



**City of Chandler
Housing and Human Services Commission**

***General Funds
Funding Criteria and Application Guidelines
2013-2014***

Applications Available: October 26, 2012

Applications Deadline: November 30, 2012

City of Chandler
Neighborhood Resources
Leah Powell, Community Resources & Diversity Manager
480-782-4352
leah.powell@chandleraz.gov
235 S. Arizona Avenue
Chandler, AZ 85225

Table of Contents

Introduction & Background	Page 3
<i>About the HHSC</i>	3
<i>HHSC Members</i>	4
<i>Background</i>	6
<i>2013-2014 Priority Population Groups & Funded Agencies</i>	7
Section 1 – Basic Funding Criteria for All Applicants	Page 8
<i>Application Guidelines for all Applicants</i>	9
<i>General Fund Policies</i>	10
<i>Payment Schedule</i>	11
<i>Agency Tours and Monitoring Policies</i>	12
<i>City of Chandler Neighborhood Resources Staff</i>	13
<i>2012-2013 Allocation Timeline for FY13-14 Funds</i>	14
Section 2 – Human Service Program Funds: General Fund	Page 15
<i>General Fund Priority Population Group Criteria and Key Focus Areas</i>	15
Section 3 – Online Registration	Page 16
<i>e-CImpact Registration Information</i>	16
Section 4 – General Fund Program Application & Guidelines	Page 17
<i>Application Summary Form</i>	17
<i>General Fund Program Application</i>	20
Section 5 – Application Review Process & Evaluation Criteria	Page 28
<i>Review Process</i>	28
<i>Allocation Panel General Fund Program Evaluation Rubric</i>	29
Section 6 – Monitoring & Reporting Requirements for Funded Agencies	Page 32
<i>General Fund Program Mid-Term Report</i>	32
<i>General Fund Program Final Report</i>	34

Introduction

Thank you for your interest in City of Chandler Human Services Funds. These guidelines were designed to help organizations write more effective grant applications. The guidelines provide a greater understanding as to why each question is important to the Housing and Human Services Commission (HHSC), what the HHSC hopes to learn about an organization from a particular question, and how the HHSC will evaluate each section of the grant application.

The guidelines cover each section and question for the City of Chandler's **General Fund Program Application**. Under most sections, there will be a "rationale" to provide insight into the intent of the section. In some cases, examples may be provided to give you some ideas of how to structure your response. These examples are suggestions, not necessarily requirements. They are provided to help you formulate your thoughts.

Organizations must select one priority population area for each application submitted (i.e. Youth, Families in Crisis, Special Populations, and General Fund Capital), and may submit multiple applications for differing programs per priority population area. Detailed guidelines may be found in **Section 1: Basic Funding Criteria for All Applicants**.

***Agency and Program Registration is available starting Tuesday, October 23, 2012.
The deadline for Applications is Friday, November 30, 2012 by 5:00 p.m.***

THE HOUSING & HUMAN SERVICES COMMISSION

The Housing and Human Services Commission (HHSC) is an eleven member Commission that advises the City Council on the operation and development for all City housing projects and on matters relating to the welfare of the City's low- and moderate-income citizens.

The HHSC assesses the human service needs of the community and makes recommendations on the distribution of the annual allocation of City general funds (non-federal) funding for human service agency applicants. In addition, the Commission is responsible for making recommendations to the City Council on the annual allocation of Federal Community Development Block Grant (CDBG) and HOME Investment Partnership funds.

Established in 1998 by Ordinance No. 2857 and amended in 2005 by Ordinance No. 3649, the eleven member Commission serves in an advisory capacity to the City Council and Public Housing Authority Commission on matters affecting the Public Housing program and the Section 8 rental assistance program.

Commissioners are appointed by the Mayor of Chandler and are eligible to serve two, three-year terms. Commissioners must be a qualified elector and a City of Chandler resident for at least one year preceding appointment. Additionally, one member must be a resident of a public housing site and one member must be a resident of the City's redevelopment area.

2011 – 2012 HHSC MEMBERS

Members	Term Expires	Date Appointed
Sharon Rosner	2013	05-24-2007

Scott Powell	2014	02-25-2010
---------------------	-------------	-------------------

Tammy Clow-Kennedy	2014	01-12-2012
---------------------------	-------------	-------------------

Jeff Riggs	2013	05-24-2012
-------------------	-------------	-------------------

Justin Lisonbee, Chair	2014	04-28-2011
-------------------------------	-------------	-------------------

Justin Lisonbee has worked for nearly eight years in various aspects of the management of the CDBG, HOME, and Human Services General Funds with two different municipal agencies. Before leaving the human services field, Justin was the CDBG Program Coordinator for the City of Scottsdale and managed the funding application process. Justin currently works in the Emergency Medical Services field.

Kris Killo, Vice Chair	2013	04-28-2011
-------------------------------	-------------	-------------------

A resident of Chandler since 2001, Kris' interest in serving on the City of Chandler's HHSC is related to her history of working more than 30 years in the field of low-income assisted and moderate-to-middle income affordable housing programs. Recognizing the link between human services and rental and home ownership housing opportunities, Kris believes the HHSC plays a vital role in the funding allocation process and the monitoring and measurement of how well the City is meeting priority needs, strategies and objectives. Kris has a Bachelor of Arts in Social Welfare and a Master's of Science in Gerontology. She also has certifications in Industrial Relations, Real Estate Appraisal, Public Housing Regulations, and Public Housing Management.

Brigita Fody-Landstrom	2013	01-27-2011
-------------------------------	-------------	-------------------

Brigita received her Bachelors in Psychology from the University of California, Irvine and Masters in Maternal and Child Health from The Johns Hopkins University, and brings over 20 years of public health program expertise. Her professional experience includes hands-on roles serving people in the Head Start programs, Medicare programs, child adoption, College teaching, and Medicaid programs. In her current role as a Medicaid professional, Brigita is home-based in Arizona but works across the country developing and implementing health programs to serve the most vulnerable populations. In her current role as Senior Director, Program and Product Development, Brigita is responsible for developing and implementing health and social services programs that serve Maricopa's most vulnerable populations. Brigita brings her passion for serving people as well as her knowledge in public program development to the Commission to serve Chandler's residents.

Louise Moskowitz	2015	01-26-2012
-------------------------	-------------	-------------------

Louise has been with APS almost 30 years and works in APS' statewide educational and low-income outreach programs. She represents APS in the community by facilitating business/education partnerships as it refers to education and workforce readiness. She interacts with advocacy groups and social service agencies as they address issues of energy assistance, homelessness, and affordable housing. Louise received her BA in Human Relations at Pace College in New York City, earned an MA in Organizational Management at University of Phoenix, and received her Advanced Certificate in Corporate Community Relations from The Center for Corporate Citizenship at Boston College.

Raleigh Grady**2015****08-19-2010**

Originally from Kokomo, Indiana, Raleigh Grady served on that City's Family Services Board for over four years and on the Kokomo Planning Commission for over 25 years. Additional social service experience includes serving on the YMCA Board for three years. This is Raleigh's first volunteer experience with the City of Chandler.

Rick Becker**2014****03-22-2012**

Rick is a retired Navy Supply Officer and also worked 15 years for the City of Chandler in Public Works Administration. He currently works at a Chandler senior assisted living facility providing logistical services and serving the residents through various program activities. He has volunteered at various non-profit agencies, has a Bachelor of Science in Business Management, and is an ASU Certified Public Manager.

Timothy Lewis**2015****04-23-2009**

Timothy, a public housing resident for 10 years, is very active in his community. He is a member of the Public Housing Authority Commission (PHAC) where he represents Public Housing Residents. He was also elected by his neighbors to the tenant association known as Tenant Community Builders, a group comprised of public housing residents that want to make a difference in their community. He also participates in the Resident Advisory Board, a resident group that meets once a year to review the Housing Division's Annual Plan Process.

We would also like to recognize additional panel members from other City of Chandler Boards and Commissions and the Community at Large who have served on the HSHC Funding Subcommittees for the last two years.

