



# **Commonwealth of Massachusetts**

Executive Office of Housing and Economic Development

**Social Enterprise Capital Grant Program**  
**FY2023 Informational Webinar - March 30, 2022**

# Welcome

Welcome to the informational webinar for the FY2023 round of the Social Enterprise Capital Grant Program. The following is the agenda for this session:

- Overview of the Social Enterprise Capital Grant Program
- Eligibility Criteria
- Review of the RFP/Guidelines
- Application Highlights
- Q&A

At any time during the presentation, if you have general questions, please type them into the Zoom Q&A. These will be reviewed and answered during the Q&A period, as time allows. Questions will also be aggregated and posted on the program's webpage.

Questions that may relate only to your organization or project should be sent via email to [eoheadgrants@mass.gov](mailto:eoheadgrants@mass.gov) to be reviewed/answered after the session.

# Social Enterprise Program Overview

The Social Enterprise Capital Grant Program was created to invest in employment social enterprises that contribute to economic growth in low-income communities throughout the state. It is designed to support social enterprises that sell goods and services while providing supportive services to individuals who face significant barriers to employment.

EOHED will make **capital grants, on a competitive basis**, to **non-profits organizations** that meet the specific eligibility requirements of the program, for the **development of eligible facilities for employment social enterprises** that target low-income individuals. Applicants may request a grant for expenses related to one or more of the following categories:

- Acquisition of a property to be owned by the non-profit for the social enterprise;
- Renovation of a property already owned by the non-profit for the social enterprise;
- Purchase of equipment for the operation of the social enterprise.

# Applicant Eligibility

To be eligible for funding, an applicant organization must meet **all** the following requirements:

- be a Massachusetts non-profit corporation in good standing, and
- successfully operating an employment social enterprise for at least 12 continuous months prior to the time of application, and
- offering paid employment opportunities to low-income individuals, with priority to socially and economically disadvantaged populations who experience complex needs and barriers to employment that require intensive interventions, and
- paying participants in the social enterprise no less than the Massachusetts minimum hourly wage for their employment, and
- be the current or imminent owner of the real estate, if requesting funds to repair, rehabilitate, and/or renovate a social enterprise facility.

# Applicant Eligibility *(continued)*

Applicant must **currently** be providing **all** the following services to participants in the social enterprise, and plan to provide them to future participants:

- Outreach to targeted populations.
- On-the-job training and skill development, including worksite supervision and performance coaching.
- Comprehensive supportive services for at least 1 year (including, but not limited to, case management, aimed at helping to overcome barriers to employment).
- Assistance to obtain external employment.
- Job retention services, which include follow up with beneficiaries for at least 1 year and employers to support job retention and advancement.

# FY2023 RFP - Key Elements

Total Funds Available	\$2,000,000
Grant Request Amount	Up to \$1,000,000
Number of Awards	Multiple (Estimate: 2 - 8 grant awards)
Contract Payment Terms	Grantees will work with EOHED to develop a final budget. Funds will be disbursed on a cost reimbursement basis. Grantee will be required to submit quarterly reports.
Grant use	Costs related to facilities owned (or to be owned) by a non-profit social enterprise, in the following categories: <ul style="list-style-type: none"><li>• Acquisition of Real Estate</li><li>• Rehabilitation/Renovation of Real Estate</li><li>• Purchase of Program Equipment</li></ul>
Performance Period	July 1, 2022 to June 30, 2023

# FY2023 RFP - Key Dates

Application Open	Wednesday March 23, 2022
Informational Webinar	Wednesday March 30, 2022, 10:00am
<b>Application Deadline</b>	<b>Wednesday April 20, 2022, 5:00pm</b>
Awards Notification	June 2022

# Application Form Highlights

## Application Submission

A complete proposal packet, which includes the following pages/components, **must be submitted to EOHEd by 5:00 p.m. on Wednesday April 20, 2022** via Submittable

