

**FY2021**

**CITY GENERAL FUND**

 **REQUEST FOR FUNDING CHECKLIST**

**\*\*\*Application Deadline is no later than 4:00 PM, December 19th, 2019 in the Department of Budget & Strategic Planning, City Hall, 900 E. Broad St., 11th Floor, Room 1100.\*\*\***

**Check Box Below:**

**[ ]  City General Fund (CGF)**

**Project Name:**

**Applicant (Organization) Name:**

**Request for Funding Package:** (Submit 3 hardcopies/ 2 USB Flash Drives)

**Application** (Complete Pages 1-9) [ ] **Overall Project Budget** (see Attachment D in Attachment Guidelines) [ ]

**Attachments:** (Provide if applicable, list on *Attachment List* pg. 9)

 *Submit attachments on USB Flash Drive*

* Federal Tax Exempt Certification [ ]
* Latest IRS 990 Report [ ]
* Previous Fiscal Year Audit/Financial Statements [ ]
* Current Year Operating Budget **(mandatory for CGF Applicants)** **[ ]**
* By-Laws [ ]
* Articles of Incorporation [ ]
* Organizational Chart [ ]
* Business Strategic Plan **(mandatory for CGF Applicants)** **[ ]**
* List of Board of Directors, Members, and Executive Officers [ ]
* List of Full- and Part- time Employees to Work on Project [ ]
* Employee Resumes [ ]
* Partnership Agreements with other agencies [ ]
* Site Control, Building or Zoning Documentation [ ]
* Corporation Commission Certification [ ]
* Council Adopted Plan [ ]
* Policy/Procedures Manual [ ]
* Other (Specify)      [ ]

**FY2021**

**CITY GENERAL FUND**

**REQUEST FOR FUNDING APPLICATION**

**Instructions:** This form must be fully completed by all organizations and agencies applying for funds. ***It is critically important to consult also the Application Guidelines which list more specific criteria by program area.*** **PLEASE NOTE: You must complete a separate application form for each project.** As a condition of receiving funds from the City, the applicant will be required to agree, as part of its grant contract, that there will be no religious worship, instruction, or proselytizing as a direct part of the organization’s provision of services under the grant contract and that no funds provided by the City will be used for such purposes.

**1.** **Funds Requested:** [ ]  **City General Fund**

**2. Category Request**:

[ ]  **Arts & Culture**  [ ]  **Housing-based, Human Services, Health**

[ ]  **Children, Youth, and Education**  [ ]  **Public Sector and Quasi-governmental**

**3. Focus Area of Request (Public Sector and Quasi-governmental organizations may skip this question.):**

**Children, Youth, and Education (select one):**

[ ]  **In-School Support Services** [ ]  **Out-of-School-Time**

[ ]  **Transition to College and Career** [ ]  **Early Childhood**

**Housing-based, Human Services, Health (select one):**

[ ]  **Homelessness Prevention and Homeless Services**  [ ]  **Senior and Disability Services**

[ ]  **Health Services for Specifically Marginalized Populations**

[ ]  **Community Health and Quality-of-Life**

**Arts & Culture (select all that apply):**

[ ]  **Expanding Access to Culture**  [ ]  **Supporting Diverse and Equitable Cultural Vitality**

[ ]  **Supporting Neighborhood Vitality through the Arts**

**4. Organization Information:**

 Organization Name:

 DUNS Number:

 Federal Tax ID:

 Project Name:

 Project Contact Person: ­­­­­­­­­­­­­­­­­­­­­­

 Mailing Address:

 Phone:       Facsimile:       Email:

 Board Chairperson:       Signature:

Is your organization incorporated? (include applicable attachments) [ ]  Yes [ ]  No

Is your organization: (include applicable attachments)

 A government / quasi-government entity [ ]  Yes [ ]  No

 A non-profit with approved Federal tax exempt certification? [ ]  Yes [ ]  No

 A for-profit business [ ]  Yes [ ]  No

Total *operating budget* for the organization, including income/revenues from all sources.

**(Attach a copy of your current year’s operating budget)**

**5. Location of Project:**

 **A.** Is the project City-wide or does it serve a specific project area?

 [ ]  **City-wide** **[ ]  Specific Project area**

 **B.** Name and Geographic Boundaries of Project Area (Include street names):

 **C.** Census Tract(s):       Council District(s):       NiB (Neighborhoods in Bloom) Area:

**6. Description of Project and Community Impact:**

1. **Project Description and Program Design**

Provide a detailed description of the proposed project and the clients and neighborhood to be served, how additional services will be provided as a result of this funding and the impact of not receiving funding on service delivery (or if existing services will be discontinued without funding).

