1. **Organization Name:**
2. **Type: (check boxes): 501 C3 Nonprofit  Government Agency  Other**
3. **Executive Director:**
4. **Street Address:**
5. **City:**
6. **Zip Code:**
7. **Phone (area code & number):**
8. **Email:**
9. **Website:**
10. **Unique Entity Identifier (UEI) Number:**
11. **System for Award Management (**[**https://sam.gov/SAM/**](https://sam.gov/SAM/)**) registration expiration date:**
12. **Name and contact information for Project Director to be contacted about this application.**
13. **Name & Title:**
14. **Office Phone:**
15. **Cell Phone:**
16. **Email:**
17. **Title of Applicant’s Program:**
18. **Areas to be served by Program (list cities, counties):**
19. **Amount Requested:**
20. **Amount Matched (dollar-for-dollar of total request):**
21. **How did you hear about this grant opportunity?**

The Kansas Volunteer Commission will provide grant funds available under AmeriCorps to expand the capacity of community-based entities to recruit, engage, and retain historically underrepresented volunteers in order to address critical community issues. Therefore, the Commission seeks to fund capacity-building efforts that remove barriers to engage volunteers from historically underrepresented areas including but not limited to BIPOC, LGBTQI+, veteran and military family communities, as well as persons in rural areas and persons with disabilities.

To request a grant, applicants must successfully answer the following questions in your narrative.Please provide your responses in this document under each section. All application materials are due by 5:00PM on Monday, September 25, 2023. Final application materials must be emailed to [volunteer@ksde.org](mailto:volunteer@ksde.org).

**EXECUTIVE SUMMARY** (approximately 150 words)

Please provide a brief summary about the project you will implement with requested funds.

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**MISSION SUMMARY** (approximately 150 words)

Please provide a brief summary of program’s mission and purpose and how this project will help meet that mission and purpose.

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1. **Statement of Need**
2. Describe why you are applying for the VGF grant and what you hope to achieve.
3. Describe the specific community issue(s) you plan to address and cite relevant research and data that supports why the issue(s) need to be addressed.
4. Describe the historically underrepresented volunteer group(s) you plan to recruit with this project and data that supports why this population was selected.
5. Describe how the VGF grant will help your organization build the capacity it needs to better recruit your historically underrepresented volunteer group and address the community issue(s) you have found.

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1. **Goals and Impact**
2. What are the goals of your project? How will you measure success?
3. What is the intended community impact of your project?
4. What is the intended impact on your volunteer or mentoring program? Include the changes or benefits that will result from the program (i.e., increased skills, knowledge, or capacity).
5. How will the data collected throughout the project period be used to change and improve strategies and services?
6. How many other volunteers or mentors does your organization estimate it will need to recruit to meet these goals?

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1. **Plan**
2. Describe the plan for the proposed project and include the following items:
   * A list and description of project activities.
   * A timeline showing what you plan to accomplish to meet project goals on a monthly or quarterly basis throughout the grant period. NOTE: The grant period runs from January 1, 2024 – December 31, 2024.
   * A description of collaborations and partnerships, explaining the roll each partnership will play in meeting project goals.

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1. **Resources**
2. What resources do you have that will make your proposed activities a success?
3. Who will be the lead staff and/or lead volunteer managing this initiative? Explain why they are qualified to lead your organization/program through this project.
4. What infrastructure have you developed to ensure effective project oversight?
5. Provide examples of your organization’s prior experience administering similar projects or programs.
6. Discuss the level of buy-in or organizational commitment your executive leadership and community partners have for this project.

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1. **Fiscal Oversight**
2. Describe the demonstrated experience your organization has in managing grants.
3. What is your current organizational budget?
4. How will you ensure compliance with grant requirements?
5. What infrastructure have you developed to ensure effective fiscal oversight?
6. What experience does your organization have managing federal and non-federal grants?

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1. **Cost Effectiveness and Budget Adequacy**

Reviewers will consider the quality of the application’s response to the following criteria below. **These criteria will be assessed based on the budget submitted. No narrative should be entered. Use the VGF 2023 Budget Form provided.**

* Budget is submitted without mathematical errors and proposed costs are allowable, reasonable, and allocable to the award.
* Budget is submitted with adequate information to assess how each line item is calculated.
* Budget is following in compliance with the budget instructions.
* Match is submitted with adequate information to support the amount written in the budget.
* The amount of match resource commitments, type of commitments (in-kind and/or cash), and the sources of these commitments is provided.

**Signature Authorization: To the best of my knowledge and belief, all the information in this application is true and correct, the document has been duly authorized by the governing body of the applicant and the applicant will comply with all grant requirements if the assistance is awarded.**

Typed Name & Title of Authorized Representative:

Signature of Authorized Representative: Date: