

### **Grant Purpose**

The purpose of this program is to consider providing grant funds to non-profit agencies in financial support of on-going projects and services. These grants are funded out of the County's Contributions to Outside Agencies' budget. The application is for programs/projects that are **not** health and human services related.

### **Timeline**

Funding for this category will be considered during the County's annual budget hearings in June 2023.

The deadline for submittal of applications is <u>July 14, 2023.</u> Completed <u>electronic</u> applications will be accepted until **5 p.m. on that day.** The applicants will be evaluated shortly after receipt.

### NOTE:

• Grant applications should be one complete PDF document.

## **Application Naming Convention:**

your organization Other Agency grant 23-24, e.g., Coastal San Luis RCD Other Agency grant 23-24

- No paper copies of the grant application will be accepted.
- Incomplete electronic submittals will not be accepted.

## **Review and Selection Criteria**

Applications will be reviewed and ranked according to how well it addresses the following:

- Local Need;
- Identified funding sources showing the ability to leverage the other funds;
- Organizational ability to leverage the grant funds (if applicable);
- Requirement to obtain a funding public match (if applicable);
- Projected program/project goals, results, and outputs/outcomes;
- Projected program results, outputs/outcomes from prior year's grant (if applicable);
- Program cost compared with number of people served;
- Geographic distribution of services;
- Percentage of requested funding being used for direct services;
- Program/project sustainability with funds granted;
- Collaboration with other community-based agencies and County departments (if applicable).



# **General Application Information**

Programs/projects must be carried out in San Luis Obispo County and serve only San Luis Obispo County residents. Applicants must offer their services to all residents of San Luis Obispo County, regardless of political or religious opinions or affiliations, age, sex, race, color, national origin, marital status, disability, sexual orientation.

All costs associated with the preparation and submission of this application will be borne by the applicant. All applications become the property of the County of San Luis Obispo and will become public information after the submission deadline.

### **Information Submission**

The application should be submitted, as one electronic PDF (see Exhibit 2), in the following order:

#### PROPOSALS SHOULD CONTAIN THE FOLLOWING:

### **COVER SHEET**

Application must have a **COVER SHEET** which clearly identifies:

- 1. Project Title
- 2. Organization/Agency Name
- 3. Executive Director and/or Program Contact Person
- 4. Address
- Phone number
- 6. E-mail address
- 7. Amount of funds being requested
- 8. If applicable, funds received in the prior year (or most recent fiscal year when funds were received)
- 9. A brief (50 words or less) description of proposed project

### **PROGRAM/PROJECT INFORMATION:**

The application must contain the following information:

- 1. Briefly describe your organization and its mission.
- 2. Summarize your program/project by providing a brief description.
- 3. Describe:
  - a. How this program or service is beneficial to County residents?
  - b. How was the local need for this project/program determined?



- c. How does your organization collaborate with County departments or community organizations in providing the identified program or service?
- d. Your organization's ability to build and maintain a high level of collaboration with other community organizations or resources providing the same type of program or service.
- e. How will your organization use and leverage the grant funds?
- 4. What type of experience and knowledge does your organization's staff have that would demonstrate knowledge and understanding of the program or services.
- 5. Describe your organization's capacity to successfully carry out the proposed program or service (i.e., past performance and history of the organization will be considered in order to assess the organization's prospects for achieving its goals and objectives).

### **SCOPE OF WORK OR WORK PLAN**

The following information should be provided in the format shown below.

# FY 2023-24 Scope of Work or Work Plan:

Organization scope of work should answer these questions:

- o What is the program/project goals?
- o How will those goals be achieved including time frame?
- o What is your evaluation mythology for measuring results?

### FY 2022-23 Program Results:

If the applicant has received County funding in prior years, please describe the achievements of the FY 2022-23 to date.



# EXHIBIT A SCOPE OF WORK/WORK PLAN FORMAT

# **Requested Grant Funds in Fiscal Year 2023-24**

Program/Project Summ	nary:		
Goal/Objective	Major Tasks	Timeline	Evaluation
(refer to 1.A above)	(in order to achieve		methodology
(10101 10 1111 100010)	goal)		(refer to 1.C above)
	(refer to 1.B above)		
Program/Project OUTI	PUTS		
Program/Project OUT	COMES		
	nary:		
Goal/Objective	Major Tasks (in order to achieve	Timeline	Evaluation Mythology (refer to 1.C above)
(refer to 1.A above)	goal)		(refer to 1.C above)
	(refer to 1.B above)	_	
	(Telef to 1.D above)		
Program/Project OUTI	PUTS		
0 ,			
Program/Project OUT	COMES		



# SCOPE OF WORK/WORK PLAN EXAMPLE

### **RESULTS**:

A meaningful, measurable result will demonstrate the difference the proposed project makes, or is intended to make, in the lives of the people receiving the service.

**OUTPUTS:** are measurements that show the amount of work performed or services received - e.g., number of patients treated, number of meals served, number of childcare slots created, etc.

Output Measures: 500 people will participate in health screening clinics and receive referrals for

follow-up when indicated.