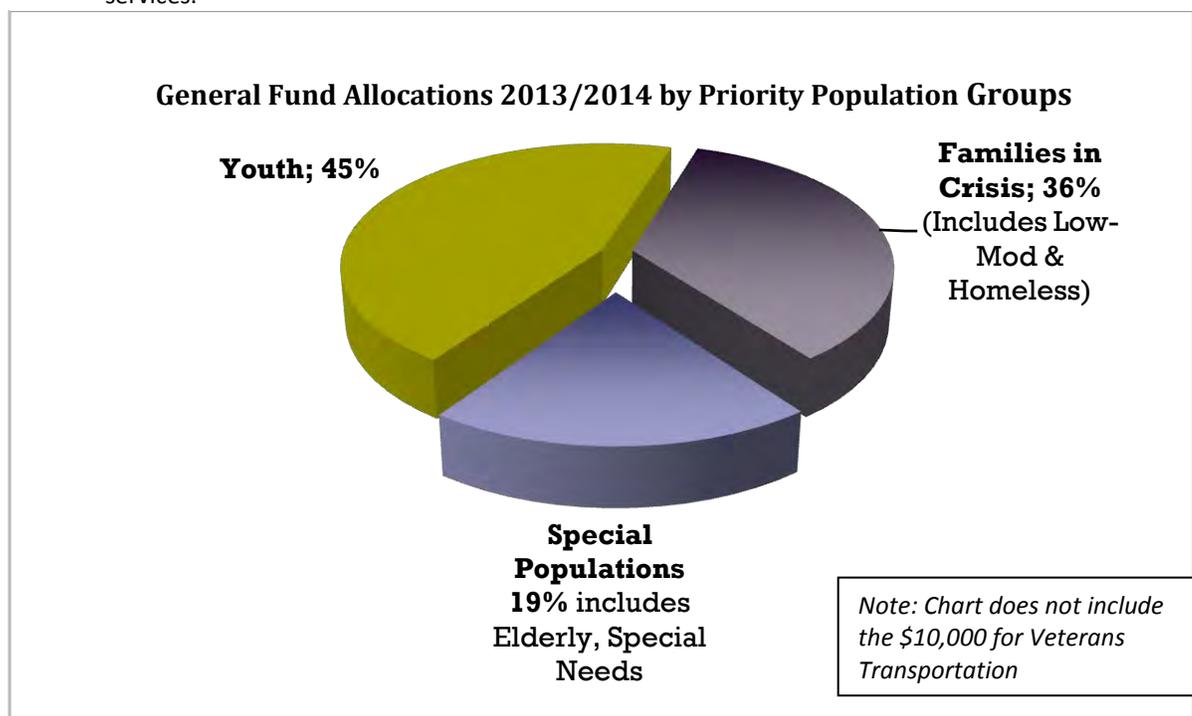
BACKGROUND

Over the past several years, the City has been working to improve its process for allocating funds for human services to maximize the use of the funds and more closely meet the evolving needs of the community.

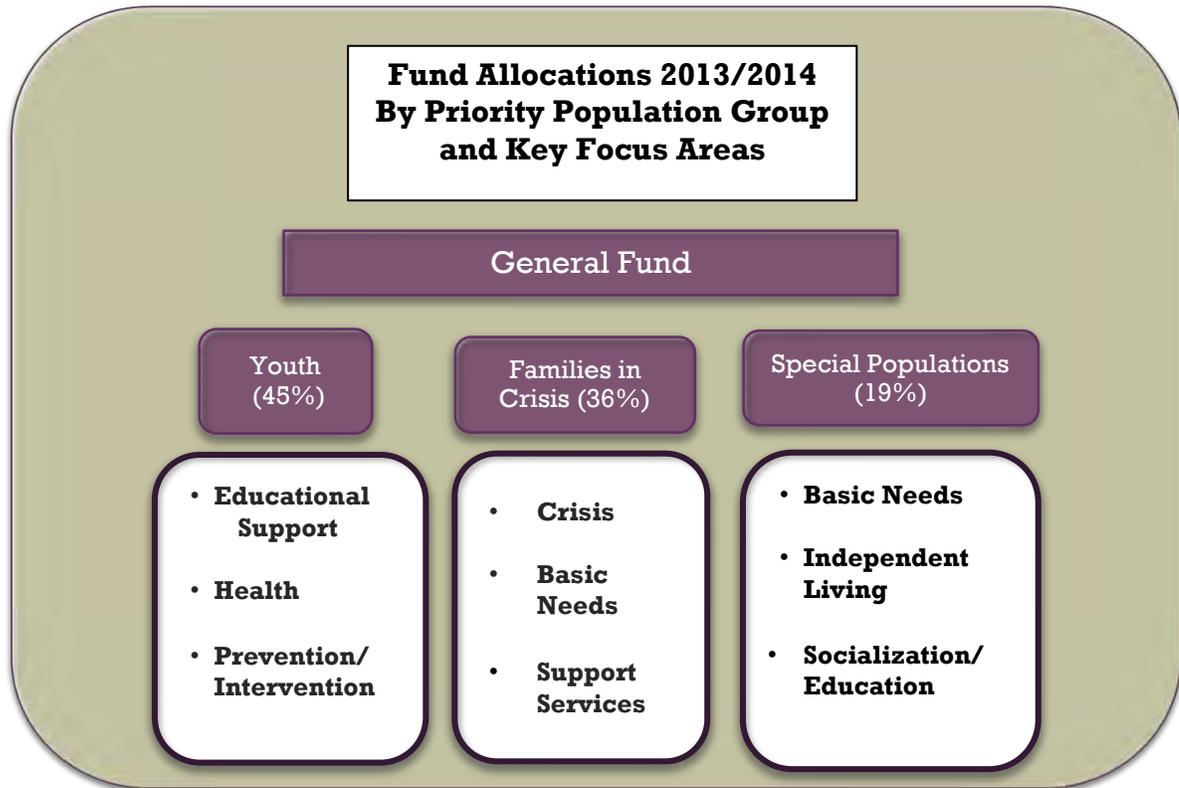
In the fall of 2010, an assessment was conducted to review the existing annual process and procedures for the allocation of funds to social services providers. Based on feedback from Executive Directors of health and human service providers and faith-based organizations, the Housing and Human Services Commission (HHSC), and the Neighborhood Resources Council Subcommittee, recommendations were made to collapse the former six population groups into three general populations in order to more clearly fund the needs of each group. These are Youth, Special Populations, and Families in Crisis.

The Youth Enhancement Program (YEP) created maximum funding limitations as a way of encouraging funding for a greater number of programs rather than allowing a limited number of agencies to receive the majority of the funding. These funding limits have been expanded to all General Fund program allocations. These restrictions encourage programs to seek other funding and not be solely dependent on the City of Chandler. The funding limitation provisions state the following:

- No more than 10% of the total annual amount of General Funds may be allocated to any one program.
- No more than 15% of the total annual amount of General Funds may be allocated to any one agency.
- Exemptions to the above rules include the Senior Meals and Eviction Prevention Programs operated by the City's designated CAP agency, which offer critical safety net services to Chandler residents. This exemption applies regardless of which nonprofit organization is allocated funding for these services.



Key Focus Areas have been developed for each population. A detailed description of population groups and key focus area criteria may be found in **Section 2: Human Service Program Funds**.



In addition to the above population group enhancements, simplifications were made to the application, general funding criteria, and reporting processes.

To aid agencies in determining where they fit into the population groups and guidelines, the following lists the agencies funded in 2012/2013 and the population group they fell under.

2012/2013 FUNDED AGENCIES ORGANIZED BY POPULATION GROUPS

Youth – 45% of General Fund

- A New Leaf - La Mesita Children’s Services
- Association for Supportive Child Care
- Back to School Clothing Drive
- Big Brothers Big Sisters – San Marcos Mentoring
- Boys & Girls Club - A Positive Place for Kids
- Chandler Cultural Foundation – Vision Gallery Kidz Program
- Chandler Education Foundation - Chandler CARE Center and Destination College
- Dignity Health (formerly CHW Foundation) – Children’s Dental Clinic
- ICAN – Prevention Programs
- Junior Achievement of AZ – Biz Town and Learn to Earn
- Si Se Puede –Scholars & Robotics Programs
- Southwest Center for HIV/AIDS Positive Peer Prevention (P3) Program
- Southwest Human Development – Fussy Baby Program
- The Salvation Army - After School Day Camp

Families in Crisis – 36% of General Program Fund

A New Leaf - EMPOWER Program
Catholic Charities East Valley - My Sister's Place
Chandler Christian Community Center - Chandler Food Bank, Case Management, Eviction Prevention and Utility Assistance, and Senior Nutrition
Child Crisis Center - Emergency Shelter, Family Resource Center, Foster Care and Adoption
Chrysalis - Crisis Shelter Program
East Valley Adult Resources RSVP Program
East Valley Jewish Community Center – Financial Assistance
EMPACT – Suicide Prevention Center – Senior Peer Counseling
Friends of the Chandler Public Library - Adult Literacy
Kyrene Family Resource Center
Matthew's Crossing – Food Bank Program
National Advocacy & Training Network – SEEDs Program
One Small Step, The Clothes Cabin
The Salvation Army - Financial Assistance
The United Food Bank - Emergency Supplemental Food

Special Populations– 19% of General Fund

About Care – Support Services
Alzheimer's Association – Chandler Alzheimer's Program
American Service Animal Society – Dogs4Vets Program
Best Buddies Arizona – HS/MS Program
Chandler Gilbert Arc - Independent Living
Foundation for Blind Children – SHARP Program
Recreation and Athletics for the Disabled (RAD) – PAID Program
Southwest Center for HIV/AIDS – Women's Health Empowerment Project

Veterans' Transportation Services - \$10,000 General Fund Grant

American Service Animal Society – Veterans Transportation
Resurrection Street Ministry –Veterans Transportation

Section 1: Basic Funding Criteria for All Applicants

All agencies requesting funding through the City of Chandler's Housing and Human Services Commission under any category (General Fund Program and General Fund Capital), will adhere to the following application criteria:

1. Must be a nonprofit health and human service organization with a 501(c)(3) tax exempt status or a City department.
2. Submit an audit, including management letter, conducted by an independent accounting institution able to render unqualified statements regarding the fiscal status of the organization for three years, except under the following conditions:
 - a. Agencies with budgets under \$250,000 may present a financial review conducted by an independent accounting institution.
 - b. Agencies in existence for less than three years must supply year-end financial statements for their period of operation, including budgeted versus actual figures.

