HUMAN SERVICE FUND (HSF) of Johnson County, Kansas 2022 APPLICATION – SMALL GRANTS POOL United Community Services of Johnson County, Inc (UCS) Applications Due: July 8, 2021, 4:00 p.m. 9001 W. 110th Street, Ste. 100, Overland Park, KS 66210

GRANT SUBMISSION INSTRUCTIONS

- Application Checklist: Submit an electronic copy of each application document to Christina Ashie Guidry, <u>christinag@ucsjoco.org</u>, copying Cathy Goodwin, <u>cathyg@ucsjoco.org</u>. Please ensure your files are named as follows:
 - □ Application: [AGENCY NAME] Application 2022
 - □ Program Budget: [AGENCY NAME] Program Budget 2022
 - □ Board-approved Agency Budget: [AGENCY NAME] Agency Budget 2022
 - □ Agency Standards Form: [AGENCY NAME] Agency Standards 2022
- Submit two (2) hard copies Application with wet signatures, Program Budget, and Board-approved Agency Budget, and one (1) copy of Agency Standards to the UCS office by July 8, 2021 at 4:00 p.m.

APPLICATION, including COVER PAGE and SERVICE STATISTICS:

The executive director or equivalent and an officer of the board of directors must *sign (wet signatures)* the cover page and submit with the application.

List the number of participants served by the program(s) or service, by jurisdiction, for which Human Service Funds are requested. **Define the unit of service** for which data is provided.

PROGRAM AND AGENCY BUDGET: The HSF Program Budget must reflect the program(s) or service(s) for which ATF funding is requested. Submit a copy of your board-approved agency budget as well.

AGENCY STANDARDS and DOCUMENTATION: Attach one copy of documentation as required by the Small Grants Pool Agency Standards (see 2022 Small Grants Pool HSF RFP and Agency Standards form). Assemble attachments in the order of the Agency Standards checklist.

Address completed application to:Christina Ashie Guidry, Director of Resource Allocation
United Community Services of Johnson County, Inc.
9001 W 110th St., Ste 100, Overland Park, KS 66210

Questions may be directed to <u>christinag@ucsjoco.org</u>.

2022 SMALL GRANTS POOL HUMAN SERVICE FUND: COVER PAGE

Legal Name of Agency:			
Address:		_	
Grant Contact and Title:			
Phone Number:	Email:		
Executive Director:	Phone:	Email:	
Mission Statement:			
Funding Request for 2022			
Amount:	Program Name:		
Please describe the use of funds: "Funds from	1 HSF will enable (agency) to	() to achieve ()":	
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Sign below, acknowledging:

- the information contained in this application is accurate and complete,
- the program offers equal access to all clients and prospective clients who could benefit from the program,
- the applicant is in compliance with any applicable nondiscrimination ordinances and/or policies of the municipalities that provide resources to the Human Service Fund,*
- the applicant follows agency standards, to the extent applicable, as outlined on the Small Grants Pool Agency Standards and Documentation form completed with this application.

Print name of Executive Director/CEO	Email	
Signature of Executive Director/CEO	Date	
Print name and office held (for officer of Board)		
Signature of officer, board of directors	Date	

*HSF PARTICIPATING JURISDICTIONS: Johnson County and cities of DeSoto, Edgerton, Gardner, Leawood, Lenexa, Merriam, Mission, Olathe, Overland Park, Prairie Village, Roeland Park, Shawnee, Spring Hill, and Westwood (Contact UCS for information about applicable nondiscrimination ordinances and/or policies.)

AGENCY FINANCIAL INFORMATION

Agency Fisc Year Founde		Calendar	Other	(explain):	
Financial Co	ntact and Title:				
Phone Num	ber:			_ Email:	
Agency's to	tal operating bu	Idget for 2021:			
-	•	financial obligatic yroll, taxes, etc.?	ons	Yes	No, explain:
Does the ag	ency have an e	ndowment?		No	Yes, how much?:
What is the	intent of the er	ndowment funds a	and how a	are earnin	gs from the endowment used? (40 words)
Does the ag	ency have an o	perating reserve?		No	Yes, how much?:
-	omplaints or liti			-	of or involved in any legal issues such as, but not nreatened legal action or complaints?

Is the agency involved in any type of investigation, examination, or audit (other than a standard annual audit) by an outside entity regarding business practices or service delivery?

No Yes, please explain: (100 words)

NARRATIVE

1. Briefly describe the agency, including year founded, area served, and programs offered. Is your organization neighborhood or community-based? What experience does your organization have with obtaining grant funding? (150 words)

2. Provide a clear, detailed description of the program for which funds are requested, including: (400 words)

- o activities and services provided,
- how you work to reduce barriers to service, such as finances, transportation, hours of operation, childcare, and cultural diversity,
- o eligibility criteria for the program, including connection to federal poverty level,
- population and geographic area served, including whether primarily Johnson County residents will be served,
- o identify other organizations providing same/similar services and its geographic service area, and
- how this program will be advertised.

3. How does the program address 2022 HSF funding priorities and support safety net investment components of basic needs, work and income supports, or health (see RFP, pg. 1)? If the program does not primarily serve residents who live with income at or near federal poverty level, how does the program prevent poverty? (250 words)

4. What evidence-based or promising practices serve as the basis for this program? Identify the entity that recognizes or endorses the evidence-based model, or best or promising practices of your program. If none, explain the rationale for program selection/practices. (200 words)

5. Leveraging pooled resources is a critical element of HSF. How does your program engage in innovation and collaboration/coordination with other community organizations to maximize effective use of resources and meet needs of client population? If you provide shelter or housing, how do you participate in the JoCo Continuum of Care on Homelessness and the coordinated entry system? (200 words)

6. Client-based Outcomes and Outputs: Outcomes are the changes resulting from your program, such as the impact, change or value to clients due to their participation; examples include: obtaining and maintaining employment, reducing food insecurity, entry into permanent housing. Outputs reflect services provided, such as clients served, volunteers engaged, resources distributed.

- List at least one proposed outcome for 2022 and describe data or outputs that will be collected to measure achievement of that outcome in semi-annual reporting. (300 words)

7. How does the program benefit local governments by avoiding, deferring, or preventing costs that **might otherwise be incurred?** Provide return on investment (ROI), where possible. (200 words)

8. Wait list: If there is a wait list for the program, on average, how many people per year are on it and how long is their wait? (25 words)

Service Statistics of Program Requesting HSF* Funding

Define the "unit of service" for your program (e.g. one hour of job training, one box of food, one day of after-school care). **One unit of service is:**

If this is an existing program, provide service statistics for 2020 and 2021; all applicants must project service statistics for 2022 and 2023.

*If the HSF supported program receives funds from other sources, the service statistics should include program participants and units of service supported by all funding sources, not just the HSF.

SERVICE STATISTICS	<u>2020</u>	<u>JanJune</u> <u>30, 2021</u>	Projected for 2021 (JanDec.)	Projected 2022	Projected 2023
Total persons served by program for which HSF support is requested:					
Total units of service delivered by program for which HSF support is requested:					

Provide a brief explanation for projected service statistics: (100 words)