-STAFF COSTS</b>			
<b>TOTAL STAFF AND NON-STAFF COSTS</b>			



# **APPENDIX III: BUDGET JUSTIFICATION**

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## **Budget Justification**

In the space provided below, list each line item expense identified on the Program Budget Form and give a brief description and methodology for each. (e.g. salaries and wages - one part time coordinator working 15 hours a week at \$7.50 a hour for 26 weeks = \$2,925)