3. No more than 20% of the Agency's total allocated funds will be used for program administration and/or evaluation.
4. One hundred percent (100%) of funds received from the City of Chandler must serve Chandler residents. Funds will be returned if it is found that an agency is not meeting this requirement.
5. Priority will be given to agencies physically based in Chandler, except under the following conditions:
 - a. There is no Chandler-based service provider meeting the identified need; or
 - b. An agency outside of Chandler collaborates with or offers essential services to Chandler-based organizations or residents. In this case, the applicant agency will need to provide documentation (such as a letter of partnership, signed agreement, or memorandum of understanding) that outlines the relationship between the applicant agency and the Chandler-based organization/entity (i.e., school, church, etc.) where services are provided.
6. Agencies will be required to apply for funding each year. Funding for any given year does not guarantee funding for succeeding years.
7. Agencies may apply for both Human Services Program funds and Capital projects. Agencies must select one priority population area for each application, and may submit multiple applications for differing programs per priority population area.
8. Agencies will be required to hold a current insurance policy verifying minimum coverage of Commercial General Liability of \$1,000,000 CSL and Comprehensive Auto Liability \$1,000,000 CSL. Agencies must add the City of Chandler as an additional insured and certificate holder.
9. Agencies shall comply with all applicable Federal, state, and local laws, and with all applicable license and permit requirements.
10. The HHSC has the opportunity to increase or decrease a population funding percentage by no more than 5% during the annual allocation process to respond to urgent needs.

APPLICATION GUIDELINES FOR ALL APPLICANTS

Online Application through e-CImpact: All applications must be submitted online through e-CImpact. The City of Chandler strives to make the Human Services application process available to all interested non-profit agencies that provide human services to Chandler residents.

Agency and Program Registration Online (Required for all agencies): Nonprofit organizations interested in submitting an application must complete a Program Registration Form online. Those agencies that are new to e-CImpact must first complete an Agency Registration Form then a Program Registration Form. Please see Section 3-Online Registration Forms. ***Registration begins Tuesday, October 23, 2012.***

Technical Assistance: At least one agency orientation and one e-CImpact training will be held to assist organizations in understanding the funding criteria, application, evaluation criteria, and monitoring tools. While these orientations are not mandatory, agencies are encouraged to attend.

Late Applications: Agencies will not be able to submit applications after the deadline. Applications that are uploaded and received by the e-CImpact system after the deadline date and time will be considered late and will not be rated, ranked, or receive funding consideration.

Eligibility Reviews: City of Chandler staff will review all submitted applications to ensure they meet the funding criteria, have all required compliance documentation, and that the applications are complete.

Fund Determination: Agencies will self-select the appropriate fund under which their applications will be reviewed, however City of Chandler staff review and ultimately determine the most appropriate fund (i.e., General Fund, CDBG, etc.). Should City staff decide to change the fund area under which an agency has applied, this change will have no effect on the agency's eligibility to receive funding. The changing of a fund category is mainly an administrative function of City staff. Agencies will be notified of any changes.

Incomplete Applications: City of Chandler staff will use their discretion in contacting organizations missing minor information (i.e., a skipped question, no attachments, etc.) and will give organizations a short deadline to respond to a request for completed information. Organizations that do not respond by the set deadline will cause their applications to be ineligible for review by the Housing and Human Services Commission (HHSC). Applications that appear to be more than 5% incomplete will not be eligible for review.

Application Assistance: If you have a question or need clarification regarding your application, you may contact one of the following:

Technical Assistance with e-CImpact	General Application Questions
Mary Beth Lawler Valley of the Sun United Way 602-631-4856 mblawler@vsuw.org	Jeanne Bosarge , Community Resource Assistant City of Chandler 480-782-4358 jeanne.bosarge@chandleraz.gov

Administrative Costs: No more than 20% of the Agency's requested funds will be used for program administration and/or evaluation. Agencies demonstrating a higher level will be automatically reduced to the appropriate level.

GENERAL FUND POLICIES

Maximum Allocation

- No more than 10% of the total annual amount of General Funds may be allocated to any one program.
- No more than 15% of the total annual amount of General Funds may be allocated to any one agency.
- Exemptions to the above rules include the Senior Meals and Eviction Prevention Programs operated by the City's designated CAP agency, which offer critical safety net services to Chandler residents. This exemption applies regardless of which nonprofit organization is allocated funding for these services.

REPORTING GUIDELINES

Organizations receiving funds from the General Fund will be required to complete a Mid-Term report that is due on January 14, 2013, and a Final Report due July 12, 2013. These forms are provided in **Section 6 Monitoring and Reporting Requirements for Funded Agencies**. Reports must be completed

and submitted using the e-CImpact website. The City of Chandler reserves the right to delay the disbursement of funds if reports are not filed by the posted deadlines.

PAYMENT SCHEDULING POLICY

The City of Chandler reserves the right to determine the scheduling of allocated funds on a case-by-case basis. All funds allocated by the City of Chandler must be expended by June 30; no allocated dollars will be eligible to carry over into the next funding cycle year. The following criteria will act as a guide in determining payment schedules:

- Organizations receiving equal to or less than \$7,500 will receive a lump sum payment in July, upon receipt of a completed final report, if funded in the prior year. Organizations or programs new to the City of Chandler funding cycle may receive funds in two installments, one in July and one in January.
- Organizations receiving less than \$25,000 will receive two payments, one in July and one in January. Organizations or programs new to the City of Chandler funding cycle may receive funds in four installments: July, October, January, and April. City of Chandler reserves the right to withhold funds until a completed mid-term and/or final report is received from the organization.
- Organizations receiving \$25,000 or more will receive their allocation divided into four payments in July, October, January, and April. Organizations or programs new to the City of Chandler funding cycle may receive funds on a monthly basis. City of Chandler reserves the right to withhold funds until a completed mid-term and/or final report is received from the organization.
- General Fund capital projects and exempted programs will receive funding on a reimbursement basis.

Payment Schedule Overview

Agencies Receiving Allocations:		July	October		January	April
= < \$7,500 New Orgs. & Programs	Mid-Term Reports Due (Mid-July)	Lump Sum		Final Reports Due (Mid-January)		
		1 st Payment			2 nd Payment	
= < \$25,000 New Orgs. & Programs	1 st Payment			2 nd Payment		
	1 st Payment	2 nd Payment		3 rd Payment	4 th Payment	
> \$25,000 New Orgs. & Programs	1 st Payment	2 nd Payment		3 rd Payment	4 th Payment	
	Monthly	Monthly		Monthly	Monthly	
Exempt programs & General Fund Capital						
	Expense Reimbursement	Expense Reimbursement		Expense Reimbursement	Expense Reimbursement	

Agency Tour Policies – General Fund Program Recipients

Agency Tour Attendees

- Ideally, HHSC and panel volunteers will attend agency tours. However, tours may be conducted by staff only.
- Staff may opt to visit agencies on multiple occasions to complete the Agency Compliance Monitoring Tool.

Agency Tour Requirements

- Organizations receiving a City of Chandler General Fund allocation of over \$50,000 will be required to participate in an Agency Tour and compliance review annually.
- Organizations receiving between \$20,000 and \$49,999 will be required to participate in an Agency Tour every other year, with an annual compliance review.
- Organizations receiving less than \$20,000 will be required to participate in Agency Tours at least once every three years, with an annual compliance review.
- Organizations and/or programs new to the City of Chandler Human Services process will participate in an Agency Tour and compliance review annually.
- Organizations who have reported significant inconsistencies, who have compliance issues, or who have had significant staffing or leadership changes will be required to participate in increased Agency Tours and/or reporting until the issue is resolved.
- Organizations receiving a City of Chandler General Fund Capital allocation of any amount will be required to participate in an Agency Tour and a compliance review annually.

Agency Presentation and Tour Goals

- Educate City of Chandler staff, HHSC and volunteers on the needs of the community and specific agency operations, successes, and challenges.
- Provide the City of Chandler with an opportunity to ensure that the City's allocated dollars are being invested in the manner stated in the agency's application.
- Ensure that Chandler-funded agencies are in compliance with the City of Chandler funding contract.
- Provide support and direction to agencies, both to agencies working from a strong base of operations and those demonstrating significant concerns or areas of needed improvement.

Agency Tour Observations

- Should City staff, HHSC, and volunteers identify significant concerns or areas of needed improvement, or if an agency is rated "Below Expectations" for the presentation and tour, the following process will occur:
 - City of Chandler staff will notify the agency director by phone of the significant findings and follow up with a written report outlining the concerns.
 - City of Chandler staff will meet with the agency director to map out next steps and a timeline to rectify the areas of concern.
 - If no forward movement towards rectifying the concerns is made by the timeline drafted, the City of Chandler may withhold allocated funds until the situations are addressed to their satisfaction.

