FY2015-2016

Neighborhood Development Grant Program Application

Name of Project:

Applicant Organization:

Project: Total Requested:

General Technical Application Instructions and Cover Page:

1. Each application must stand alone and will serve as the primary vehicle for applicants to provide information on proposed projects. Your application must convince the RNA Review Committee that your project is well thought out, will be ready to start when you say it will, and that your results will be achieved by June 30, 2016. During the review process, applicants may be asked to submit additional information and/or attend an interview with the RNA Grant Review Committee to provide clarification and/or additional information about their project.

2. A separate application with attachments must be submitted for each project in which funding is being requested.

3. Each application should be typed or written very clearly and legibly. Inaccurate, incomplete, or unclear applications may be disqualified.

4. All pages, including attachments, must be on 8.5" x 11" white paper.

5. Submission of application: Submit one (1) original plus five (5) copies of the application. All attachments to the application must be included with the original copy and with each copy additional. You can also submit your completed application **with attachments** electronically by scanning them into a single document and emailing to neighborhoods@roanokeva.gov. Applications submitted without required attachments will be rendered incomplete and ineligible to receive funding.

6. **Each application must include copies** of the **organization's bylaws** along with copies of the **Treasurer's Report** and **Meeting Minutes** from your organization's most recent past two (2) meetings. Organizations without bylaws are only eligible to receive a maximum of $500.00. If the completion of your project requires the participation/approval of city department(s) and/or other organizations outside your own, a signed letter or email from the city department and/or organization acknowledging their willingness to participate, leverage and/or approve of your project must be attached, if applicable. In addition, three (3) detailed quotes or other financial backup to support the funding amount being requested must also be attached.

7. Applications are due at the Office of Neighborhood Services, Noel C. Taylor Municipal Building, Room 312 North, 215 Church Avenue SW, Roanoke, VA 24011 by **5:00 p.m. on Friday, January 16, 2015.**

Applicant Project Manager Signature: Date:

_____   _____

Roanoke Neighborhood Services
Application for FY2015/2016 Neighborhood Development Grant Program

A. General Information

1. Name of Organization: _____

2. Contact Person: _____

3. Mailing Address: _____

   _____

2. Email Address: _____

4. Telephone Number: _____

5. Is your organization incorporated? 501(c)3 or (c)4? _____

6. Give a brief history of your organization. When was it founded? How often does it meet? What is your meeting's average attendance? Please list the current officers, their addresses, and phone contact information. When are elections held? Please attach a copy of your organization's bylaws along with copies of your Treasurer's Report and Meeting Minutes from your organization's **most recent past two (2) meetings.**

## B.	Neighborhood Project Description

1.	Provide a brief description of your project.

## C.	Project Criteria

1. GOALS: How does your project assist in the implementation of one or more of the action activities and/or policies as noted in your neighborhood plan, the city's *Vision 2001-2020* Comprehensive Plan, Arts & Culture Plan, or other component plans of *Vision 2001-2020*. Identify the specific action activity being addressed and how your project will assist toward its implementation.

2. NEED: Your application needs to convince reviewers that it addresses a vital need within your neighborhood and that financial assistance from the City is necessary to address this need. Describe the overall problem your application proposes to address, why financial assistance is necessary to address this problem and the effect upon this project if it is not selected to receive funding or if funding awarded is substantially less than requested.

3. EXPERIENCE: Your application must convince reviewers that you have the experience and administrative capability to undertake and complete all aspects of your proposed project Describe any past projects or related experience that demonstrates your organization's ability to carry out this project within the grant's timeline. Note: If your group received a Neighborhood Development Grant before, list the year and a brief description of the project.

4. PLANNING: Explain how your project's planned activities are clear and well-defined to address the problem and achieve your project's goal within the program's time guidelines. Provide documentation that required collaborations have been performed and agreed upon. If the completion of your project requires the participation/approval of city department(s) and/or other organizations outside your own, a signed letter or email from the city department and/or organization acknowledging their willingness to participate and/or approve of your project MUST BE ATTACHED, if applicable. Three (3) detailed quotes or other financial backup to support the funding amount being requested must also be attached.

5. IMPACT: How will the benefits of this project be measurable?   Will this project bring new resources and/or income into the neighborhood? How will this project make a measurable and/or visible improvement to the quality of life in your neighborhood?

6. SUSTAINABILITY: How does your project contribute to the self-sufficiency of your organization? Will this project assist the organization in the completion of future projects?

7. INNOVATION: Is this a new type of project for the neighborhood organization or the City? Explain if it provides a model for other neighborhoods?

8. LEVERAGE: Explain if the completion of your project will rely entirely upon receipt of grant funding or if it will be partially funded from other sources outside of the organization who will be contributing to the project. If other sources outside of the organization will be contributing to the completion of your project, a signed letter or email from the source acknowledging their intent and the amount to be provided to partially fund your project MUST BE ATTACHED, if applicable.

9. ENVIRONMENTAL and/or ARTS / CULTURAL IMPACT: Explain how this project promotes/enhances the city's Clean and Green campaign and/or Arts and Cultural Plan initiatives and/or encourages projects that further this commitment.

10. ORGANIZATIONAL INVOLVEMENT: Explain how your organization's documented contribution (financial and/or volunteer) to this project is viable and has the support of its membership to carry out the project within the time guidelines.

D. Neighborhood Project Leveraged Resources

Projects supported with matching funds/resources from within the neighborhood organization and/or leveraged funds/resources from outside the organization are highly encouraged.

1. Please list all in-kind donations, donated resources/services, cash, and any other funding sources that **your organization will contribute** to this project.

Describe funding, donated item, or in-kind service: Estimated Value:

_____ $_____

_____ $_____

_____ $_____

_____ $_____

_____ $_____

_____ $_____

            TOTAL   (a) $_____

2. Please list all in-kind donations, donated resources/services, cash, and any other funding sources that will be **provided to your organization** in support of this project.

Describe funding, donated item, or in-kind service: Estimated Value:

_____ $_____

_____ $_____

_____ $_____

_____ $_____

_____ $_____

_____ $_____

            TOTAL (b) $_____

3. Total leveraged resources anticipated from <u>within and outside</u> the organization.

TOTAL (a) + (b) $_____

E.   Grant Budget

List the project items to be paid for with grant funds. If funds are being requested to support training opportunities, please denote the event, who will be attending, and the total amount requested. **Documentation (estimates, quotes, etc.) supporting the total amount of funds being requested must be attached.**

Materials and Supplies (Paper, Paint, Wood, Rakes, Gas, etc.)   Funds Requested

_____ $_____

_____ $_____

_____ $_____

_____ $_____

Vendors
(Plumber, Printer, Painter, Sign Manufacturer, Landscaper, etc.)

_____ $_____

_____ $_____

_____ $_____

_____ $_____

Other

_____ $_____

_____ $_____

_____ $_____

_____ $_____

Training Funds

Event   Attendee

_____   _____ $_____

_____   _____ $_____

_____   _____ $_____

_____   _____ $_____

_____   _____ $_____

Total Grant Amount Requested $_____

F.   **Schedule**

Outline your organization's action plan, or general steps you will take to complete this project within the grant's timeline.

1. Date you expect to complete your project: _____
2. List each major task of your work (attach additional pages as necessary to describe the project schedule).
3. Show on the time chart approximately how long each task will take.
4. List who will be responsible for getting the tasks done.

Major Tasks	Month												Person Responsible
	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	