

Part V: APPLICATION
The SafeHouse Outreach Learning Community
2010 Capacity Building Grants for Individual Agencies
Application Packet

TABLE OF CONTENTS

Intent to Apply	Page 1
Application Checklist	Page 2
Application	Pages 3-9
Required Attachments	Page 10
Federal Budget Form 424A	Page 11
Appendix A	Page 12-13

Intent To Apply

Deadline: December 2, 2009

If you intend to apply please indicate so, by going to www.empowergeorgia.com and filling out the appropriate online form. This is not a binding registration but very helpful for our processing purposes. If you have any questions contact Robin Cash at robin@safehouseoutreach.org or 404.523.2221.

**SafeHouse Outreach Learning Community
Capacity Building Grants 2010
Application Checklist**

Contact: For any questions regarding the application, please contact the SafeHouse Outreach Learning Community staff:

Robin Cash, robin@safehouseoutreach.org or 404-523-2221

Deadline: 5:00 pm EST on Wednesday December 2, 2009

By mail to:

SafeHouse Outreach

PO Box 54098

Atlanta GA 30308

In person to:

SafeHouse Outreach

89 Ellis Street

Atlanta, GA 30303

Mailed submissions received after this deadline will not be accepted. NO applications will be accepted by fax or email.)

You may download the Request for Proposal (RFP) and application at

www.empowergeorgia.com or www.safehouseoutreach.org. IMPORTANT

NOTE: five (5) hard (printed) copies (including original) of the completed application must be submitted for circulation and review by volunteers. Failure to submit five copies will be considered an incomplete application and not be scored or funded.

The following items comprise the Grant Application package. Please submit five (5) COPIES of each, collated in the following order:

- ___ Cover letter signed by Board Chair
- ___ Fully Completed Application
- ___ Budget Attachment A: Standard Form 424A
- ___ Most recent Audited/Reviewed/Compiled Financial Statement
- ___ Total, Board-approved operating budget (current fiscal year)
- ___ Year-to-Date Financial Statements (past fiscal year)
- ___ Board Roster
- ___ IRS determination letter signifying 501(c)(3) status or certificate of non-profit registration with the State of Georgia.

Section II: Budget Summary and Requested Grant Amount
Summary of Capacity-Building Project (no more than 6 lines):

Total Grant Request \$_____ To be used within the period: April 15 – August 31, 2010

Total Current Fiscal Year Organization Budget \$_____

Organization Fiscal Year End: _____

Year agency first received federal funds (from all sources): _____

Amount of federal funds received last year (from all sources): _____

Percent of total agency income: _____

Does agency have financial policies and procedures regarding budgeting____, bank reconciliation____, cash flow____, management reporting____, and internal controls____? (Check if yes for each, leave blank if no.)

Does agency have a financial system allowing for tracking of designated funds? yes no

Which of the following is attached to document your agency's tax exempt status?

- IRS letter confirming 501(c)(3) status
- Proof of Nonprofit Corporation Status form the Georgia Secretary of State

Section III: Agency Overview

Answers should not exceed 2 separate single spaced typed pages.

Agency Programs.

1. **Priority service areas.** Please check all of the areas in which you currently provide services:

- Homeless
- Elders in need
- At-risk youth
- Welfare to work families
- Ex-offender reentry & children of prisoners
- Substance abuse
- Healthy marriage education and preparation services

2. **Needs assessment of target population.** Please briefly describe the needs of the target population served by your organization and programs.

3. **Community service area (geographically).** Please describe the geographic areas served by your programs (including counties).

4. **Current service description.** Number of clients agency served last year: _____ Please briefly describe the services provided in the above listed priority service areas.

5. **Impact of agency programs.** What outcome information (data and/or testimonial) do you have to describe the successful results of your agency's programs?

6. **Partnerships and Collaborations.** Please list your agency's primary program partners, including public agencies, community organizations, faith-based organizations and volunteers. For each one, briefly describe the specific nature and scope of your collaboration.

7. **Please check which of the following best describes the way faith is expressed in your agency's programs:**

(Narrative response needed only if option b. is checked.)

- a. ___ Faith-inspired programs: Secular services are hosted by a faith entity. No religious activities or faith content are involved in the actual delivery of the program services, even though services may be delivered by persons of faith, and the organization claims faith as a motivation or heritage in its mission or background.