Agency Presentation and Tour Scheduling Process

- City of Chandler staff will schedule a mutually agreeable time for the Agency Presentations and Tours.
- Tours are required to be of the Chandler-funded program(s) as they are being provided, unless extenuating circumstances prohibit the observation of these programs (i.e., counseling programs with client confidentiality, etc.).
- Total time for the presentation and tour should be approximately 1 ½ to 2 hours. A preferred agenda is provided to agencies to follow.
- Approximately 3 to 5 HHSC and panel volunteers may attend the presentation and tour, along with City of Chandler staff. Staff will inform the agency in advance the number of people attending.

Client Speakers

- Should the agency decide to invite a client to speak directly to tour participants, a signed informed consent form from the client is highly recommended.

During and After the Presentation and Tour

- HHSC and volunteer panelists will take notes and ask questions throughout the presentation and tour and will rate the tour as either “Meets Expectations, Exceeds Expectations, or Below Expectations.”
- A written follow up report will be provided to each agency outlining strengths, areas of improvement or concern, recommendations, and next steps.

CITY OF CHANDLER NEIGHBORHOOD RESOURCES STAFF

Jennifer Morrison
Director

jennifer.morrison@chandleraz.gov
480-782-4347

Leah Powell
Community Resources & Diversity Manager

leah.powell@chandleraz.gov
480-782-4352

Barbara Bellamy
CDBG Program Supervisor

barbara.bellamy@chandleraz.gov
480-782-4353

Jeanne Vega
Community Development Coordinator

jeanne.vega@chandleraz.gov
480-782-4349

Jeanne Bosarge
Community Resource Assistant

jeanne.bosarge@chandleraz.gov
480-782-4358

Juilian Hardy
Temporary Clerk

Juilian.hardy@chandleraz.gov
480-782-4323

FY 2012 – 2013 TIMELINE

October 23, 2012	Agency Orientation & Open Registration
October 25, 2012	e-CImpact Training
October 26, 2012	Applications available online
November 30, 2012	Deadline for Application Submittal 5:00 p.m.
December, 2012	Application Eligibility Reviews by Staff
January 14, 2013	Deadline: FY12/13 Mid-Term Report
January 23, 2013	HHSC Orientation & Team Assignments
February 4-8, 2013	HHSC Subcommittee Meetings
February 13th	Questions delivered to agencies via email
February 21, 2013	Deadline: Agency Responses to HHSC Questions via eCImpact
March/April 2013	HHSC finalizes funding recommendations CDBG Recommendations made to City Council Study Group
April 3, 2013	HHSC Public Hearing for CDBG and HOME Annual Plan and Final Recommendations
May 9, 2013	Mayor and City Council approve CDBG and HOME funding recommendations
June, 2013	City Council approves General Funds Allocations (contingent upon approval of the City Council budget)
July, 2013	General Funds & CDBG Funds available (contingent upon approval by City Council of City budget)

Section 2: Human Service Program Funds: General Fund

GENERAL FUND PRIORITY POPULATION GROUP CRITERIA AND KEY FOCUS AREAS

Youth

Percent of General Funds: 45%

Applications submitted under this priority will fund diverse and various programs to provide positive activities for Chandler youth at all age levels. Priority will be given to programs that address the following Key Focus Areas:

- **Educational Support:** programs that focus on academic achievement and support such as technology learning, tutoring, mentoring, and student leadership.
- **Health:** programs that provide basic health and nutrition services for children and youth that support physical, behavioral and mental health, and prevent childhood obesity.
- **Prevention/Intervention:** programs that support healthy social development through the prevention of violence and gang activity, substance abuse, teen pregnancy, and other risk behaviors.

Families in Crisis

Percent of General Funds: 36%

Applications submitted under this priority include services that promote strengthening the capacities of low- to moderate-income individuals and families to stabilize a crisis and move toward self-sufficiency. Priority will be given to programs that address the following Key Focus Areas:

- **Crisis:**
 - **Emergency Intervention:** programs that support families and children in crisis due to child abuse, domestic violence, and/or behavioral health issues such as substance abuse and mental health.
 - **Temporary Assistance:** programs that provide temporary financial assistance (utilities, rent, mortgage) and support for individuals in accessing additional community resources.
- **Basic Needs:** programs that provide access to food and other basic needs, including clothing and hygiene, to ensure basic physical health needs are met.
- **Support Services:** programs that provide employment assistance and/or adult education including basic education, literacy, English as a Second Language, financial literacy, workforce skills training and job search skills support. This priority area also includes programs that help families avert a crisis through supportive services including affordable child care and transportation.

Special Populations

Percent of General Funds: 19%

Applications submitted under this priority include services to support children and adults with disabilities, the elderly, and veterans. Priority will be given to programs that address the following Key Focus Areas:

- **Basic Needs:** programs that support basic needs including health-related programs (such as access to prescription drugs and Alzheimer's support) and programs that provide transportation for the elderly and disabled so that they can perform errands that support independent living.
- **Independent Living:** programs that allow seniors to age safely "in place" and persons with disabilities to live independently, such as caregiver respite and support, home-delivered and/or congregate meals and nutrition programs, and supportive programs for grandparents raising grandchildren.
- **Socialization & Education:** Programs that offer socialization, recreation, and educational opportunities to seniors or children and adults with disabilities to combat depression, maintain or improve functional living skills, aid in workforce readiness, improve physical health, or enhance quality of life.

Veterans' Transportation Services

\$10,000 General Fund Grant

- Programs that provide transportation for veterans to veterans' service centers or other needed locales for low-income veterans residing in Chandler.

Section 3 – Online Registration

Agency Registration and Program Registration forms to be completed in e-CImpact.

Online registration is required of all applicants. The Program Registration form must be completed by all agencies *before* you can begin the Application process. The online Agency Registration Form is only required for new e-CImpact users.

I. Agency Registration Form:

1. **Is your organization a 501(c)(3)?**
2. **Do you have a 501(c) IRS Tax-Exempt Determination Letter?**
3. **Agency Name:**
4. **Agency Contact Name**
5. **Agency Contact Title:**
6. **Email Address:** Agency Contact's email address
7. **Address:**
8. **Phone Number:**
9. **Fax Number:**

II. Program Registration Form:

1. **Name of Program:**
2. **Program Contact Name**
3. **Program Contact Number:**
4. **Program Contact Email:**
5. **Which of these categories best describes this program?** Youth, Families in Crisis, Special Populations, Veterans, or General Fund Capital
6. **Is your program request for a religious program?**
7. **Does the program serve Chandler residents?**

Process for Logging into e-CImpact if you are an agency already in the system:

To access the online registration form, type the URL of <https://agency.e-cimpact.com> in the address field at the top of your browser. The Login Page will appear. This website is confidential and therefore requires a username and password. *Please note that if you already have access to the system through another process your username and password have not been reset and are the same as the most recent funding cycle in which you participated.*

Organization Code: An Organization Code is needed to log into e-CImpact. For all applicants, the Organization Code is **03040F**.

Username: All users with access to the online application will be assigned a username.

Password: All users with access to the online application will be assigned a temporary password. Once you have filled in the required login information, click on [Sign in to our Secure Server](#) to enter the application.

Once signed in click on the **Register for City of Chandler 2013 General Fund Application** link on the left to start your registration process.

Process for Logging into e-CImpact if you are new to the system:

To access the online registration form and you are not in the system, type the URL of <https://agency.e-cimpact.com/login.aspx?org=03040F> in the address field at the top of your browser. Click to add yourself as a Brand New Agency, follow the field prompts. There are over 2000 agencies currently in the system. If you are unaware if you are in the system please contact Mary Beth Lawler to inquire what method you should log in with.

Once signed in click on the **Register for City of Chandler 2013 General Fund Application** link on the left to start your registration process.

For e-CImpact technical assistance, please contact:

*Mary Beth Lawler
Valley of the Sun United Way
1515 E. Osborn Road
Phoenix, AZ 85014
602-631-4856
Fax: 602.776.3356
mblawler@vsuw.org*

Section 4 – General Fund Program Application & Guidelines

Part I: General Fund Application Summary: *Both Program Funding and Capital funding*

The Application Summary section is the same for all funding applications. NOTE: Please make sure the primary address listed in the profile section is where you want the City of Chandler correspondence to be received.

BASIC CONTACT INFORMATION:

- 1. Agency Name:**
- 2. Primary Address:** Enter the main address of your non-profit organization in which you would like to receive correspondence from the City of Chandler
- 3. Agency Contact Name:**
- 4. Agency Contact Title:**
- 5. Agency Contact Email:**
- 6. Grant Contact Name:**
- 7. Grant Contact Title:**
- 8. Grant Contact Email, Address & Phone:**
- 9. Agency Description:** Give a brief description of your non-profit organization (250 characters)
- 10. Agency EIN:**
- 11. Agency Website:**
- 12. Type of Organization: Choose from the drop down menu (nonprofit or government).**
- 13. Are you a “Faith-Based” agency?** (A faith-based agency is defined as a religious organization providing social services, but cannot use funds for worship, religious instruction, or proselytization.)