75 people will be enrolled in the Healthy Families MediCal program to improve

utilization of health services.

XX number of meals will be served to seniors during the year.

**OUTCOMES:** are measurements that show the quality of performance and answer the question: who is better off by doing this project? Here are some examples:

Outcome Measures: At least XX% of smokers who participate in services will successfully

quit using tobacco.

XX% of clients that receive substance abuse treatment services and are

drug and alcohol free one year later.

XX% of program participants in the prevention program will demonstrate their commitment to an alcohol and drug-free lifestyle.



### PROGRAM/PROJECT BUDGET

- A. Provide a program/project budget that includes the following information (format attached):
  - 1. A description of <u>all</u> sources of funding for the proposed program/project, including funding not yet secured or funding from County sources (if applicable).
  - 2. Identifies the part of the proposed program/project the requested funds will be used for.
- B. A one (1) page budget narrative that:
  - 1. Describes individual line items pertaining to "in-kind" funding or funding sources not yet secured.
  - 2. If the requested funds are to be used for a public match that is required by another funding source, identify:
    - a. the other funding source
    - b. amount of match required
    - c. type of match (e.g., 1:1, mandatory public funds only, combination of public/private funds, in-kind)
- C. If your organization is submitting one application for multi-programs/projects, please submit a separate budget for each program/project request.
- D. A current year operating statement for your organization.



# PROGRAM BUDGET REQUEST FORM

		Project Expense	Grant Budget	Other Funding Available*
			Requested	Amount & source
I.	PERSONNEL EXPENSES			
	(associated with the proposed project)			
	total – Personnel Expenses			
II.	OPERATING EXPENSES			
	(associated with the proposed project)			
	Subtotal - Operating Expenses			
III.	INDIRECT @ OF PERSONNEL			
Tot	al Grant Project Expenses			
וטנ	מו שומווג דוטובנג באףכווזפז			

<sup>\*</sup>List in this column all agency funds available to support the project. Indicate with a "@" next to the amount that are in-kind and a "NS" for those not yet secured.



#### **GENERAL SUBMISSION INFORMATION**

- 1. All applications should be clear, concise, and complete. No additional information will be accepted past the **July 14, 2023**, deadline unless specifically requested by the County.
- All applications should be <u>one complete PDF electronic submittal</u>, including the information requested in #3 below. There should not be any separate attachments as part of the grant submittal. Postmarks and hand delivered applications will <u>not</u> be accepted.

### **Application Naming Convention:**

your organization Other Agency grant 23-24, e.g., Coastal San Luis RCD Other Agency grant 23-24

- 3. All applications should also include the following:
  - a) Organizational operating budget.
  - b) Key program personnel (include a short description of their background.)
  - c) Board of Directors of your organization and relevant advisory boards (please include member affiliations.)
  - d) Adopted organization policy or statement on inclusion, diversity, or affirmative action.
  - e) Tax-exempt status documentation, e.g., IRS determination letter.
  - f) A copy (each) of the current status of non-profit organization from Secretary of State and Attorney General Office. These documents can be accessed at the specific agency's web site at <a href="Secretary of State">Secretary of State</a> and <a href="Attorney General's Office">Attorney General's Office</a>.

See **Exhibit 1** for examples of these status reports. Please do not send your organization's Statement of Information.

Grant applications from organizations that do not include this documentation or whose non-profit status is "<u>inactive</u>" or "<u>delinquent</u>" will not be accepted. This requirement does not apply to grant applications from public agency such as a school district, County agency or department.

- 4. Please DO NOT include electronic attachments such as letters of references, brochures, or flyers. If necessary, this information will be requested later.
- 5. All costs associated with the preparation and submission of this application will be borne by the applicant.



- 6. All applications become the property of the County of San Luis Obispo and will become public information after the submission deadline.
- 7. Applications should be <u>submitted electronically (PDF) only format</u> to the following address: <u>AD Admin Grants@co.slo.ca.us</u>

Any questions regarding the RFA or process should be directed to Olena Nagorna of the County Administrative Office at (805) 781-5496.

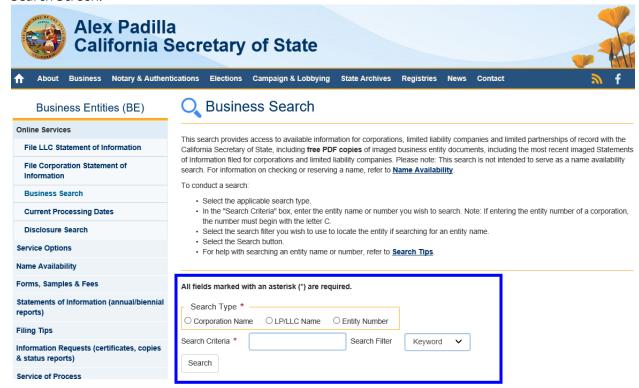


#### **EXHIBIT #1**

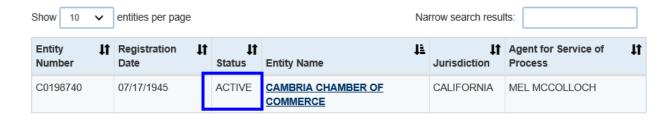
### **SECRETARY OF STATE EXAMPLE**

Please include your organization's information in your electronic submittal.

