

# **Community Service Agency Grant Application for Funding**

Name of Agency Applying for Funding:

\_\_\_\_\_

## **County Fiscal Year 2025**

(October 1, 2024 - September 30, 2025)

To be considered for funding, a completed and signed application (including attachments) prepared according to the following instructions, must be received no later than 5:00pm, Friday, May 31, 2024. No exceptions will be made; agencies are encouraged to submit earlier than the due date and time to ensure timely submittal.

#### **Submit to:**

Osceola County CSA Grant Program Housing and Community Services Department 1392 E. Vine Street Kissimmee, FL 34744

Questions regarding the application or the process may be directed to the above Department at 407-742-8420.

Agencies applying for funding shall also follow the **Osceola County Community Service Agency Grant Procedures and Guidelines**. Failure to submit a completed application that follows all instructions, procedures, and guidelines may be deemed ineligible for funding consideration.

## I. Application Submission Instructions

- 1. Submit one (1) original application, labeled **ORIGINAL** on the cover page and place in a 1-inch soft-sided binder.
- 2. Submit an additional five (5) copies of the complete application, fastened with a staple or binder clip.
- 3. Submit one (1) USB drive that includes a PDF file of the complete application including all attachments.
- 4. Application format requirements:
  - a. Spacing at 1.5 lines, 12 size font, with margins one-half inch (0.5") on all four sides.
  - b. Double-sided on letter sized (8 ½ x 11) white paper, with black ink.
  - c. Each page must be numbered at the bottom (1 of 10, 2 of 10, etc.).
- 5. Adhere to page allowances per section as described below.

## II. Application Table of Contents

The application must include a table of contents and labeled tabs identifying each required section.

#### III. Required Application Sections

#### Section A. Organization Background

Maximum pages: one (1)

Identify the CEO of the agency and the program point of contact along with their contact information. Provide an overview of your agency including services provided to the citizens of the County within the previous two (2) years. Include the mission, vision, values, and objectives of the agency.

### **Section B. Needs Statement**

Maximum pages: one (1)

Cite relevant data (within previous two (2) years) that illustrates the severity of the unmet need that currently affects citizens of the County.

#### **Section C. Program Description**

Maximum pages: one (1)

Describe the services your agency will provide to County residents through the requested funding.

#### Section D. Uniqueness of Service

Maximum pages: one (1)

Explain how the services identified for funding are unique among other County agencies that may provide similar services.

#### Section E. Community Impact

Maximum pages: one (1) plus the Outline

Describe how the County community will be impacted by the project. Utilizing the attached **Community Impact Outline**, identify at least one (1) goal along with the inputs, outputs, outcomes, evaluation method, evidence of Osceola residence to be collected, and reiterate how CSA funds will be used to support the goal. Ensure each goal follows SMART (specific, measurable, achievable, relevant, time-bound) principles. *Examples are provided within the attachment*.

<u>Section F. Program Budget and Sustainability</u>

Maximum pages: two (2) including the budget table

Provide a detailed program budget for the year funding is being requested and the previous year. The
below Program Budget format may be used. Revenue and expenses should reflect only the specific
services for which funding is requested. If the service is not active currently, previous year data will not be
applicable. For the current year, include a budget narrative. Describe the plan for sustainability if funding
is not awarded. Volunteer hours and in-kind donations should be included if applicable.

Program Budget - Revenues	Current 2023/2024	Proposed 2024/2025
Federal and State Sources		
County and City Sources		
Osceola County CSA Grant Request		
Foundations/Trusts		
Agency Generated		
Client Service Fees		
Fundraisers		
Memberships		
Business or Individual Contributions		
Total Program Revenue		
Program Budget - Expenses	Current 2023/2024	Proposed 2024/2025
Direct Program Expenses		
Program Staff Salaries and Benefits		
Food		
Clothing		
Professional Fees/Outside Consultants		
Program Materials		
Direct Assistance (security deposit, bus pass, etc.)		
Indirect Expenses (Limitations Apply)		
Administrative Staff Salaries and Benefits		
Building Mortgage/Rent		
Utilities, Insurance, Maintenance, Taxes		
Equipment and Supplies		
Staff Development/Training/Travel		
Total Program Expenses:		

#### Section G. Results of Previous Funds Received

Maximum pages: one (1)

If your agency received funding in the previous two (2) years, provide detailed results of the accomplishments of the projects funded and the funded amounts. Communicate whether the agency achieved the goals and objectives specified in previous applications.

#### Section H. Partnerships and Collaborations

Maximum pages: one (1)

Identify other government agencies, nonprofits, companies, groups, etc. that are partnering with your agency to provide the services requested for funding.