The description should clearly state goals of the program and provide evidence that the program addresses an important community need. Describe as specifically as possible how the program advances the City goals described in Attachment B of the Application Guidelines for this category (i.e. Children, Youth, and Education: Out-of-school time), and how the program meets each of the expectations specified for each category of funding in Attachment B of the Guidelines. **(Review carefully)**

The account also should describe in detail the program design, including evidence of effectiveness based on past performance in Richmond or other communities and/or strength of program design.

Describe steps the organization will take to proactively include diverse community members, including employment of staff. Describe steps organization will take to collaborate with the City of Richmond and community partners in advancing project goals.

**Note**: For applicants seeking funding in the Children, Youth and Education category, Mayor Stoney is committed to supporting Richmond Public Schools’ strategic plan, #Dreams4RPS. All non-departmental grantees in the In-School Support Services and Out-of-School Time categories should be aligned with #Dreams4RPS. Please provide a short description of how your proposal is aligned to #Dreams4RPS, citing a specific priority and/or action as appropriate, and provide the name of your point of contact at Richmond Public Schools.

Note: For applicants seeking funding for Out-of-School Time and In-School support services in the Children, Youth and Education category, check YES or NO to indicate whether your organization/program implements the Youth Program Quality Intervention (YPQI). [ ]  Yes [ ]  No

1. **Describe how receipt of partial funding (50%) would impact delivery of services or ability to complete the project (to include impacts to originally provided performance measures).**

1. **Performance Measures and Explanation of Budget**

Successful applications must clearly explain how proposed funding will make a measurable impact on the community and advance the City’s strategic goals, particularly as it relates to promoting education, reducing poverty, promoting health, and promoting a flourishing and diverse culture. Provide an account of the proposed Performance Measures or Metrics for this project. Include number of persons and/or organizations to be served and other measurable outcomes. **These outcomes must align with the City priorities for the category being applied for, outlined in Attachment B of the Application Guidelines.** Note that these performance measures will be reviewed and incorporated into the grant contract with the City all recipient organizations must sign prior to the disbursement of funds.

Explain in detail how the proposed budget facilitates the achievement of these goals.

***Note 1: Prior to the introduction of the Mayor’s Budget proposal, City staff may request applicants to revise the proposed performance measures as a condition of being recommended for funding.***

***Note 2: Performance measures for organizations receiving City funding will be modified based on final approved funding levels prior to disbursement of funds. These modifications will be made in June 2020 after Council approval of the final budget, during the process of drafting grant contracts for disbursement of funds.***

1. **Community Impact**

Briefly describe the neighborhood to be served, highlighting such items as: population to be served, housing conditions, median household income, neighborhood strengths/weaknesses and describe how the project will positively impact the community, including any community organization(s) receiving support such as a civic association, PTA, or other.

**7. Description of Organization and Overall Capacity:**

 **A.** Briefly describe organization’s background and mission

 **B.** Briefly highlight the organization’s significant achievements, including the capacity to execute and complete projects and programs or deliver services equivalent or similar to those proposed in this application. In addition, briefly describe your organization’s commitment and approach to equity.

 **C.** Briefly describe your strategies and methods for marketing your program and the target population of your efforts.

**D. Attach** a list of all full- and part- time employees, resumes, and percentage of time that will be spent on this project.

**E. Attach** a list of current board members including address, occupation and role on board.

**F.** Describe your organizational structure, record keeping and financial/audit system, policies

 and procedures, and program evaluation results. (*Attach most recent audit report and/or*

 *financial statements, and organizational chart)*

 **G.** Provide a brief description of any financial default or involvement in legal actions during

 the last three years. This would include lawsuits, tax delinquency, bankruptcy, client

 complaints, and violations of building, zoning, and environmental codes. Applicant must also disclose and describe any lawsuits pending at the time of application to which the applicant is a party.

 **H. (*For Public Sector and Quasi-Governmental Entities Only).*** In a short narrative, list overall current year budget and all major sources of financial support. (It is also recommended that the organization separately submit its most recent available annual report, including financial information, if available.) List major ongoing activities of the entity and current year operational and strategic goals. Specify whether requested funding will be used to support ongoing operating activity or to fund new initiatives or enhanced services**.** If enhanced funding beyond FY2020 levels is requested, describe in detail the impact of proposed enhanced funding on services provided, specifying numerical targets and metrics of success. Also include a succinct narrative on the implications (impacts to stated services/activities) if the enhanced funding (anything above the adopted FY20 level) is not provided**. See Attachment A for recommended template to use to assist in answering this section.**