#### Search Screen:



### Provide a copy of either page:



or



### C0198740 CAMBRIA CHAMBER OF COMMERCE

Registration Date: 07/17/1945 Jurisdiction: CALIFORNIA

 Entity Type:
 DOMESTIC NONPROFIT

 Status:
 ACTIVE

 Agent for Service of Process:
 MEL MCCOLLOCH

2760 MARLBOROUGH CAMBRIA CA 93428

Entity Address: 767 MAIN ST.
CAMBRIA CA 93428
Entity Mailing Address: 767 MAIN ST.
CAMBRIA CA 93428

A Statement of Information is due EVERY ODD-NUMBERED year beginning five months before and through the end of July.

Document Type 11	File Date 1.F	PDF
SI-COMPLETE	05/24/2017	
SI-COMPLETE	06/29/2016	
REGISTRATION	07/17/1945	Image unavailable. Please request paper copy.



## Department of Justice/Office of Attorney General example:

### Search Screen:



#### **Registry Verification Search**

The Registry Verification Search allows you to search and verify whether a charitable organization or fundraiser has complied with the Attorney General's registration and reporting requirements. You can also review records and other public filing that a charitable organization or fundraiser has submitted to the Attorney General's Registry of Charitable Trusts. The Registry's database contains copies of most public filings required to be filed by charitable organizations, charitable trustees and fundraising professionals. This tool allows you to download copies of annual registration renewal forms (RRF-1), copies of IRS Forms 990, raffle reports and other fundraising reports that are in the Registry's database.

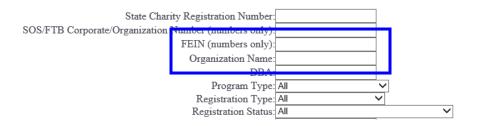
We recommend the following search tips when searching for a charity or fundraiser by name:

- For Organization Name searches, a full name of the organization is not necessary. For example, a search using
  the words "KIDS FOR" will show registrations for organizations whose names start with "KIDS FOR" (e.g., KIDS
  FOR SACRAMENTO and KIDS FOR DOLPHINS).
- An asterisk (\*) may be used as a wildcard. For example, a search using a wildcard \*kids\* will show registration for organizations whose names contain "KIDS".

Also available is a <u>list of charities in good standing</u> with the Registry. A charity is in "good standing" with the Registry when it is current in all its reporting requirements with the Registry. The <u>downloadable text file</u>, generated monthly, is a snapshot of the charities in good standing at the time it is created. Much of the data, including the Registration Status of charitable organizations, may change at any time based on the processing of new filings or other reasons. To download the file, right-click <u>here</u> and select "Save link as" or "Save target as" (depends on your browser) to save it to your device.

To confirm data or status for a given organization, use the query tool below.

Registry Verification Search Tips & Registry and Filing Status Definitions





# Provide a copy of either page:

Search Again

Organization Name	Registration Type	Registration Status	Registration Number	Applicant Number	FEIN	City	State
SOUTH COUNTY VISITOR SERVICES	Charity Registration	Current	CT0193692	1461783	462180142	NIPOMO	CA
1							

or

Organization Name:	SOUTH COUNTY V	JISITOR SERVICES	gistry. IRS FEIN:		462180142
Entity Type:	Public Benefit	ISTI OK SERVICES	SOS/FTB Corporate/Or	3500439	
RCT Registration Num	ber:	CT0193692			
Program Type:		Charity	Registration Type:	Charity Registration	1
Issue Date:		3/29/2013	Renewal Due Date:	5/15/2018	
Registry Status:		Current	Date This Status:	3/29/2013	
Date of Last Renewal:		2/27/2017			
		Mailin	g Address		
Street: 180 S MARY AVENUE					
Street Line 2:					
City, State Zip:		NIPOMO C	CA 93444		
		Annual Renewal Data	Reported to the Registry		
Status of Filing:			Accepted		
Accounting Period Beg	in Date:		1/1/2013		
Accounting Period End	Date:		12/31/2013		
Total Assets:			\$0.00		
Total Revenue:			\$0.00		



### Exhibit #2

# **ELECTRIONIC APPLICATION PDF should contain the following:**

- 1. Cover sheet
- 2. Program/project information maximum 5 pages
- 3. Scope of work using format shown in the RFA
  - a. FY 2023-24
  - b. FY 2022-23 results to date
- 4. Program/Project budget using format shown in RFA
- 5. Organizational operational budget
- 6. Key program personnel
- 7. Board of Directors
- 8. Adopted organization policy or statement on inclusion, diversity, or affirmative action
- 9. Tax-exemption status documentation, e.g., IRS determination letter
- 10. Status of non-profit from both the California Secretary of State and Attorney's General Office