**GRANT APPLICATION**

**FY2020 Urban Agenda Grant Program**

**COVER PAGE**

|  |  |  |  |
| --- | --- | --- | --- |
| Project City/Town: (Neighborhood, if pop. over 150K) |  | | |
| **Lead Applicant (Authorized Signatory) – for award notification and contract execution** | | | |
| Lead Applicant / Organization: |  | | |
| Lead Contact Name & Title: |  | | |
| Mailing Address: |  | | |
| City/State/Zip |  | | |
| Email Address: |  | | |
| Telephone #: |  | | |
| **Project Contact (if different) – for technical questions, follow up, and/or reporting** | | | |
| Project Contact Name & Title: |  | | |
| Email Address: |  | | |
| Telephone #: |  | | |
| **Grant Proposal Summary Information** | | | |
| Project/Program Name: |  | | |
| Grant Amount Requested: | **$** | Total Project Budget | **$** |
| **Project Abstract: Provide a brief description (no more than 150 words) of the proposed project.** | | | |
|  | | | |

**PROPOSAL NARRATIVE**

**Please provide a response to all of the questions outlined below.** Use the space provided in each section to type your responses. Applicants may respond to questions individually or in summary. However, all questions must be answered and the total response in each section should be 500 words or less. **This completed narrative section should not exceed 7 pages.**

|  |
| --- |
| **Project Summary –** Describe the community partnership and the proposed project. Include information on the group’s purpose, the economic challenge being addressed, and the general activities of the project. |
|  |
| 1. **Applicant’s Track Record** (10 Points) |
| Describe the applicant’s experience with community economic development and in leading coalitions.  Describe the partnership’s history, experience, and past successes in the community. |
| 1. **Vision and Goals** (10 Points) |
| Describe the neighborhood, economic, and social context in which this project operates. What issue and/or circumstances led to the development of the project?  What does the project strive to achieve and how does it align with community’s larger strategic vision and/or plans.  If applicable, describe how this project aligns with one or more of the recommendations from the Black and/or Latino Advisory Commissions. |
| 1. **Community Collaboration and Partnerships** (20 Points) |
| For what purpose was the community coalition or partnership organized? What makes this community group innovative or effective in building local capacity and leadership?  Identify the people and/or organizations in the coalition.  Identify any institutional partners that are involved and providing financial, coordination, and/or staff support. |
| 1. **Target Population** (10 Points) – If population exceeds 150K, please indicate if the project is city-wide. If not, please define/describe a target neighborhood, and answer the questions in relation to that defined area. |
| Describe the community (or neighborhood) and the people that this project will serve.  Describe how residents and other stakeholders have been engaged in this work.  How will this project support and benefit the target population? |
| 1. **Economic Opportunity – Project Plan** (40 Points) |
| What are the specific community economic challenges and needs that this project seeks to directly influence and/or improve?  What role did members of the target population play in identifying these opportunities?  How does this project directly respond to the identified community economic opportunities?  List specific activities and include a description of participants (adults, youth, entrepreneurs, etc.), intervention/service type (training, workshops, counseling, etc.), and expected results (certificate attained, job placement, new businesses started, etc.).   |  |  |  | | --- | --- | --- | | Target Participants | Interventions / Service Description | Expected Outcomes | |  |  |  | |  |  |  | |  |  |  |   If applicable, how does this project support the economic advancement of Black and Latino communities? |
| 1. **Capacity to Succeed** (10 Points) |
| Provide a project timeline with key activities and milestones.   |  |  |  | | --- | --- | --- | | Target Date(s) | Major Activity | Major Milestones/Benchmarks | |  |  |  | |  |  |  | |  |  |  |   Complete the budget form below. Show entire project budget with allocation of the requested grant and total of other funds allocated to this project, if applicable. For Other Funds please include the source and whether the funds are committed. *Proposals that include any funding support from other sources (federal or municipal government, foundations, private donors, etc.) will be given priority consideration.* |

**GRANT BUDGET FORM**

**Please use the budget worksheet below to provide the details of your project budget.** Enter the breakdown for the requested Urban Agenda grant plus any other funds\* that support the project, if applicable. Identify source of other funds and indicate if they have been committed. Add categories, as needed.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Spending Category** | **Urban Agenda Request** | **Match / Other Funds** | **Total Project Budget** | **Source of Match /**  **Other Funds** |
| Personnel (inc. taxes/fringe) |  |  |  |  |
| Consultants / Professional Fees |  |  |  |  |
| Partner Subcontracts |  |  |  |  |
| Program Supplies/Materials |  |  |  |  |
| Events / Meeting Expenses |  |  |  |  |
| Other/Miscellaneous |  |  |  |  |
| **Subtotals** |  |  |  |  |
| General Admin / Overhead |  |  |  |  |
| **Grand Total** |  |  |  |  |

|  |
| --- |
| **If applicable, indicate if the match/other funds are committed. Also use this space, as needed, for line item explanations and/or justification for additional categories.** |
|  |

\**Match funds are not required. However, proposals that include any funding support from other sources (federal or municipal government, foundations, private donors, etc.) will be given priority consideration.*