AGENCY BACKGROUND INFORMATION:

Rationale: *This section helps to provide a general overview of your agency's history and current status. Your response should help build a context for your program request.*

Agency Description:

14. **Summarize your organization's history, mission, and goals.** Provide a brief history of your organization. Include the year founded, your agency's mission, and broad, overarching goals. (2,000 characters)

15. **Outline your agency's current range of services and activities and highlight recent accomplishments.** Provide a brief description of the overall services of your agency. Discuss recent awards, evaluation results, service outcomes, or other information that illustrates your agency's strengths. (2,000 characters)

ORGANIZATION CAPACITY:

RATIONALE: *This section provides a snapshot of the agency's capacity based on board member involvement, staff capacity, and volunteers. The section also provides an opportunity to identify the agency's strategic direction for the near future as well as challenges/changes/opportunities the agency may be facing.*

Board of Directors Information:

16. **Number of positions on the Board of Directors when full.**
17. **Number of meetings per year.**
18. **Board attendance: please provide the percentage of board members who attend regular meetings over the past year (or past 3 meetings if meeting annually).**
19. **Number of board members who live and or work in Chandler.**
20. **How long are board member terms? Provide a short answer describing board terms.** (500 characters)
21. **Describe the board's engagement and support of the organization.** (500 characters)

Planning and Capacity:

22. **Does your agency have a strategic plan or five year plan?**
23. **When was the plan adopted?**
24. **Describe briefly the key goals of your organization's plan. Describe any challenges and/or opportunities facing the organization in the next three to five years.** Provide a brief narrative answer. (2,000 characters)
25. **What is the agency doing to address any significant operational changes?** (500 characters)
26. **Describe how the agency is addressing Succession Planning.** (500 characters)
27. **Number of part-time employees:**
28. **Number of full-time employees:**
29. **Number of volunteers utilized annually:**

AGENCY BUDGET:

RATIONALE: *The agency budget gives information about the size/scope of the agency, the diversity of revenue sources, and agency expenses. This helps provide context for the program that is being discussed in the application and the program request. The clarity and accuracy of the budget is also an indicator of the fiscal capacity of the organization.*

Enter total approved Revenue and Expenses in the left side column for your entire organization for FY12/13. Include the City of Chandler allocation if you received one. To enter information for items listed with an underline, click on the title. This will open a new screen, which allows you to add items under that category.

Enter total proposed Revenue and Expenses in the right side column for your entire organization for FY13/14. Include the City of Chandler application requested amount. To enter information for items listed with an underline, click on the title. This will open a new screen, which allows you to add items under that category.

Revenues	Current Agency Budget 2012-2013	Proposed Agency Budget 2013-2014
1. Gov. Funding – Chandler [?]		
2. <u>Gov. Funding – Other Cities</u>		
3. <u>Gov. Funding – County</u>		
4. <u>Gov. Funding – State</u>		
5. <u>Gov. Funding – Federal</u>		
6. <u>Contributions/Donations</u>		
7. <u>Special Events/Fundraising</u>		
8. <u>Legacies/Bequests</u>		
9. <u>Foundation Support</u>		
10. <u>Service Fees & Reimbursements</u>		
11. <u>Investment Income</u>		
12. <u>In-Kind Support</u>		
13. <u>Volunteers</u>		
14. <u>Other</u>		
Total		

Tip

- **Make sure to include all FY13-14 funds requested from City of Chandler in this column.**

Expenses	Current Agency Budget 2012-2013	Proposed Agency Budget 2013-2014	Percentage
15. <u>Salaries</u>			
16. <u>Employee Benefits & Taxes</u>			
17. <u>Employee Education & Training</u>			
18. <u>Professional Fees & Contracts</u>			
19. <u>Specific Assistance for Individuals</u>			
20. <u>Communications (phone, fax, modem, postage)</u>			
21. <u>Supplies/Equipment Rental & Maintenance</u>			

22. <u>Occupancy (rent, utilities, building and grounds)</u>			
23. <u>Advertising/Printing & Publications</u>			
24. <u>Travel/Meetings/Conferences</u>			
25. <u>Membership Dues/Support to Affiliate Org.</u>			
26. <u>Evaluation</u>			
27. <u>Non-Payroll Insurance</u>			
28. <u>In-Kind Expense</u>			
29. <u>Other Expenses</u>			
Total			

Surplus/Deficit	Current Agency Budget 2012-2013
30. Surplus/Deficit	

Tip

- *In the chart above, if line 30 has a positive or negative number, you must explain this difference in #31 below, and how the agency will address this surplus or deficit.*

31. Please explain any surplus or deficit. (200 characters)
32. What percentage of total revenues are Chandler funds? (100 characters)
33. Agency Budget Narrative. Please address any significant budget issues with the agency that may impact the proposed program(s) if any. (1,500 characters)

Part II: General Fund Program Application

PROGRAM OVERVIEW:

401. Name of Program:
402. Program Description: Provide a description of the program including general purpose and population served. (1000 characters)
403. Primary Program Physical Address:
404. Provide target areas of the proposed program: Provide a brief description of the target area of the program using boundaries and/or zip codes. (500 characters)
405. Program Contact Name:
406. Program Contact Number:
407. Program Contact Email:
408. Amount of Funding Requested for FY 13/14:
409. Total Program Budget for FY13/14:
410. If the City of Chandler is unable to fund your program at the full request, what is the amount of funding you will accept to provide program services? Enter a dollar amount and provide a narrative explanation if needed. (250 characters)
411. How many years has this program been in existence?
412. How many years has this program been in existence in Chandler?

PROGRAM PRIORITY POPULATION GROUP:

Select the population group you are applying under: Choose from a drop down menu. Choices will include:

- Youth
- Families in Crisis
- Special Populations (People with Disabilities, Elderly, and Veterans' Transportation)
- General Fund Capital

APPLICATION NARRATIVE:

Rationale: *The application narrative section provides a thorough description of the program with specific details. Responses that address all of the questions illustrate a comprehensive program model. Based on this section, reviewers should be able to visualize clearly how the program works and relates to the needs of the target population.*

413. Identify the program's target population(s). Explain the issue or need addressed and any changes or trends you have observed in recent years; please include data to support your claim. (2,000 characters)

Provide a summary of the plan for the program or project request including the following:

414. Describe the goals of the program. (1000 characters)

415. List your program objectives. (1000 characters)

416. How do the proposed services accomplish the goals of your organization? (1000 characters)

417. Explain the activities. (1000 characters)

418. Detail the timeline for your plan. (1000 characters)

Tips

- **Goals** should be a one or two-sentence statement that describes the desired condition of well-being for the program's target population and/or conveys the overall purpose of the program requesting funding.
- **Objectives** are the "sub-goals" that the program is working on this year and may include specific measurements (i.e. numbers to be served).
- **How Services Accomplish Program Goals:** This should refer to your strategic plan, 5 year plan and/or mission statement.
- **Activities** refer to the specific tasks that need to be completed. This may include classes, sessions, projects, etc. Provide a brief description of these components.
- **Timeline** should include any chronological events, dates, etc. that provide an understanding of the flow of the project throughout the year.

Example: ABC Financial Literacy Program

Goal: The overall goal of the ABC Program is to increase financial literacy and financial security among low- to moderate-income women in our community.

Objectives: In FY 13/14, the ABC Program will work toward this goal through the following objectives:

1. Work with local financial institutions and community organizations to recruit, screen and train 50 financial literacy mentors.
2. Provide group financial education and individual financial mentoring for 100 low-to-moderate women.

Activities:

- **Financial Literacy Classes:** The program will provide 4, 9-week financial literacy sessions serving 25 participants per class. The ABC Financial Literacy Program is a research-based curriculum that incorporates skills on basic financial terms, budgeting for life, savings and investment products geared toward individuals with little previous financial experience.
- **One on One Banking Mentoring:** Utilizing experienced mentors with financial backgrounds, the ABC Program matches participants with a mentor who provides one-to-one financial assessments and supports the participant in implementing a personal financial plan.
- **Timeline:** The ABC Financial Literacy Program runs throughout the year with new classes starting quarterly in January, April, July and October. Participants are matched with a mentor who commits to providing support for a minimum of 6 months.

419. Explain why the organization is approaching the issue/need in this way. Highlight best practices or innovations, short-term, and/or long-term benefits to the participants and/or the community.