- b. ___ Faith-optional programs: Faith is neither a prerequisite nor a mandatory element of these programs, but faith plays an integral role in the lives of staff and volunteers. The program offers some optional religious activities, which can be separated for funding purposes. (Note: If you checked option b, faith-based program, please explain how you separate the faith and secular aspects of your programming, to ensure that federal funds do not support any inherently religious programming. Please contact the SafeHouse Outreach Learning Community Project for assistance, and/ or refer to federal regulations pertaining to the Equal Treatment for Faith-Based Organizations, which includes the prohibition against Federal funding of inherently religious activities, can be found at 45 CFR 87.1, or the HHS website at <http://www.os.dhhs.gov/fbc/waisgate21.pdf>,

- c. ___ Faith-saturated programs: Faith is a mandatory element of program services; participants must express faith or participate in religious activities to receive related program services. If you checked this option, you may not be eligible for CCF federal funds. Please contact the SafeHouse Outreach Learning Community Project Director to discuss your application further.

- d. ___ No faith elements are included in programs.

Section IV: Agency Readiness to Receive Capacity-Building Services.

This response should be no more than one separate single spaced typed pages

1. Please describe any current or planned capacity building activities for your organization in 2010. Please explain how you will ensure that these efforts will complement the proposed capacity-building activities of the SafeHouse Outreach Learning Community program.
2. Why is the capacity-building project proposed here important to help the organization fulfill its mission and meet its long-term goals? Please refer to long-term outcome(s) described in question 2 below (Section IV).

Section V: Description of Capacity-Building Project

This response should be no more than two single spaced typed pages

1. Agency need for capacity-building; agency self-assessment in five critical areas of capacity.

Has the organization completed an agency assessment in the last 18 months? Yes No
(If yes, please note key recommendations in your response.) Please briefly describe your agency's strengths and challenges in the following five areas of organizational capacity. (Under each of the five critical areas, please address the specific capacities which are most relevant for your agency's effectiveness and sustainability.)

1. Leadership development:

2. Organizational development:

3. Program development:

4. Community engagement:

5. Revenue development strategies:

Overall, what are the organization's greatest strengths and its most pressing challenges (including but not limited to the above self-assessment)?⁶

2. Organizational changes (outcomes, goals and objectives). What changes do you expect the proposed capacity building activities will help your agency to achieve? The changes should address one or two of the five critical areas assessed above in question 1, and should help improve the effectiveness, efficiency, or sustainability of your agency or its programs. Please be as specific as possible, describing how you will know when the changes have happened. Please describe the specific organizational changes using the following categories:

- Initial outcomes resulting from grant-funded activities (new policies, plans, or procedures adopted, or new skills learned)
- Intermediate outcomes resulting from initial outcomes (what your agency does differently after the grant, and who does it)
- Long-term outcomes resulting from changed behavior (new agency status, how better positioned to achieve mission)

Section VI: Description of capacity building activities.

This response should be no longer than one typed page or can be submitted as a logic model

Please provide a project plan addressing how you will utilize the training, technical assistance and sub-awards offered by the SafeHouse Outreach Learning Community. In concrete terms, please describe the staff and/or consultant activities this grant will support to help you achieve the changes described above in question 2. Please ensure that your grant budget reflects the cost of the activities described here.

Sustainability Plan. What will your agency do to support any related activities you expect to continue beyond the grant period?

Evaluation Plan. How will you know if the proposed capacity building activity increases the service capacity of your organization?

Requested Attachments

Please submit five (5) copies of the following items:

1. A brief (one-page) letter, signed by the Chair of the Board of Directors (Advisory Board, etc.) summarizing the rationale and support for participation in the SafeHouse Outreach Learning Community. This should be the cover letter for the application.
2. A grant budget and narrative showing the proposed use of grant funds requested, on federal form 424A (Complete only page one, only 6. Object Class Categories, column 1 only). Visit <http://www.acf.hhs.gov/programs/ofs/grants/sf424a.pdf> for an electronic version. Or you may print the attached form and complete manually. Please refer to Appendix A for a review of costs that are allowable under the CCF grant. Organizations awarded CCF grants must provide documentation for all costs incurred. Please contact Robert Jones, Robert@safehouseoutreach.org or 404-523-2221, if you have questions about budget and financial submissions.
3. The total, board-approved operating budget for the agency for current fiscal year (in your own format). Please show (on the budget or an additional page) revenue amounts awarded, requested, and amounts planned to request.
4. The audit, review, or compilation of your financial statements for the most recent fiscal year, preferably for the most recent two years. . If you do not have an audit for the most recent fiscal year, please address the relevant exceptions:
 - Organizations not required to submit an independent audit, review, or compilation of their financial statements should submit an explanation and substitute: Either federal form 990 for the most recent tax year, or your agency's most recent fiscal year's annual income statement and balance sheet.
 - If your organization has revenues in excess of \$250,000, and the period covered by the most recent audit was more than eighteen months ago, please submit a statement explaining the reason for the delay and the status of your current outstanding audit process.
5. Year-to-date financial statements for the current fiscal year.
6. A current roster of the Board of Directors (or Advisory Committee, Membership, etc.)
7. Please attach one of the following, to document agency legal tax status:
 - IRS letter confirming 501(c)(3) status or
 - State tax exempt certification or State Articles of Incorporation as a nonprofit

BUDGET INFORMATION - Non-Construction Programs

OMB Approval No. 0348-0044

SECTION A - BUDGET SUMMARY						
Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1.	93-647	\$	\$	\$	\$	\$ 0.00
2.						0.00
3.						0.00
4.						0.00
5.		\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	
SECTION B - BUDGET CATEGORIES						
6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY					Total (5)
	(1)	(2)	(3)	(4)	(5)	
a. Personnel	\$	\$	\$	\$	\$	0.00
b. Fringe Benefits						0.00
c. Travel						0.00
d. Equipment						0.00
e. Supplies						0.00
f. Contractual						0.00
g. Other						0.00
h. Total Direct Charges (sum of 6a-6h)		0.00	0.00	0.00	0.00	0.00
i. TOTALS (sum of 6i and 6j)	\$	0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
7. Program Income	\$		\$	\$	\$	0.00

Previous Editions Usable

Authorized for Local Reproduction

Standard Form 424A (Rev. 7-87)
Prescribed by OMB Circular A-102

Appendix A

Examples of Capacity Building Activities

Leadership Development

- Create a volunteer management plan
- Create a volunteer recruitment plan
- Create board policies
- Create executive succession plan
- Engage executive coach
- Implement a volunteer management plan
- Provide management/leadership training to staff
- Provide training/written information for board of directors
- Recruit board members
- Recruit volunteers (non-board)

Organizational Development

- Create a staff performance review process
- Create a strategic plan
- Create financial management procedures/ improve internal controls
- Create job descriptions
- Create marketing materials
- Create/revise organizational identity
- Create/update an annual report
- Implement a new accounting system
- Implement a new budgeting process
- Implement a staff performance review process
- Implement new financial management procedures
- Incorporate as a legally recognized organization
- Install IT infrastructure
- Obtain 501(c) (3) status with the IRS

Program Development

- Analyze outcome data /evaluate effectiveness of current services
- Collect information related to service recipient outcomes
- Collect information related to service recipient satisfaction
- Create an outcome measurement plan
- Implement systems to keep information related to client needs, referral sources, and services provided

- Implement systems to keep records on service recipient satisfaction and/or service recipient outcomes
- Obtain program related equipment and durable supplies
- Research and develop new programs or services
- Take steps to expand current services to new geographic area
- Take steps to increase the effectiveness of existing services
- Take steps to increase the number of clients served in existing geographic area
- Take steps to increase the number of scope of services
- Take steps to reach an underserved population in existing geographic area

Revenue Development Strategies

- Create a revenue development plan
- Identify potential funding sources
- Implement donor tracking software
- Provide revenue development training to staff

Community Engagement

- Assess effectiveness of existing collaborative efforts
- Conduct assessment of community needs
- Create a map/inventory of community assets
- Create action plan for coordinating/collaborating
- Create or update a brochure
- Create or update a Web site
- Create processes for collaborating with partners
- Develop new strategic partnerships
- Establish partnership agreements
- Make presentations to community groups