

National Alliance of Faith and Justice 2011 Martin Luther King Jr. Day of Service

MLK 2011 SUB GRANTEE APPLICATION

Before proceeding, carefully read the **Request for Proposals (RFP)** for information about this grant. This is a separate document. The submittal information is at the end of this application. There are four sections to this application:

- 1. APPLICANT INFORMATION
- 2. ORGANIZATION BACKGROUND
- 3. PROJECT INFORMATION
- 4. BUDGET INFORMATION

Note that the space allocated in the template expands as necessary when you type, and the existing spacing is not necessarily an indicator of the quantity of text required. Please be sure that your responses are sufficient and succinct.

1. APPLICANT INFORMATION				
Name of Organization:				
EIN:				
*Sub-grants will not be				
awarded to individuals				
Street Address:				
City: State:	ZIP:			
Mailing Address (if different fr	om above):			
City: State:	ZIP:			
Project Contact Person:				
Title:				
Main Phone Number:	() -			
Alternative Phone Number:	() -			
Mobile Number:	() -			
Fax Number:	() -			
Main Contact E-mail:				
Alternative E-Mail:				

Ormanization type (places should see	
Organization type (please check only one	• •
Nonprofit (national, state or local)	Government agency
K-12 School	College/University
Faith-based organization	Other
Amount Requested:	
	0 40,000
\$1,000\$2,500\$5,000\$7500 _	\$10,000
See the recruitment goals/strategies expectations	associated with these grants amounts in the
"PROJECT GUIDELINES" included in the RFP	
2. ORGANIZATION BACKGROUND	
BRIEF STATEMENT OF ORGANIZATION'S	HISTORY, MISSION, GOALS
PRIOR MLK DAY OF SERVICE EXPERIENCE	CE:
If your organization has been involved in prior	MIK Day of Service programs please
, ,	, , , ,
briefly describe the scope of former projects a	and your overall prior experience.
PAST GRANT EXPERIENCE	
Briefly explain your experience with managing	n other federal funds, state grants
foundation grants or other grants.	

FISCAL CONTROLS

Respond to the following four questions regarding fiscal controls:

1) What is your current organizational budget and what percentage of the budget would this grant represent? 2) Who are the key staff responsible for fiscal oversight, and what past experience will they bring to program? Detail the responsibilities of each key staff member. 3) Describe your general accounting system and fiscal controls. 4) What is your system for tracking revenue, expenditures, budgeting, cost centers, donations and all grants funds received?

3. PROJECT INFORMATION

Please briefly describe the community need, your MLK objectives (outcomes), and planned projects.

COMMUNITY NEED

Identify the **specific** community need/s that your program will **focus** on. Support with statistics.

PROGRAM OBJECTIVES	
Identify at least three objectives or outcomes for your overall MLK2011 program	٦.

PROJECT START DATE:	E	END DATE:	

PROJECTS

Describe the planned projects. Explain the estimated total number of projects. Include how the project/s promotes the life and teachings of Dr. King. Demonstrate how your project/s will bring the diversity of the community together.

JUSTICE SUNDAY™/PEN OR PENCIL™

Describe your plan to promote the JUSTICE SUNDAY[™], PEN OR PENCIL[™] RENEW THE NEIGHBOR AND THE HOOD[™] and/or PEN OR PENCIL[™] SNCC to existing and new networks and the plan to engage participants, record acts of service, and collect stories.

SIGNATURE SITE

Describe your plan and strategy for your Signature Site.

SIGNATURE PROJECTS Describe your Signature Project/s plan.

SUST	AINA	BIL	ITY

Demonstrate how the grant will lead to sustainable efforts beyond the actual Day of Service. This involves utilizing RENEW THE NEIGHBOR AND THE HOOD[™] and or JUSTICE SUNDAY[™] as a way to continue to involve people and engage new participants in service opportunities. Describe how this leads to sustainability throughout the year.

