POWERED BY PARTNERSHIPS

Create Solutions

Measuring Outcomes

Lasting Change

Improve Lives

Live United

Develop Strategies

Invest Resources

United Way

United Way of Greater Augusta

UNITED WAY GREATER AUGUSTA

Vision

To be the leader that has United the community toward positive change
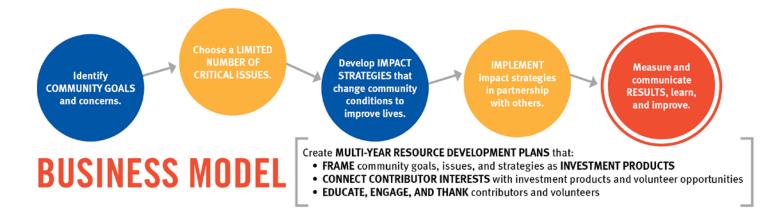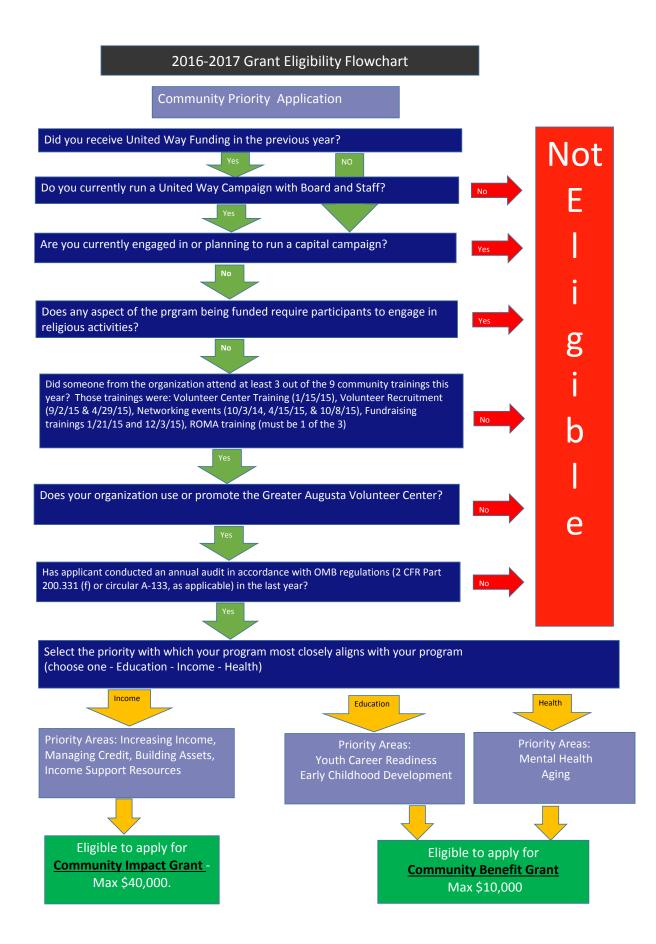
Mission

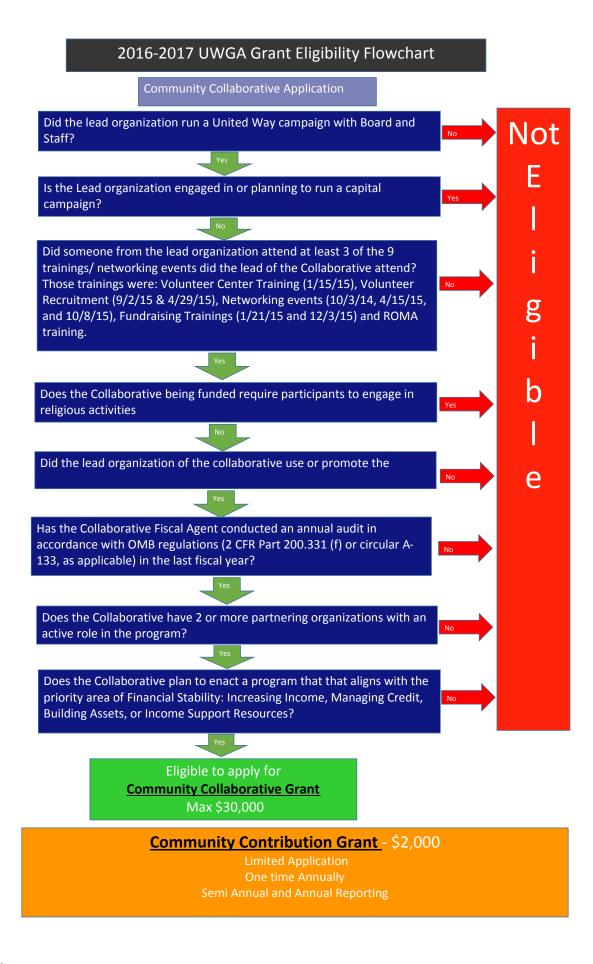To serve as a catalyst to improve the lives of people in our community.

