

Application Worksheet: Community and Faith-Based Micro-Grants

Application Title: *This is up to you and is related to your project proposal.*

General Information

Primary Contact: *This is the primary contact for your organization in WebGrants.*

Organization: *The registered name of your Organization in WebGrants.*

Additional Applicants: *Additional WebGrants Users associated with your organization.*

Project Description

Description of Organization and Summary of Qualifications: *Tell us about your organization and why you believe you are qualified to do what you'd like to do. This can be brief. Example: ACME church is a faith-based community with 700 members and a ministry focused on emotional support. The ministry engages with dozens of community members on mental and emotional support issues each month.*

Description of the Project: *Tell us about your proposed project. Include goals, needs addressed, possible partners, and any other detail that will aid the review team in understanding your project. Example: We will purchase and deliver XYZ curriculum which provides family members of individuals with SMI/SED toolkits for their own wellbeing and resiliency. [In a few sentences, explain why you feel this is needed, how you'll carry this out, and what you hope to achieve.]*

Disclosures: *Organizations must disclose IRS or audit-related sanctions, convictions, etc. If none, please indicate "Not Applicable".*

Performance Outcome Measures

Outcome Measure: *Related to your project goals, how will you measure success? Example: We will complete the curriculum with 125 individuals during the project period.*

Estimated Completion Date: *This must be before 15 September 2024.*

Budget and Budget Narrative

Applicants need to submit line-item budgets across the following categories: Personnel, Fringe, Travel, Equipment, Supplies, Contracted Services, Construction, Other Operating Costs. Each line-item with an amount must have a description and be included in the budget narrative. The total for all line items must equal your total proposed amount.

Example: Travel

Amount Requested = \$500.00

Description: 1000 miles at \$0.50 per mile.

Narrative: We anticipate staff will need to travel a total of 1000 miles during the project period to ensure project goals can be completed. Travel will be reimbursed at \$0.50 per mile.

The above information must be included for all categories.

Single Audit Determination

If your organization has never received federal funds, Answer A1 with Yes, leave A2. Blank, and Answer B1 with No.

If your organization HAS received other federal funds, you are already familiar with this information and should complete sections A and B accordingly.