**8. Request and Funds Received Previously for this Project by Year of Allocation:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Previous****2019** | **Current****2020** | **Request for****2021** |
| **CITY GENERAL FUND:** | $      | $      | $      |
| **CITY CAPITAL BUDGET:** | $      | $      | $      |
| **CDBG:**  | $      | $      | $      |
| **HOME:** | $      | $      | $      |
| **ESG:** | $      | $      | $      |
| **HOPWA:** | $      | $      | $      |
| **AFFORDABLE HOUSING TRUST FUND:** | $      | $      | $      |

**9. Accomplishments in the Current Fiscal Year**

Describe project progress in the current fiscal year. Emphasize measurable outcomes and project benefits to the community.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Fiscal Year 2020****Objectives** | **Fiscal Year 2020****Accomplishments to Date** | **# of Clients** | **Other** | **Other** |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |

**Proposed Objectives and Outcomes:**

| **Fiscal Year 2021****Objectives** | **Fiscal Year 2021****Outcomes** | **# of Clients** | **Other** | **Other** |
| --- | --- | --- | --- | --- |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |

**10. Project Match**

List all sources of funds you will receive for Fiscal Year 2021 for this project.

(Denote all funds you anticipate receiving with an asterisk [\*]).

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | **Program Year** | **Dollar** |
| **Source of Funds** | **Status** | **Dates** | **Amount** |
|  |  |  |  |
|  1.       |       |       | $      |
|  2.       |       |       | $      |
|  3.       |       |       | $      |
|  4.       |       |       | $      |
|  5.       |       |       | $      |
|  6.       |       |       | $      |
|  7.       |       |       | $      |
|  8.       |       |       | $      |
|  9.       |       |       | $      |
| 10.       |       |       | $      |
| **2021 Matching Total:** |  |  | **$** |

**11. Partnership Agreements (formal agreements with other agencies, including City departments, to implement the proposal)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Contact Person** | **Telephone** | Organization | FAX | Address | Date |
|        |       |       |       |       |       |
|        |       |       |       |       |       |
|        |       |       |       |       |       |
|  |       |       |  |  |  |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |

**Attachment List**

**Instructions:** All attachments for the Requests for Funding form must be listed below. If attachments are not available at the time of submission, an asterisk (\*) should be placed next to these items to indicate that they are anticipated, and the date that they are anticipated should be included.

**If you wish to include additional information as an attachment, please include that also in the list below**

|  |
| --- |
| **Name** |
|       |
|       |
|       |
|  |
|       |
|       |
|       |
|       |
|       |
|       |

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name (print) and Title of Applicant requesting Funds**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Applicant requesting Funds**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date**

(Note regardless of date supplied on this application, **application must be received prior to the date and time of the deadline** **to be considered for funding**). **Deadline is no later than 4:00 PM, on December 19th, 2019 in the Department of Budget & Strategic Planning, City Hall, 900 E. Broad St., 11th Floor, Room 1100.**

**Attachment A**

**Recommended Template for Public Sector and Quasi-Governmental Organizations Applying for Non-departmental Funding.**

***It is requested that Quasi-Governmental Organizations use this template to complete section 7H of the application, supplemented by a detailed narrative. Organizations must complete all other parts of the application as well.***

1. **Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **FY 2020 Total Budget: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
3. **FY 2020 Budget Support from City of Richmond: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
4. **FY 2020 Revenue Sources (public sector) other than City of Richmond: \_\_\_\_\_\_\_\_\_\_\_**
5. **FY 2021 Budget Support Funding Request: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
6. **Ongoing Initiatives/Activities**

List major categories of ongoing activities supported in part or in whole by City of Richmond funding (Use of FY 2020 funding).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Initiative/Activity** | **Purpose** | **Responsible Staff** | **Projected Outcomes (KPI) FY 2020** | **FY 2020 Estimated Resource Commitment** | **FY 2020 City of Richmond****Contribution** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

1. **Proposed Funding Changes, FY 2021**

***Complete only if requesting additional funding above FY 2020 level*.** List any new or continuing activities to be funded by requested enhancement in FY 2021. Explain as clearly as possible the basis for the request, including clarifying whether it is a requested increase for an existing program or a proposed new initiative.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Initiative/Activity** | **Purpose** | **Implementation Strategy and Responsible Staff** | **Projected Outcomes (KPI) FY 2021** | **FY 2021 Estimated Resource Commitment** | **FY 2021 City of Richmond****Contribution** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

1. **Submission of Annual Report**

Include if available a copy of the organization’s most recent Annual Report including full financial information. (Include in PDF format as an attachment if possible.)