

INSTRUCTIONS FOR COUNTY APPLICATION FOR 2010 CDBG AND HOME FUNDS

Funders, Applications, and Deadlines – An organization requesting calendar year 2010 CDBG and HOME funds must submit the following no later than **12:00 NOON, FRIDAY, May 29, 2009**.

General Information – This proposal format provides your organization with enough space to describe the program you propose to provide in 2010 and to request funding. Use only the forms and space provided unless otherwise instructed. This form is available on line www.danecountyhumanservices.org. As the CDBG Commission must review many proposals, precise and succinct descriptions are important.

**All applications must be submitted in both:
hard copy on 8 ½” x 11” paper, 3 hole-punched and
electronic copy.**

Delivery Addresses and Contact Information			
Funding Source	Delivery Address	Contact	Copies
Dane County			
CDBG hard copy HOME hard copy	Dane County CDBG/HOME Attn: RFP# 1202 Northport Drive Madison, WI 53704	Contact information is provided in each CDBG/HOME RFP at www.danecountyhumanservices.org/ application.htm For general information: Lori Bastean, 242-6420 bastea@co.dane.wi.us	10
CDBG electronic copy HOME electronic copy	cdbg@co.dane.wi.us		1

The CDBG Commission will accept applications for identified priorities only. A listing and description of the programs for which applications will be accepted can be found on the County's web site at www.danecountyhumanservices.org/application.htm.

APPLICATION SUMMARY

Page 1

Project Name - Use project name consistently throughout the proposal. Use the same project name as in past years, if applicable.

Funds Requested – List the amount and source of funding for which you are applying. The HOME program requires 25% non-federal matching funds. Selecting EITHER means that the CDBG Commission will make the decision as to the appropriate funding source.

PROJECT DESCRIPTION

Page 2

- A. **Project Need** – Describe the need or problem that will be addressed.
- B. **Consolidated Plan Priority** - Describe the 2010-2014 Consolidated Plan priority that will be addressed and how this project meets that item. Note that public services are their own category and do not necessarily fall under one of the ranked priorities.

- C. **Project Description** - Provide a description of the work that will be undertaken and how it addresses the identified need. Include information on any partnerships that have been or will be formed in order to insure the success of the project.

- D. **Population to Be Served** – Describe the participants who will benefit from the program. For services, include information regarding the application/referral process, eligibility criteria, capacity, and how waiting lists are handled.
- E. **Geographic Service Area** - In addition to describing the location(s) where the project or services will take place, provide a description of whether all or a portion of the funds will be targeted to area(s) of “greatest need.” Examples of areas of greatest need include:
- a. Rehabilitation Programs – age of housing stock, percentage of low-and-moderate income population, percentage of homeowners age 65 and older, identification by local governmental unit as a need, quality of existing housing stock (rental).
 - b. Acquisition/Demolition of Blighted Properties – concentration of blighted properties, proximity of blighted property(ies) to areas of commerce (such as downtown), impact on housing assessments in area, identification by local governmental unit as in need of demolition, health and safety concerns.
 - c. Homeownership Assistance – percentage of low-and-moderate income population, identification by local governmental unit as a need, average number of months of inventory of homes on the market, number of homes on the market priced at or below the Dane County median, number of foreclosed homes.
 - d. Home/Rental Home Construction – gap between number of existing units and number needed in next 5-10 years, percentage of low-and-moderate income population, identification by local governmental unit as a need.
 - e. Accessibility to Public Buildings – percent of population with a disability, percent of population age 65 and older, age of public buildings, percent of public buildings not handicapped-accessible.
 - f. Public facilities – percentage of low-and-moderate income population.

Maps should be included when specific locations are being targeted.

- F. **Work Plan with Timeline and Milestones** - Provide a work plan for how the project will be organized, implemented, and administered. Include a timeline and milestones from initiation through project completion. If this is a continuing project or service, identify the work plan, timeline, and milestones for 2010 funds.

- G. **Outcomes/Proposed Accomplishments** – Provide a description of the outcomes or expected benefits of this project for the population to be served.
- H. **Outreach and Marketing** – Provide a description of the outreach and marketing initiatives that will be undertaken to inform potential beneficiaries of the project, eligibility criteria, and methods by which they may participate.

- I. **2009 Program Budget** - For capital projects, such as public facilities projects, use Appendix B – Capital Budget. For all others, describe the estimated program budget, by funding source and account categories. For United Way funds, distinguish between designated and allocated revenues.
- 2010 Proposed Budget** - Describe the program budget by funding source and account categories.

- J. **2010 Cost Explanation** - Explain by revenue source and/or account category any noteworthy change in the proposed 2010 budget. For example, annual cost increase (beyond CPI-U), program expansion, or loss of revenue.
- K. **HOME Match** – For housing projects that want to be considered for HOME funding, describe how your organization would meet the 25% non-federal matching funds requirement.
- L. **Funds Need** – Describe why CDBG/HOME funds are needed to ensure that the proposed project is viable.

ORGANIZATIONAL PROFILE

- 1. **Service improvements:** Briefly describe any initiatives to improve the delivery of services.
- 2. **Experience and Qualifications:** Describe the experience and qualifications of your agency related to the proposed program. Attach an organizational chart, as well as, resumes of the Chief Program Administrator and Chief Fiscal Officer and key program staff.

- 3. **Agency Governing Body:** Indicate in the blank the number of Board meetings scheduled for 2009 and provide the information requested about your Agency Board members.

- 4. **Staff/Board/Volunteers:** On the first line enter the total number of permanent paid staff, board members and other volunteers. Complete the table and calculate the percentage for each category.

- 5. **Personnel Schedule:** In column (1) list each individual staff position by title. If your organization employs more than one staff person under the same job title, list the job title only once.

In columns (2) and (4) indicate the number of FTE's (full-time equivalents) in each staff position (e.g., 1.00 Executive Director; 5.50 Outreach Workers, etc.). As a general rule, an FTE is someone who works 35-40 hours/week on average.

In columns (3) and (5) indicate the total salaries for all staff FTE's in that staff position. Do not include payroll taxes or benefits in this column.

- 6. **Staff Turnover for 2008:** Compute the total percentage of paid staff (full and part time) who terminated their employment at your organization during the calendar year 2008. If the number exceeds 20% for one or more job categories, please explain any noteworthy issues. You may wish to reference industry standards or trends or agency policies to reduce staff turnovers.

APPENDIX A

THIS SUPPLEMENT IS A REQUEST FOR A DETAILED PROGRAM BUDGET.

APPENDIX B (CAPITAL PROJECT ONLY)

THIS SUPPLEMENT IS A REQUEST FOR A DETAILED CAPITAL BUDGET.

