

<b>General Information</b>	
<b>Date:</b>	<b>UEI:</b>
<b>Entity Name:</b>	<b>Federal Tax ID:</b>
<b>Main Contact Name:</b>	<b>Main Contact Title:</b>
<b>Position of person authorizing submittal:</b>	<b>Signature of person authorizing submittal:</b>
<b>Project/Program Title:</b>	

**XII. Expanding Operational Capacity Grant Program Application**

**Organization Contact Information**

<b>Expanding Operational Capacity Grant Program - Contact Information</b>	
<b>Contact Information</b>	
<b>Authorized Representative Name</b>	
<b>Title</b>	
<b>Mailing Address</b>	
<b>City</b>	
<b>State</b>	
<b>Zip Code</b>	
<b>Program Address</b>	
<b>Phone Number</b>	
<b>Email Address</b>	

## Response Packet

### Program/ Project Narrative

1. Description of Transformative Areas of Investment: how the capital project will assist in executing the nonprofit’s mission and developing capacity.
2. Description of the negative impact that COVID-19 has had on your organization and your community.
3. Description of goals, tasks, and activities.
4. Description of how your nonprofit meets the eligibility requirements
5. Measures of Success: how the nonprofit will gauge its improved efficiency, reach, and effectiveness. How the community will benefit from the improved capacity.
6. Organizational Experience
  - a. Describe previous experience of implementing programming that is responsive to the needs of historically underinvested communities.
7. Staffing:
  - a. Roles and qualifications of all relevant organization staff.
  - b. If you’re collaborating with other organizations to staff or consult on this project, please identify the roles and responsibilities of all partnering organizations.
8. Timeline: On a separate sheet include the proposed timeline of work.
9. Budget:
  - a. Funding proposal: Provide a spreadsheet that includes costs and descriptions for allowable expenses. Additional budget lines or categories may be added or removed as appropriate.
  - b. Funding timeline: Please identify how your proposed budget will be spent by December 31, 2023.

Program/Project Budget & Narrative			
Description of Expense	Requested Budget	Leveraged Funding	Narrative/ Detail
<u>Program/Project Costs</u>			

<b><i>Program/Project Cost Subtotal:</i></b>			
<b><u>Administration Costs</u></b>			
<b><i>Administration Subtotal:</i></b>			
<b>TOTAL PROJECT COST:</b>			
<i>Please describe how you will ensure funding will be allocated and spent by</i>			

**X. Application Scoring Criteria:**

**Application Process**

Applications shall be reviewed in the order of date and time received. The Office of Economic Opportunity will lead and coordinate the review process. Eligible and qualified applicants should receive a funding decision no later than Friday, March 3, 2023.

Scoring Criteria	Project Points Available:
Program/ Project Description. Detailed Project information that demonstrates a strategic plan and vision for implementation of funds.	

	<b>25</b>
Budget. Budget is detailed and is in clear alignment with the program/ project.	<b>20</b>
Target Population. Is the target population in alignment with serving and/or impacting the communities that have been the most disrupted. Does the application’s target population fall in alignment with the qualified census tracts?	<b>25</b>
Goals and objectives of the program/ project.	<b>20</b>
Project/Program demonstrates collaboration with other community organizations or stakeholders.	<b>5</b>
Supporting Documentation: All supporting documentation has been submitted and supports information contained in the application.	<b>5</b>
<b>Total Points:</b>	<b>100</b>