- Eligibility Screen
- Cover Page
- Proposal Narrative
- Budget Form
- Certification of Submission Authorization

The application is available at ***maeohed.submittable.com*** and is also linked on the **Mass.gov Social Enterprise Capital Grant Program** page



# FY2023 RFP – Review Criteria

## Review Criteria

Each eligible and complete application will be evaluated and scored (on a 110-point scale) based on the following criteria:

- Target Population (20 points)
- Organization Capacity and Purpose (30 points)
- Programmatic Impact (30 points)
- Track Record & Capacity to Succeed (20 points)
- Advancing Equitable Opportunities (BONUS 10 points)

# Application Form

## **Before you begin**

The online application form is available through the Submittable platform.

The platform works best on Google Chrome, Firefox, or Safari (Internet Explorer is not supported). Please make sure you are using a supported internet browser.

You will need to create a free Submittable account or sign in with a Google or Facebook credential to access the online application.

You can save a draft of your work if you would like to finish filling out the form at a later date.

You will receive confirmation of your submission by email. Please safelist notification emails from Submittable and check the email you used to sign up for your Submittable Account regularly.

# Application Form

You can invite collaborators using the button in the upper right hand corner

Executive Office of Housing and Economic  
Development

Social Enterprise Capital Grant Program FY23  
Application  
Ends on April 20, 2022



 [Invite Collaborators](#)



**Have questions about your Submittable account?**

- Check out [Submittable Customer Support](#) for how-to instructions and guides, and for answers to frequently asked user questions.
- Visit [submittable.com/help](https://submittable.com/help)

# Application Form – Eligibility

After creating your submittable account, you'll need to complete the eligibility certification.

## Social Enterprise Capital Grant Program Application - Eligibility Certification

### Social Enterprise Capital Grant Program Application - Eligibility Certification

*This form is to verify applicant eligibility for the Social Enterprise Capital Grant Program. Applicant organizations must meet all of the eligibility criteria on this form in order to proceed with a Social Enterprise Capital Grant Program application. Please note that both this certification and the full application will close at 5pm on April 20, 2022 and submissions must be received before that time.*

Is the applicant organization a nonprofit organization? Please verify the organization's EIN to proceed. \*

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Eligible grantees must be nonprofit organizations.

Is the applicant operating an employment social enterprise that targets individuals facing significant barriers to employment?

\*

☐ Yes

☐ No

Does the applicant organization have experience delivering and plan to continue to provide the following services: 1) on-the-job training and skill development; 2) comprehensive supportive services for at least 1 year; 3) assistance to obtain external employment; and 4) job retention services? \*

☐ Yes

☐ No

# Application Form - Eligibility

Does the applicant organization have experience delivering and plan to continue to provide the following services: 1) on-the-job training and skill development; 2) comprehensive supportive services for at least 1 year; 3) assistance to obtain external employment; and 4) job retention services? \*

- ☐ Yes  
☐ No

Does the applicant organization pay all social enterprise participants at least the Massachusetts minimum hourly wage, and certify that they will continue to do so? \*

- ☐ Yes  
☐ No

Has the applicant organization been continuously operating an employment social enterprise for at least 12 months as of March 23, 2022? \*

- ☐ Yes  
☐ No

Save Draft

Submit Form



# Application Form – Cover Page

## COVER PAGE

**Project City/Town:** \_\_\_\_\_ **Neighborhood, if applicable:** \_\_\_\_\_

**Applicant Organization Name:** \_\_\_\_\_

**Applicant Organization Legal Address:** \_\_\_\_\_

**City/Town:** \_\_\_\_\_ **State:** MA **Zip Code:** \_\_\_\_\_

**CEO Name:** \_\_\_\_\_ **CEO Title:** \_\_\_\_\_

**CEO Tel.:** \_\_\_\_\_ **CEO Email:** \_\_\_\_\_

**Project Contact Name/Title (if different):** \_\_\_\_\_ **Contact Tel:** \_\_\_\_\_ **Contact Email:** \_\_\_\_\_

**Outline the organization's general mission, history, and goals.** \_\_\_\_\_

Indicate which, if any, of the following certifications are formally held by this organization:

☐ Woman-Owned Business Enterprise

☐ Veteran-Owned Business Enterprise

☐ Minority-Owned Business Enterprise

☐ LGBTQ-Owned Business Enterprise

☐ Disadvantaged Business Enterprise

☐ Disability Business Enterprise

# Application Form – Cover Page

## Grant Proposal Summary

Project Name: \_\_\_\_\_

Grant Amount Requested: \_\_\_\_\_ Total Project Budget: \_\_\_\_\_

Project Abstract – Provide a brief description of the proposed project. \_\_\_\_\_

## Project Category *(Check all that apply.)*

- ☐ Acquire real estate to be owned and operated for the social enterprise.
- ☐ Repair, rehabilitate, and/or renovate real estate owned and operated for the social enterprise.
- ☐ Purchase equipment to be used for the operations of the social enterprise

**Social Enterprise Facility Address:** \_\_\_\_\_

**[Attachment]** Required only for applications seeking funds for real estate acquisition and/or renovations.  
Upload proof of current ownership or evidence of imminent acquisition.

# Application Form - Narrative

## PROPOSAL NARRATIVE

### **Target Population (20 Points)**

1. Describe the neighborhood, economic, and social context in which this project operates. What issue(s) and/or circumstance(s) led to the development of the social enterprise?
2. Describe the specific target population(s) that the social enterprise is designed to benefit. Are members of the target population high risk? If so, why? What barriers to employment does this population face? Provide statistics.
3. How does the social enterprise conduct outreach to target population(s)? What methods and strategies are utilized?
4. What role do members of the target population play in program planning and outreach?



# Application Form - Narrative

## Organizational Experience and Purpose (30 Points)

5. Describe the organization's employment social enterprise, including its development and past successes, what makes it innovative and/or effective in delivering social benefit, and how the organization demonstrates the social return on investment from the social enterprise.
6. Describe the applicant's experience and capacity to deliver each of the following service components: on-the-job training and skills development (including supervision and coaching), comprehensive support services, assistance with obtaining external employment, and job retention services.
7. Describe how equity considerations impact the social enterprise's target population, outreach, and operations. Provide a list of the current staffing that is operating the social enterprise and delivering the services outlined above. Include title of each position, FTE, brief description of the incumbent's experience, including whether they currently or previously identify as a member of the social enterprise target population, and whether they live in the community.

Position Title	FTE	Experience of Incumbent	Resident?

# Application Form - Narrative

## **Programmatic Impact (30 Points)**

8. Describe the operations of the social enterprise, the goods and services that are produced, and the positive community and/or environmental impact that is created. Provide relevant data.
9. What type of employment opportunities does the program offer and how many participants does it employ annually? Include a breakdown of how many participants are employed in each function, the entry-level wage for each, and their average length of engagement with the social enterprise.
10. Describe the interventions/services that will be provided by the program and outline the specific outcomes for participants that this social enterprise intends to achieve. Indicate what program components will be directly supported by this grant. Provide relevant data. (Applicant may attach a chart or information list to support the responses.)

**[Attachment]** Optional. Program chart or information sheet.

# Application Form - Narrative

## **Track Record and Capacity to Succeed (20 Points)**

11. What is the total annual operating budget for the organization? What percentage of time and budget is dedicated to the operation of the social enterprise?
12. Would this grant enable the social enterprise to increase the number of people served and/or increase the type of employment opportunities? If yes, explain.
13. Provide a project timeline with key activities and benchmarks that would be supported by this grant.
14. Complete and upload the Grant Budget Form. It should show the entire project budget, with the amounts requested in this grant application, plus any other funds allocated to the project, if applicable.

## **BONUS: Advancement of Equitable Opportunities (10 Points)**

15. If applicable, describe how the project seeks to advance equitable opportunities in the community, including if/how the project aligns with one or more of the recommendations from the Governor's Black and/or Latino Advisory Commissions' reports.

# Application Form – Budget Form

Complete and save the Excel version of the Budget Form. Enter the breakdown for the requested grant plus any other funds\* that support the project, if applicable.

Once completed, the budget form must be uploaded into the online application.

*\*Match funds are not required. However, proposals that include funding support from other non-state sources (local/federal government, philanthropy, private donors, etc.) will get priority consideration.*

Applicant Name:				
Line Items by Category	Request Amount	Other/Match Funds*	Total Project Budget	Source of Other Funds
<b>Facility Acquisition</b>				
Enter Description			\$ -	
Enter Description			\$ -	
<b>Facility Renovation/Rehabilitation</b>				
Enter Description			\$ -	
Enter Description			\$ -	
Project/Construction Admin.			\$ -	
<b>Equipment Purchase/Installation</b>				
Enter Description			\$ -	
Enter Description			\$ -	
TOTALS	\$ -	\$ -	\$ -	
Provide line item explanations, justifications, and/or notes, as needed.				

# Application Form – Budget Form

## 14. Project Budget Form

1. Download the Grant Budget Form from <https://www.mass.gov/doc/social-enterprise-fy2023-budget-form/download>
2. Complete the Grant Budget Form. It should show the entire project budget, with the amounts requested in this grant application, plus any other funds allocated to the project, if applicable.
3. Upload the completed Grant Budget Form below.

### Upload Grant Budget Form \*

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .csv, .doc, .docx, .odt, .pdf, .rtf, .txt, .wpd, .wpf, .epub, .key, .mobi, .mus, .musx, .ppt, .pptx, .sib, .xls, .xlsx, .zip

# Application Form

## CERTIFICATION OF APPLICATION SUBMISSION AUTHORIZATION

By checking this box, I hereby certify that I am duly authorized to submit this application on behalf of \*  
the applicant organization. By entering my name in the space below, I further certify, under the pains  
and penalties of perjury, that the responses to the questions provided in this application, and the  
attached documentation, are true, accurate, and complete. I understand that the Executive Office of  
☐ Housing and Economic Development (EOHED) will rely on this information to make decisions about  
whether to award a grant from this funding source. I also understand that the Commonwealth  
reserves the right to take action against me, the applicant organization, and/or any other beneficiary  
of a grant, if any of the information provided is determined to be false, inaccurate, or misleading.  
Finally, I affirm that, if awarded, this applicant organization has the capacity to carry out the project in  
accordance with all applicable laws and regulations.

Name of person certifying submission authorization \*

First Name

Last Name

Applicant Organization Name \*

Date \*

# Application Form



## You are about to submit your application.

Please review your answers and materials. Please double check that all attachments are correct and current. **Once your application has been submitted, it is no longer editable.**

### What to expect

You will receive an email confirmation once your application is submitted. **All notifications will be sent to the email address associated with your Submittable account/login.**

If you do not receive a confirmation email, please try the following:

- **Be sure that you have submitted the application and that it is not still saved as a draft.**
- Check which email address you used to set up your Submittable account. Be sure that this email address has been entered correctly.
- Check the junk/spam filters for your email account. Be sure to [safelist](#) notification emails from Submittable.

Save Draft

Apply



# Q & A

## Frequently Asked Questions

- My organization is not a nonprofit. Can we apply?
- Is this like Urban Agenda where we can only submit one application per community?
- Should I submit letters of support with my application?
- Does this program fund housing development?

## Other Questions From Participants



# Thank You

Thank you for your interest in the Social Enterprise Capital Grant Program.

For the most up to date information about this and other programs at EOHED, please visit our webpage at [www.mass.gov/eohed](http://www.mass.gov/eohed).

Contact: [eohedgrants@mass.gov](mailto:eohedgrants@mass.gov)