

Ready Children Impact Council Independent and Joint Application Comparison

<u>INDEPENDENT APPLICATION</u> (to be used by single agency)	<u>JOINT APPLICATION</u> (to be used by lead agency with one or more partners)
<p><u>ELIGIBILITY QUESTIONS:</u> Please answer the following questions to determine the agency's eligibility to apply.</p> <ol style="list-style-type: none"> 1. Does the agency have an IRS 501(c)(3) determination letter dated prior to January 1, 2016? 2. Does the agency provide health and human services primarily in Bexar County? 3. Does the agency have the capacity to electronically track and upload program performance metrics on a monthly basis and finances on a quarterly basis? 4. Does the agency have the ability to procure and track the required co-investment for the proposed program? 5. Does the agency agree to participate in a shared data system? 6. If funded, does the agency agree to participate in the Impact Council through which the program is funded? 7. Have you read the Impact Council Request for Proposal Process Guide and do you understand the requirements and expectations of an agency receiving United Way funding? 	<p><u>ELIGIBILITY QUESTIONS:</u> Please answer the following questions to determine the collaboration's eligibility to apply.</p> <ol style="list-style-type: none"> 1. Is your agency the lead applicant representing the collaboration? 2. Do all agencies participating in the collaboration have an IRS 501(c)(3) determination letter dated prior to January 1, 2016? 3. Do all agencies participating in the collaboration provide health and human services primarily in Bexar County? 4. Do all agencies participating in the collaboration have the capacity to electronically track and upload program performance metrics on a monthly basis and finances on a quarterly basis? 5. Do all agencies participating in the collaboration have the ability to procure and track the required co-investment for the proposed program? 6. Do all partners in the collaboration agree to participate in a shared data system? 7. As the lead applicant, will you ensure accountability and oversee all partners included in this joint application? 8. Does the collaboration have a signed MOU from all partners? (See required attachments) 9. If funded, do all partners in the collaboration agree to participate in the Impact Council through which the program is funded? 10. Have you read the Impact Council Request for Proposal Process Guide and do you understand the requirements and expectations of any agency receiving United Way funding?

INDEPENDENT APPLICATION – ORGANIZATION INFORMATION

Note: Similar form exists for Joint Application

Program Solicitation: (Impact Council indicator and solicitation # here)

1) Proposed Program Name:

2) Legal name of applicant organization:

3) D.B.A. (if any):

4) Mailing address:

5) Phone:

6) Fax:

7) Agency CEO's name and title:

8) Agency CEO's email address:

9) Name and title of contact person for this application:

10) Phone and e-mail address for contact:

11) Is this application for:

New program

Expansion of existing program

Other – Provide details: _____

12) Total Proposed Program Budget:
\$ _____

13) Amount Requested from United Way:
\$ _____

14) Total AGENCY Budget: \$ _____

INDEPENDENT APPLICATION PROGRAM NARRATIVE: (to be used by single agency)

In the space below, please describe the agency's proposed program. (Max of 400 words per question). All questions will require a response in order to be submitted.

Organization's Capacity

1. Provide the agency's vision/mission statement and discuss how this proposed program aligns with it.
2. How does this program align with the selected result, indicator and strategy(ies)?
3. Describe the buy-in/support from key agency leadership for this program. What role would leadership have in ensuring the success of this program?
4. Describe the agency's experience collecting data and measuring impact.
5. How will the agency be enhanced by participating in the Impact Council, which will utilize a collective impact model, and how will the Impact Council be enhanced by the agency?

JOINT APPLICATION PROGRAM NARRATIVE: (to be used by lead agency with one or more partners)

In the space below, please describe the collaboration's proposed program. (Max of 400 words per question). All questions will require a response in order to be submitted.

Collaboration's Capacity

1. Provide an overview of this collaboration and describe how the partners of this joint application have a shared vision for change, including a common understanding of the problem and a joint approach to solving it through agreed upon actions.
2. How does the collaboration align with the selected result, indicator and strategy(ies)?
3. Describe how the collaboration collects or plans to collect data and measures results.
4. Outline how the lead agency will coordinate operational functions within the collaboration. Include any previous history serving as the lead agency for a collaborative grant or initiative. (If there is not a history as a lead agency, describe the lead agency's qualifications for serving in this role.)
5. Provide a brief narrative that outlines the partners' roles and responsibilities specific to the proposed collaboration, including the resources and capacity each partner brings to the collaboration. (This is a summary of details of the required MOU.)
6. What does the collaboration allow the partners to accomplish that cannot be accomplished by a single organization?
7. How will the collaboration be enhanced by participating in the Impact Council, which will utilize a collective impact model, and how will the Impact Council be enhanced by the collaboration?