Tips

- *Address this section in terms of the needs of the target population rather than the needs of the agency providing the service.*
- *If your program has been identified as a best practice or the program delivery model is a best practice, explain the practice, provide evidence based information, including sources cited.*
- *If the program is not based on a specific best practice, explain why the organization chose to use this model and highlight the agency's unique ability to provide this service effectively.*

420. Explain exactly how City of Chandler funds will be used. Provide specific details on the types of expenses this funding will cover (i.e. staff time, program materials, etc.) (1,500 characters)

PROGRAM EVALUATION

Rationale: *The evaluation section provides quantitative information about the levels of service provided by the program, as well as information about how the agency intends to measure the quality of the program. The response should align clearly with the proposed goals, objectives, and activities of the program.*

In this section, applicants will be asked to identify the unit(s) of service and unduplicated clients for the proposed activity. Applicants will be allowed to select more than one unit of service and client base if applicable to their program. The units of service choices were adapted from the units of service definitions that were entered by agencies during the last application process. If you do not see an applicable unit of service, please enter other and you will be able to define the unit separately. If at all possible, please utilize the choices listed as this will support the data reporting ability of the City of Chandler.

421. UNDUPLICATED CLIENTS

	Total Clients to be Served by the Program	Total City of Chandler Clients to be Served by the Program	Total Clients to be Served with City of Chandler Funds
Unduplicated Clients			
Total			

Tip:

- *The Unduplicated Clients and Units of Service numbers do not have to match.*

422. UNITS OF SERVICE (UNDUPLICATED)

	Total Units of Service to be provided by the Program	Total Units of Service to be provided to City of Chandler clients	Total Units of Service provided with City of Chandler Funds
1 - Units of Service (drop down list)			
2 - Units of Service (drop down list)			
3 - Units of Service (drop down list)			
Total			

Drop Down List of Choices:

- One client contact
- One bed night or shelter night
- One volunteer service hour (adult literacy)
- One hour of support for program participant (independent living)
- One hour of direct service to client/program use
- One complete developmental screening service (child)
- One period of substance abuse crisis services (10-23 hours)
- One client intake
- One case management
- One hour of legal time
- One home repaired
- One food box
- One item of clothing
- One unit of emergency assistance (utilities, rent, case management, counseling, other)
- Other _____

423. If you need to provide more details for the clients to be assisted with the proposed activity, please explain. (optional). (500 characters maximum)

424. Please select Unduplicated Client Base for the proposed activity (may select more than one).

- One client (youth)
- One client (adult)
- One family
- One Chandler household

425. What are the eligibility criteria for Chandler residents to receive your services? Please also list any documents required from clients for eligibility purposes. (1,500 characters)

426. The City of Chandler application guidelines outlines Key Focus Areas under the General Fund Priority Population Group Criteria. Explain how this program addresses one or more of these Key Focus Areas under your identified priority population group. (2,000 characters)

427. Which other agencies in the City of Chandler or adjacent communities provide similar services and how are you cooperating with them? (2,000 characters)

Tip: The response to this question should help clarify how the proposed program leverages existing partnerships and resources, while avoiding duplication of services and meeting a unique need.

428. Describe collaborative efforts with other nonprofit, for-profit, and/or governmental agencies that play a specific role in this program. (2,000 characters) Please provide documentation in the form of a letter documenting partnership or other signed agreement. (This will be a required attachment in the Application Attachment section in e-CImpact.)

Tip: Rather than a long list of partners, this response should identify key partners that support the program and provide detail about specific tasks, program activities, or resources made available through the partnership.

429. Please describe how your request differs from or builds on these efforts. (1,000 characters)

430. Quality Assurance: The City of Chandler values high quality programs that benefit the lives of our residents. Describe the service indicators the agency utilizes to measure the quality of the unit of service you are providing. Include information on how the service indicators support your objectives. (1000 characters)

Examples:

- The FDA's nutritional guidelines are utilized to ensure food boxes contain healthy food.
- Clients requesting utility or rental assistance meet with a case manager to discuss steps to self-sufficiency.
- National recreation standards are utilized to ensure programs are safe and engaging.
- Successful completion of class projects are tracked and evaluated before allowing students to advance to the next class or level.
- The child care agency is accredited by XYZ Agency and monitor for 120 items on an annual basis. (If using accreditation as a service indicator, include information on the standards met to receive the accreditation.)

431. How do you ensure safety? Do you require training or certification? (For example, do vehicle drivers have to obtain a specific driver's license? Does any employee working with food have a Food Handler's Card from Maricopa County?) (500 characters)

432. Outreach: Please describe any outreach efforts you make in the community. Include information on how your board and other community partners are included in your outreach. (2,000 characters)

Part III: Demographic Data

Enter actual numbers of persons served with Chandler funds in FY 12/13 and projected numbers of persons to be served with Chandler funds for FY 13/14 in the categories of gender, age, race/ethnicity, percent disabled, and household income.

Gender of Persons Served	Actual FY2012/2013	Projected FY2013/2014
Females		
Males		
Unknown		
Total		

Age of Persons Served	Actual FY2012/2013	Projected FY2013/2014
0 – 6		
7 – 13		
14 – 18		
19 – 30		
31 – 49		
50 – 62		
63 – 74		
75 – 84		
85+		
Unknown		
Total		

Race/Ethnicity of Persons Served	Actual FY2012/2013	Projected FY2013/2014
White		
Black/African American		
Asian		
American Indian/Alaskan Native		
Native Hawaiian/Other Pacific Islander		
American Indian/Alaskan Native & White		
Asian & White		
Black/African American and White		
Amer. Indian/Alaskan Native & Black/African Amer.		
Asian and Native Hawaiian/Other Pacific Islander		
Other Multi-Racial		
Total		

Hispanic

Race/Ethnicity of Hispanic Persons Served	Actual FY2012/2013	Projected FY2013/2014
White		
Black/African American		
Asian		
American Indian/Alaskan Native		
Native Hawaiian/Other Pacific Islander		
American Indian/Alaskan Native & White		
Asian & White		
Black/African American and White		
Amer. Indian/Alaskan Native & Black/African Amer.		
Asian and Native Hawaiian/Other Pacific Islander		
Other Multi-Racial		
Total		

Other Populations	Actual FY2012/2013	Projected FY2013/2014
1. Disabled		
2. Veterans		
3. Homeless		

Income Level of Persons Served	Actual FY2012/2013	Projected FY2013/2014
Extremely Low (0-30% of Median Income)		
Low (31% - 50% of Median Income)		
Moderate (51%-80% of Median Income)		
Non-Low Moderate (81% + of Median Income)		
Unknown		
Total		

Part IV: Detailed Program Budget/Narrative

Enter total projected Revenue and Expenses in the left side column for your requested program for FY 13/14. Indicate the status of each revenue source by entering them in the appropriate column entitled "Secured" or "Pending". To enter information for items listed with an underline, click on the title. This will open a drop down screen, which allows you to add items under that category.

REMINDER: Please verify that the Revenue and Expense columns TOTALS match. (The budget should not show a surplus or deficit.)

Revenues

Tip: [?] List the funding by secured or pending status in one column only.

	Total Program Funding FY12/13	Revenue Status (Secured) [?]	Revenue Status (Pending) [?]
1. <u>Gov. Funding – Chandler</u>			
2. <u>Gov. Funding – Other Cities</u>			
3. <u>Gov. Funding – County</u>			
4. <u>Gov. Funding – State</u>			
5. <u>Gov. Funding – Federal</u>			
6. <u>Contributions / Donations</u>			
7. <u>Special Events / Fundraising</u>			
8. <u>Legacies / Bequests</u>			
9. <u>Foundation Support</u>			
10. <u>Service Fees & Reimbursements</u>			
11. <u>Investment Income</u>			
12. <u>In-Kind Support</u>			
13. <u>Volunteers</u>			
14. <u>Others</u>			
Total			

Expenses

	Total Program Budget FY12-13	Chandler Funding	Other Resources
15. <u>Salaries</u>			
16. <u>Employee Benefits & Taxes</u>			
17. <u>Employee Education & Training</u>			
18. <u>Professional Fees & Contracts</u>			
19. <u>Specific Assistance for Individuals</u>			
20. <u>Communications (phone, fax, modem, postage)</u>			
21. <u>Supplies/Equipment Rental & Maintenance</u>			
22. <u>Occupancy (rent, utilities, building and grounds)</u>			
23. <u>Advertising/Printing & Publications</u>			
24. <u>Travel/Meetings/Conferences</u>			
25. <u>Membership Dues/Support to Affiliate Org.</u>			
26. <u>Evaluation</u>			
27. <u>Non-Payroll Insurance</u>			
28. <u>In-Kind Expense</u>			
29. <u>Other Expenses</u>			
Total			
	Total Program Budget FY12-13		
City of Chandler % of Projected Revenue			
City of Chandler % of Projected Budget			

Surplus/Deficit	
30. Surplus/Deficit	

Tip

- *In the chart above, if line 30 has a positive or negative number, you must explain this difference in #433 below, and how the agency will address this surplus or deficit.*

433. Please explain any budget surplus or deficit: (200 characters)

434. Program Budget Narrative: Please address any significant budget issues with the agency that may impact the proposed program(s) if any. (1,500 characters)

Part V: Application Attachments

The following documents are all required to complete your application in e-CImpact. If a document is not applicable, then please state on a piece of paper “not applicable” and submit that as your attachment.