ORIENTATION, REFLECTION & CELEBRATION

Please briefly describe how you will orient volunteers on the program day, your plans for a reflection activity and your concluding activity or celebration plan.

OUTPUTS			
# VOLUNTEERS for MLK WEEKEND			
# PARTICIPANTS FOR PEN OR PENCIL™			
# PARTICIPANTS FOR JUSTICE SUNDAY™			
# PROJECTS:			
# PARTNERS:			

CORE NETWORK or PLANNING COMMITTEE

Provide information regarding your Core Network or Planning Committee (if you have or plan to have one): to plan and organize you're MLK Program in terms of composition, roles, frequency of meetings, etc.

LIST NAME AND ROLE OF PRINCIPAL and/or POTENTIAL PARTNERS

#	Partner Name	Partner Role
1		
2		
3		
4		
5		
6		
7		
8		

VOLUNTEER RECRUITMENT & REGISTRATION

Please briefly describe your process for reaching and engaging volunteers and diverse sectors of your community, including youth. Please see the recruitment expectations for each of the four grant amounts in the PROJECT GUIDELINES above. Describe your plan to electronically register the full contact information of your volunteers.

DATA COLLECTION

Please briefly describe your plan and process for collecting data (numbers or participants, number of volunteer hours etc) and evaluating your project.

MEDIA AND PROMOTION PLAN

Describe your plan to engage media and your plan for promotion and exposure for the maximum impact of your program.

EXECUTIVE SUMMARY

Please provide a one paragraph executive summary of your overall program based on the Project Information provided above. This will be used for promotion and marketing purposes. Maximum 150 words.

4. BUDGET INFORMATION

Please provide a detailed budget of planned expenditures. Requested amount may not exceed 30% of the total project budget, while total matching funds = 70%. All categories require tracking of receipts.

Category	Funds	Matchi	Total			
	from NAFJ	Cash	In-Kind			
A. Salaries and Benefits of staff						
MLK City Director						
Add calculation # hrs/ week x \$#/hr. x # weeks						
$\#$ TIIS/ week x ϕ #/TII. x $\#$ weeks						
Staff (accounting, etc)		L				
Explain Role and Add calculation # hrs/ week x \$#/hr. x # weeks						
# fils/ week x \$#/fil. x # weeks						
Volunteer Staff Explain main role for each – Project c	oordinator ra		ooruitmont r	ocource		
development, etc. Calculate as follows						
value of volunteer hour. Ref: Independent				(••••••••		
B. Transportation and Travel						
Requires explanation						
C. Project Expenses						
Paint, tools, food, drinks, etc. Add line			egory. Add ca	alculation		
for each main area. E.g. Item Cost X	Quantity = To	otal				
D. Promotional Items						
T-shirts, caps, publicity, etc		1	l			
E. Contractual Services						
F. Printing						

Program book, fliers, registration materials, etc. (specify)		
G. Other (specify):		
TOTALS		

BUDGET NARRATIVE

Provide additional explanation regarding the expenses outlined in each budget category as it relates to the program.

Explain the source and amount of matching funds and confirmation of funds secured already.

SUBMITTAL INFORMATION

Please complete the application: "MLK2011 SUB GRANTEE APPLICATION." Do not send any additional information, only the completed "MLK 2011 SUB GRANTEE APPLICATION."

Submit your completed application (Subject: "MLK 2011 Grants") to: volunteer@nafj.org (This is the preferable way to submit the application).

To fax in your application please send to (Subject: "MLK 2011 Grants"): (703) 765-9761.

To mail your application, please send to: National Alliance of Faith and Justice MLK 2011 GRANTS P.O. Box 77075 Washington DC 20013-7075

The deadline for completed proposals is on or before 5pm EST, Wednesday, September 15, 2010. Applications will NOT be accepted after this deadline.

Upon receipt of your proposal a confirmation e-mail will be send to acknowledge receipt of your application.