INDEPENDENT

Program Design

6. Describe the problem or need your program will address. (Note: The problem statement is *not* the same as the description of the population to be served; nor is this the place to describe the program.)
7. Describe the population to be served by this program (with information such as age, gender, ethnicity, geographic area(s), income and/or poverty level). If applicable, please include program site locations where services will be provided. Please be sure to mention any demographic data or other conditions that are important to this proposal.
8. Describe the program for which funding is being requested and its primary purpose.
9. How will the program intentionally include community members, particularly those most likely to benefit from services, in the planning, implementation and results of the program?
10. Answer one of the following two bullet points, depending on whether the program is ongoing or new to the agency:
 - If this is an *ongoing* program: What data can you include that demonstrates past success? What have been challenges to achieving success? Any recent enhancements?
 - If this is a *new* program (new to the agency): What is the basis for expecting the program will succeed? (Anecdotal information? Evidence-based practices? Literature review? Other?)
11. Does the program partner with other programs/agencies to achieve its results? If so, provide letter(s) of support from the partner(s).
12. Provide a brief narrative that details the rationale for the Implementation Plan. *Note: Implementation Plan template may be found at www.unitedwaysatx.org/rfp.*

JOINT

Program Design

8. Describe the problem or need your program will address. (Note: The problem statement is *not* the same as the description of the population to be served; nor is this the place to describe the program.)
9. Describe the population to be served by this program (with information such as age, gender, ethnicity, geographic area(s), income and/or poverty level). If applicable, please include program site locations where services will be provided. Please be sure to mention any demographic data or other conditions that are important to this proposal.
10. Describe the program for which funding is being requested and its primary purpose.
11. How will the program intentionally include community members, particularly those most likely to benefit from services, in the planning, implementation and results of the program?
12. Outline some of the initial actions (program changes, new programs, policy changes, etc.) the partners are planning to take together and the rationale for these actions. How is this work different from the work you currently do as individual organizations?
13. Answer one of the following two bullet points, depending on whether your collaboration is ongoing or new:
 - If this is an *ongoing* collaboration: What data can you include that demonstrates past success? What have been challenges to achieving success? Any recent enhancements?
 - If this is a *new* collaboration: What is the basis for expecting the collaboration will succeed? (Anecdotal information? Evidence-based practices? Literature review? Other?)
14. Provide a brief narrative that details the rationale for the Implementation Plan. *Note: Implementation Plan template may be found at www.unitedwaysatx.org/rfp.*

INDEPENDENT

Program Measurement & Evaluation

- 13. Provide a detailed description of and the evidence for the proposed short and long-term impact and what data you will collect, including the measurement tools that will be used, and how these data will contribute to both the result and moving the needle on the indicator selected.

Performance Measure form is embedded in e-Impact.

Budget

United Way will provide up to 50% of funds needed to operate the program. Exceptions will be considered for innovative or start-up programs.

Program Budget form is embedded in e-Impact.

- 14. Provide a line item budget narrative for total program expenses, inclusive of the requested United Way funds and the co-investment funds. Regarding co-investment funds, denote whether they are confirmed or pending.

Sustainability

- 15. Understanding that this is a three to five year funding cycle based on performance, outcomes and United Way’s annual campaign results, please describe how you will plan for possible financial fluctuations.
- 16. Are there plans to sustain this program beyond the three to five year funding cycle? If so, other than grants, how will the program be funded?
- 17. What internal and/or external systemic changes do you expect to result from this partnership with United Way?

JOINT

Program Measurement & Evaluation

- 15. Provide a detailed description of and the evidence for the proposed short and long-term impact and the data you will collect, including the measurement tools to be used, and how these data will contribute to both the result and moving the needle on the indicator selected. Refer to your list of partners and be specific as to what deliverables you expect the lead agency and each partner to contribute.

Performance Measure form is embedded in e-Impact.

Budget

United Way will provide up to 50% of funds needed to operate the program. Exceptions will be considered for innovative or start-up programs.

Program Budget form and link to Joint Application Spreadsheet are embedded in e-Impact.

- 16. Provide a line item budget narrative for total program expenses, inclusive of the requested United Way funds and the co-investment funds. Regarding co-investment funds, denote whether they are confirmed or pending.
- 17. Describe how United Way funding will support the collaboration and how specific funding will be distributed and used among partners. (Note: United Way will retain the responsibility to allocate the funds to each partner.)

Sustainability

- 18. Understanding that this is a three to five year funding cycle based on performance, outcomes and United Way’s annual campaign results, please describe how you will plan for possible financial fluctuations.
- 19. Are there plans to sustain this collaboration and/or program beyond the three to five year funding cycle? If so, other than grants, how will the collaboration and/or program be funded?
- 20. What internal and/or external systemic changes do you expect to result from this partnership with United Way and other members of the collaboration?