Compliance:

- 501 (c) 3 letter
- Current Board Roster
- Most Recent Financial Statements (audited if applicable)
- Most recent Audit Management Letter (if applicable)
- Certificate of Good Standing from the Corporation Commission
- Incorporation Documents

Additional Information:

- Letter(s) documenting partnership(s), memorandum of understanding or other signed agreement with identified collaborating agencies that play a specific role in proposed program.
- Agency Organizational Chart that shows how the program fits into the organization.
- Map of project area

Application deadline is Friday, November 30, 2012 by 5:00 p.m.

Section 5 – Application Review Process & Evaluation Criteria

- All applications will be initially reviewed by City staff for eligibility, completeness, and feasibility.
- Applications that are deemed 5% incomplete, ineligible, or not feasible will not be considered for funding and will not be forwarded to the Housing and Human Services Commission (HHSC).
- The HHSC is provided the applications, mid-term reports, and any summaries provided by staff.
- The HHSC will review, evaluate, issue request for clarification, and score each application based on the criteria outlined in this manual. Additional questions, if any, will be distributed to agencies to address via email.
- From the application ranking, the HHSC will develop funding recommendations and forward their recommendations to the City Council.

GENERAL FUND PROGRAM APPLICATION EVALUATION RUBRIC

Organization Name			
Program Name			
Reviewed By:			
Funding Request:	\$	Continuation Project?	Circle: Yes No

Rating Guidelines:

- **Excellent**— Specific and comprehensive. Complete, detailed and clearly articulated information that addresses each component of the section/question/criteria. Well-conceived and thoroughly developed ideas that give a clear picture of the organization or program.
- **Good**—Thorough response that addresses each component of the criteria. Additional detail in some areas could have provided further clarity about the organization and/or program.
- **Average**— General but sufficient detail. Questions/criteria are met, but some areas are not fully explained and/or questions remain. Some minor inconsistencies or weaknesses.
- **Fair**—Sketchy and non-specific. Most questions/criteria are minimally met, but limited information does not provide clear response to the question/criteria. Lacks focus and detail.
- **Poor**—Does not answer the question/criteria, fails to provide information, provides inaccurate information, or provides information that requires substantial clarification as to how the criteria are met.

Section I	Poor	Fair	Average	Good	Excellent
Part I: Application Summary/Agency Profile					
Agency Description: How well has the applicant described the organization? Are the history, mission and general goals included?	1	2	3	4	5
Agency Description: Did the agency give an overview of the range of services provided and any recent accomplishments?	1	3	3	4	5
Organizational Capacity—Board: Based on the Board of Directors information, does the organization appear to have reasonable involvement/commitment from the Board?	1	2	3	4	5
Organizational Capacity – Staff/Volunteers: Based on the information provided regarding staff and volunteers, does the organization have the capacity to effectively manage the proposed program? Does the response address the use of volunteers by the agency?	1	2	3	4	5
Organizational Capacity –Planning: Does the applicant clearly identify the organizational goals and any challenges or opportunities facing the organization? Is the organization instituting any succession planning?	1	2	3	4	5
Agency Budget: Is the budget complete and accurate? Is there anything in the budget that is unclear or confusing?	1	2	3	4	5
Totals:					
Total Possible Score: (30)	Total Actual Score:				
Comments:					

Section II	Poor	Fair	Average	Good	Excellent
Part II: Program Application Narrative					
Target Population: Is the target population clearly defined? Has the applicant utilized data to illustrate the needs of the target population?	1	2	3	4	5

Detailed Program Description					
Summary: How well does the applicant describe the program? Are the program's goals and objectives clearly identified? Does the organization provide a description of the activities and/or strategies that will be used to meet the goals? Can the goals and objectives be reasonably achieved within the stated timeline?	1	2	3	4	5
Approach: How well does the applicant describe why/how the proposed program meets the identified needs of the target population? Are best practices, short term, long term innovations described in the response?	1	2	3	4	5
Use of Funds: Is the description of how Chandler funds will be used clear?	1	2	3	4	5
Program Eligibility Criteria: Does the applicant describe the program's eligibility criteria? If applicable, is a list of required documents referenced in the response?	1	2	3	4	5
Explain how this program addresses one or more of the Key Focus Areas under your identified priority population group.					
Does the applicant clearly identify and provide detail about how the program addresses one of the Key Areas?	1	2	3	4	5
Which other agencies in the City of Chandler or adjacent communities provide similar services and how are you cooperating with them. Please describe how your request differs from or builds on these efforts.					
Does the application provide accurate information about other similar services offered in the community? Are the relationships with other providers described with clarity? Is it clear whether or not there is duplication of efforts?	1	2	3	4	5
Describe collaborative efforts with other nonprofit, profit and/or governmental agencies that play a specific role in this program. Please provide documentation in the form of a letter of agreement or MOU.					
How well are the roles of collaborating partners described? Is the role of each partner within the specified program clearly articulated? Does the organization work closely with partners to expand its capacity and gain access to resources? Did the agency provide documentation of the partnership? (see attachments)	1	2	3	4	5
Total Possible Score: (40)	Actual Score:				
Comments:					

Section III	Poor	Fair	Average	Good	Excellent
Part II: Program Evaluation					
Proposed Services: Does the information provided by the applicant regarding units of service seem reasonable within identified timeline? Does the information align with the information provided in the program description (i.e. goals, objectives, etc.)? Is it clear how many Chandler residents will benefit and from which services?	1	2	3	4	5

Quality Assurance: How well does the applicant identify service indicators? Do the indicators ensure a quality program? Are the measurement methods clearly articulated? Do the indicators support the objectives? Is it evident that the program adheres to safety standards?	1	2	3	4	5
Outreach: Did the agency describe outreach efforts? Has the organization involved the board and other community partners in its communication outreach?	1	2	3	4	5
Totals:					
Total Possible Score: (15)	Total Actual Score:				
Comments:					

Part III: Demographic Data – not scored

Part V: Application Attachments – not scored

Section IV	Poor	Fair	Average	Good	Excellent
Part IV: Detailed Program Budget and Narrative					
Budget: Is the proposed budget complete? Is there anything in the budget that is unclear or confusing? Does the applicant provide a clear picture of the revenue and expenses of the program?	1	2	3	4	5
Budget Narrative: Based on the budget and narrative, do the expenses appear reasonable based on the program description and proposed	1	2	3	4	5
Other Program Funding Sources: Are other funding sources identified? Has the applicant identified which funding sources are secured, pending and to be requested?	1	2	3	4	5
Totals:					
Total Possible Score: (15)	Total Actual Score:				
Comments:					
Additional Information:	Below Expectations		Meets Expectations		Exceeds Expectations
Agency Tour Results					
Was a tour held? What were the results?					
Comments:					

Section Totals:	Total Possible Points:	Total Actual Score:
Section I: Application Summary/Agency Profile	30	
Section II: Program Application Narrative	40	
Section III: Program Evaluation	15	
Section IV: Detailed Program Budget/Narrative	15	
Total:	100	
Comments:		

Section 6 – Monitoring & Reporting Requirements for Funded Agencies

I. GENERAL FUND PROGRAM MID-TERM REPORT

The Mid-term Report is due January 14, 2013 and captures data from July 1, 2012 through December 31, 2012.

1. Agency Name:
2. Agency Description:
3. Project/Program Name:
4. Contact Person:
5. Contact Phone Number:
6. Contact Email Address:
7. FY13/14 Funds Requested:
8. FY13/14 Contract Amount:

II. PRIORITY PROGRAM INFORMATION

The following information is required as part of our reporting to HUD. Please choose one of the following categories that is your primary focus:

Adult Services
 Anti-Crime Programs
 Domestic Violence Services
 Emergency Shelter Operating Costs
 Employment Training
 Food and Clothing Services
 General Public Services
 Handicap Services
 Health Services
 Legal Services, including Fair Housing
 Senior Services and Programs
 Substance Abuse Services
 Veteran's Services
 Youth Services

If serving more than one category, please explain: (Narrative Box – 200 Characters)

III. MID-TERM REPORT INFORMATION

1. Program Description FY 13/14:
2. Chart of Clients Served + Units of Service

FY 12/13 Funding Requested	FY 12/13 Funding received	FY 12/13 Unduplicated Units of Service	FY 12/13 Unduplicated Clients to be Served Per Contract	Number of unduplicated clients actually served with Chandler funds 7-1-12 to 6-30-13

FY 13/14 Funding Requested	FY 13/14 Funding Received	FY 13/14 Unduplicated Units of Service	FY 13/14 Unduplicated Clients to be Served Per Contract	Number of unduplicated clients actually served with Chandler funds 7-1-13 to 12-31-13

3. Based on the numbers provided in the chart above, state whether your program is on target to meet the proposed goals stated in your funding contract. If not on target, please specify the reason and corrective actions taken to date.
4. Discuss the program goals listed in your FY 13/14 application and progress toward these goals during the current funding period.