#### **Section I. Strategic Plan**

Maximum pages: one-half (.5)

Describe how the identified program meets one or more elements of the County Strategic Plan aspirations and/or priorities which can be found on our website at:

https://www.osceola.org/core/fileparse.php/2731/urlt/091423 2023-2028-osceola-county-strategic-planning-document.pdf

## Section J. Board Member Residency and Attendance

No maximum pages

Provide (1) the list of current board members, their current County of residence, and number of years on the board. For nationwide or statewide organizations, provide information on the local board and (2) Board meeting attendance percentage for the previous 12 months (percentage for each meeting listed separately.

## **Section K. Agency and Service Provider Capacity**

No maximum pages

Provide 1) current organizational chart with personnel names and 2) resumes of persons that will directly provide services requested to be funded (must be listed on organizational chart).

## **Section L. Financial Management**

No maximum pages

Provide 1) Management Letter of annual audited financials for the last audited year and 2) first page (signed page) of IRS Form 990 for the previous two years;

# Section M. Required Attachments

No maximum pages

- 1. Letter from the Internal Revenue Service recognizing the agency as holding tax exempt status: 501(C)3, 501(C)4 or 501(C)6;
- 2. Evidence that the State of Florida recognizes the agency as a nonprofit charitable or civic agency;
- 3. List of Program funding awarded for the past five (5) years similar to the below table.

Amount of CSA grant funding awarded for FY19/20	\$
Amount of CSA grant funding awarded for FY20/21	\$
Amount of CSA grant funding awarded for FY21/22	\$
Amount of CSA grant funding awarded for FY22/23	\$
Amount of CSA grant funding awarded for FY23/24	\$
Amount of this year's funding request for FY24/25	\$

	Section E. Community Impact Outline (with 3 examples)							
Goal #	Inputs	Outputs	Outcomes	Evaluation Method	Evidence of Osceola Residence to be Collected	How CSA Funds are Used		
1	One certified swim instructor/lifeguard	Provide swim lessons to at least 100 Osceola County children	At least 90% of children taught will pass the swim test within 3 months of receiving lessons.	Meet swim standards through visual observation of certified instructor (state standard). Documented on applicable form and signed by certifier.	Completed and signed application by parent listing child name and accompanied by a copy of driver's license evidencing parents' residency.	Payment to instructor per instructional hour for eligible children based on current value of volunteer hours within Florida (\$29.41). Class hours for multiple children will not be multiplied.		
2	One full-time case manager	Provide employment referrals, job application assistance, interview skills to at least 25 Osceola County residents that are currently under or unemployed.	At least 75% of the 25 residents will attain sustainable employment or improved employment within six months of program entrance.	Documentation evidencing date entrance into the program and income pre and post services.	Driver's license evidencing residence address.	Case Manager hourly loaded rate (\$35.00) for each hour providing services. Class hours for multiple clients will not be multiplied.		
3	Food provided to children (one weekend food bag per child in need)	At least 2,000 weekend food bags will be distributed to children in need. One child may receive more than one bag based on needs. At least 500 children will receive food at least once within the grant period.	Providing food will inherently decrease food insecurities for the children receiving food bags.	Number of weekend food bags distributed per Osceola County school per weekend within the grant period.	Food distribution is provided at Osceola County schools; therefore, children are inherently residents. List of Osceola County schools and quantity of food bags will be provided.	Food purchases		
4								
5								

#### IV. Statement of Assurances

As a condition of receipt of County funds, the applicant must comply with the requirements of local, state, and federal laws, rules, regulations, and guidelines. As a part of the application and as a part of acceptance and use of County funds, the applicant agrees that:

- 1. The agency's authorized official below possesses legal authority to apply for assistance, that the application has been approved by the applicant's governing body, including all assurances contained herein.
- 2. The agency will utilize County funds to provide services and activities having measurable impact on the County's community's needs as stated within the application.
- 3. The agency possesses the sound fiscal controls and fund accounting procedures necessary to assure the proper disbursal of an accounting for County funds.
- 4. The agency maintains an accounting system which contains sufficient and adequate internal controls to safeguard its assets; ensure accuracy, completeness, and reliability of accounting data; promote operating efficiency; and encourage compliance with policies and agreements executed by the agency.
- 5. It will permit and cooperate with county, state, and federal investigations designed to evaluate compliance with the law.
- 6. It will give the Board, or its authorized representative, complete access to examine all records, books, papers, or documents related to the grant.
- 7. It will, in accordance with Florida Statutes, comply with nondiscrimination provisions.
- 8. It will, in accordance with Florida Statute 119.07, comply with the provisions of the public examination of records regarding said funds.
- 9. It will attest that the application and its various sections, including budget data, are true and correct. Information contained in this application accurately reflects the activities of this agency and that the expenditures or portions thereof for which the County funds are being requested are not reimbursed by any other source.
- 10. Upon being awarded assistance, the applicant agrees to furnish a certificate of insurance listing the Osceola County Board of County Commissioners as certificate holder.
- 11. The application will become part of a contract between the County and the Applicant.

Agency Authorized Official:		
Printed Name	Title	
Signature	 Date	