IV. MID-TERM REPORT DEMOGRAPHIC INFORMATION FOR UNDUPLICATED CLIENTS

Gender of Persons Served Unduplicated Clients	Mid-Term July 1, 2013 - December 31, 2013
Females	
Males	
Unknown	
Total	

Age of Persons Served Unduplicated Clients	Mid-Term July 1, 2013 - December 31, 2013
0 – 6	
7 – 13	
14 – 18	
19 – 30	
31 – 49	
50 – 64	
65 – 74	
75 – 84	
85+	
Unknown	
Total	

Race/Ethnicity of Persons Served Unduplicated Clients	Mid-Term July 1, 2013 - December 31, 2013
White	
Black/African American	
Asian	
American Indian/Alaskan Native	
Native Hawaiian/Other Pacific Islander	
American Indian/Alaskan Native & White	
Asian & White	
Black/African American and White	

Amer. Indian/Alaskan Native & Black/African Amer.	
Asian and Native Hawaiian/ Other Pacific Islander	
Other Multi-Racial	
Total	

Race/Ethnicity of Persons Served -Hispanic Unduplicated Clients	Mid-Term July 1, 2013 - December 31, 2013
White	
Black/African American	
Asian	
American Indian/Alaskan Native	
Native Hawaiian/Other Pacific Islander	
American Indian/Alaskan Native & White	
Asian & White	
Black/African American and White	
Amer. Indian/Alaskan Native & Black/African Amer.	
Asian and Native Hawaiian/ Other Pacific Islander	
Other Multi-Racial	
Total	

Special Populations	Mid-Term July 1, 2013 - December 31, 2013
Female Head of Household	
Elderly (62+)	
Disabled	

Income Level of Persons Served Unduplicated Clients	Mid-Term July 1, 2013 - December 31, 2013
Extremely Low (0-30% of Median Income)	
Low (31% - 50% of Median Income)	
Moderate (51%-80% of Median Income)	
Non-Low Moderate (81% + of Median Income)	
Unknown	
Total	

II. GENERAL FUND PROGRAM FINAL REPORT

The Final Report is due July 12, 2014 and captures data from July 1, 2013 through June 30, 2014.

1. Agency Name:
2. Agency Description:
3. Project/Program Name:
4. Contact Person:
5. Contact Phone Number:
6. Contact Email Address:
7. FY13/14 Funds Requested:
8. FY13/14 Contract Amount:

I. PRIORITY PROGRAM INFORMATION

The following information is required as part of our reporting to HUD. Please choose one of the following categories that is your primary focus:

- Adult Services
- Anti-Crime Programs
- Domestic Violence Services
- Emergency Shelter Operating Costs
- Employment Training
- Food and Clothing Services
- General Public Services
- Handicap Services
- Health Services
- Legal Services, including Fair Housing
- Senior Services and Programs
- Substance Abuse Services
- Veterans' Services
- Youth Services

If serving more than one category, please explain:

II. UNDUPLICATED CLIENTS

	Total Clients to be Served by the Program	Total City of Chandler Clients to be Served by the Program	Total Clients to be Served with City of Chandler Funds
Unduplicated Clients			
Total			

Tip:

- *The Unduplicated Clients and Units of Service numbers do not have to match.*

III. UNITS OF SERVICE (UNDUPLICATED)

	Total Units of Service to be provided by the Program	Total Units of Service to be provided to City of Chandler clients	Total Units of Service provided with City of Chandler Funds
1 - Units of Service (drop down list)			
2 - Units of Service (drop down list)			
3 - Units of Service (drop down list)			
Total			

Drop Down List of Choices:

- One client contact
- One bed night or shelter night
- One volunteer service hour (adult literacy)
- One hour of support for program participant (independent living)

- One hour of direct service to client/program use
- One complete developmental screening service (child)
- One period of substance abuse crisis services (10-23 hours)
- One client intake
- One case management
- One hour of legal time
- One home repaired
- One food box
- One item of clothing
- One unit of emergency assistance (utilities, rent, case management, counseling, other)
- Other _____

FY 12/13 Funding Requested	FY 12/13 Funding received	FY 12/13 Unduplicated Units of Service	FY 12/13 Unduplicated Clients to be Served Per Contract	Number of unduplicated clients actually served with Chandler funds 7-1-12 to 6-30-13
FY 13/14 Funding Requested	FY 13/14 Funding Received	FY 13/14 Unduplicated Units of Service	FY 13/14 Unduplicated Clients to be Served Per Contract	Number of unduplicated clients actually served with Chandler funds 7-1-13 to 6-30-14

1. Based on the numbers provided in the chart above, please describe whether your program met the proposed goals stated in your funding contract. If the program did not meet the proposed goals, please specify the reason and outline changes for future programming and lessons learned.
2. Describe your FY 13/14 accomplishments, challenges, or program changes.
3. Please list the total number of FTEs assigned to this program(s) through your agency, and the names and titles of those persons.
4. Did you conduct any outreach for the City of Chandler program(s)? If yes, describe how you conducted it, where you conducted it, who was targeted and the results.
5. Describe any new collaborative efforts achieved (or efforts that ended) during FY 13/14.

IV. DEMOGRAPHIC INFORMATION FOR UNDUPLICATED CLIENTS

Gender of Persons Served Unduplicated Clients	FINAL July 1, 2013 - June 30, 2014
Females	
Males	
Unknown	
Total	

V. DEMOGRAPHIC INFORMATION FOR UNDUPLICATED CLIENTS – CONTD.

Age of Persons Served Unduplicated Clients	FINAL July 1, 2013 – June 30, 2014
0 – 6	
7 – 13	
14 – 18	
19 – 30	
31 – 49	
50 – 62	
63 – 74	
75 – 84	
85+	
Unknown	
Total	

Race/Ethnicity of Persons Served Unduplicated Clients	Actual FY13/14	Projected FY14/15
White		
Black/African American		
Asian		
American Indian/Alaskan Native		
Native Hawaiian/Other Pacific Islander		
American Indian/Alaskan Native & White		
Asian & White		
Black/African American and White		
Amer. Indian/Alaskan Native & Black/African Amer.		
Asian and Native Hawaiian/Other Pacific Islander		
Other Multi-Racial		
Total		

Race/Ethnicity of Hispanic Persons Served Unduplicated Clients	Actual FY13/14	Projected FY14/15
White		
Black/African American		
Asian		
American Indian/Alaskan Native		
Native Hawaiian/Other Pacific Islander		
American Indian/Alaskan Native & White		
Asian & White		
Black/African American and White		
Amer. Indian/Alaskan Native & Black/African Amer.		
Asian and Native Hawaiian/Other Pacific Islander		
Other Multi-Racial		
Total		

Family Size Unduplicated Clients	FINAL July 1, 2013 – June 30, 2014
Small (4 or less)	
Large (5 or more)	

Special Populations	FINAL July 1, 2013 – June 30, 2014
Female Head of Household	
Elderly (62+)	
Disabled	

Income Level of Persons Served Unduplicated Clients	FINAL July 1, 2013 – June 30, 2014
Extremely Low (0-30% of Median Income)	
Low (31% - 50% of Median Income)	
Moderate (51%-80% of Median Income)	
Non-Low Moderate (81% + of Median Income)	
Unknown	
Total	

VI. OTHER

Resource Referrals	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total Unduplicated Clients Served with Chandler Funds
Total unduplicated client referrals provided to other services and agencies					

Domestic Violence	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total Unduplicated Clients Served with Chandler Funds
Total Unduplicated Clients					
Total Bed Nights					

Homeless	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total Unduplicated Clients Served with Chandler Funds
Total Unduplicated Clients					
Total Bed Nights					

VII. PROGRAM BUDGET

Revenue

	Total FY13/14 Program Revenue BUDGETED	Total FY13/14 Program Revenue ACTUAL
1. Gov. Funding – Chandler		
2. Gov. Funding – Other Cities		
3. Gov. Funding – County		
4. Gov. Funding – State		
5. Gov. Funding – Federal		
6. Contributions / Donations		
7. Special Events / Fundraising		
8. Legacies / Bequests		
9. Foundation Support		
10. Service Fees & Reimbursements		
11. Investment Income		
12. In-Kind Support		
13. Other		
Total		

Expenses

	Total FY13/14 Program Expenses BUDGETED	ACTUAL Chandler Funding Expended	ACTUAL Other Resources Expended	Volunteer/ In-Kind Contributions
1. Salaries				
2. Employee Benefits & Taxes				
3. Employee Education & Training				
4. Professional Fees & Contracts				
5. Specific Assistance for Individuals				
6. Communications (phone, fax, modem, postage)				
7. Supplies / Equipment Rental & Maintenance				
8. Occupancy (rent, utilities, building and grounds)				
9. Advertising / Printing & Publications				
10. Travel / Meetings / Conferences				
11. Membership Dues / Support to Affiliate Org.				
12. Evaluation				
13. Non-Payroll Insurance				
14. In-Kind Expense				
15. Other Expenses				
Total				

Program Budget Narrative: Please address any significant budget issues with the agency that impacted the funded program(s) if any. (1,500 characters)