Values

Community Focused
Partnerships
Stewardship
Accountable
Transparent

GIVE	ADVOCATE	VOLUNTEER
Seen as collaborative facilitators	Empowering & promoting exceptional community engagement	More personally relevant to more individuals
Stakeholders are inspired to specific action	Driving impact through greater speed & consistency of execution	Stakeholders have a personal attachment to the effort & results
Trusted as effective, accountable, return on investment	Aligned for greater agility & effectiveness	Celebration

BUSINESS MODEL

Identify COMMUNITY GOALS and concerns.

Choose a LIMITED NUMBER OF CRITICAL ISSUES.

Develop IMPACT STRATEGIES that change community conditions to improve lives.

IMPLEMENT impact strategies in partnership with others.

Measure and communicate RESULTS, learn, and improve.

Create **MULTI-YEAR RESOURCE DEVELOPMENT PLANS** that:
- **FRAME** community goals, issues, and strategies as **INVESTMENT PRODUCTS**
- **CONNECT CONTRIBUTOR INTERESTS** with investment products and volunteer opportunities
- **EDUCATE, ENGAGE, AND THANK** contributors and volunteers

2016-2017 Grant Eligibility Flowchart

Community Priority Application

Did you receive United Way Funding in the previous year?

Yes → / NO →

Do you currently run a United Way Campaign with Board and Staff? — No → **Not Eligible**

Yes ↓

Are you currently engaged in or planning to run a capital campaign? — Yes → **Not Eligible**

No ↓

Does any aspect of the prgram being funded require participants to engage in religious activities? — Yes → **Not Eligible**

No ↓

Did someone from the organization attend at least 3 out of the 9 community trainings this year? Those trainings were: Volunteer Center Training (1/15/15), Volunteer Recruitment (9/2/15 & 4/29/15), Networking events (10/3/14, 4/15/15, & 10/8/15), Fundraising trainings 1/21/15 and 12/3/15), ROMA training (must be 1 of the 3) — No → **Not Eligible**

Yes ↓

Does your organization use or promote the Greater Augusta Volunteer Center? — No → **Not Eligible**

Yes ↓

Has applicant conducted an annual audit in accordance with OMB regulations (2 CFR Part 200.331 (f) or circular A-133, as applicable) in the last year? — No → **Not Eligible**

Yes ↓

Select the priority with which your program most closely aligns with your program (choose one - Education - Income - Health)

Income ↓ / Education ↓ / Health ↓

| Priority Areas: Increasing Income, Managing Credit, Building Assets, Income Support Resources | Priority Areas: Youth Career Readiness Early Childhood Development | Priority Areas: Mental Health Aging |

↓ / ↓ / ↓

Eligible to apply for **Community Impact Grant** - Max $40,000.

Eligible to apply for **Community Benefit Grant** Max $10,000

2016-2017 UWGA Grant Eligibility Flowchart

Community Collaborative Application

Did the lead organization run a United Way campaign with Board and Staff? — **No** →

↓ **Yes**

Is the Lead organization engaged in or planning to run a capital campaign? — **Yes** →

↓ **No**

Did someone from the lead organization attend at least 3 of the 9 trainings/ networking events did the lead of the Collaborative attend? Those trainings were: Volunteer Center Training (1/15/15), Volunteer Recruitment (9/2/15 & 4/29/15), Networking events (10/3/14, 4/15/15, and 10/8/15), Fundraising Trainings (1/21/15 and 12/3/15) and ROMA training. — **No** →

↓ **Yes**

Does the Collaborative being funded require participants to engage in religious activities — **Yes** →

↓ **No**

Did the lead organization of the collaborative use or promote the — **No** →

↓ **Yes**

Has the Collaborative Fiscal Agent conducted an annual audit in accordance with OMB regulations (2 CFR Part 200.331 (f) or circular A-133, as applicable) in the last fiscal year? — **No** →

↓ **Yes**

Does the Collaborative have 2 or more partnering organizations with an active role in the program? — **No** →

↓ **Yes**

Does the Collaborative plan to enact a program that that aligns with the priority area of Financial Stability: Increasing Income, Managing Credit, Building Assets, or Income Support Resources? — **No** →

↓ **Yes**

Not Eligible

Eligible to apply for
Community Collaborative Grant
Max $30,000

Community Contribution Grant - $2,000
Limited Application
One time Annually
Semi Annual and Annual Reporting

Introduction

United Way of Greater Augusta (UWGA) is issuing this **Request for Proposals** (RFP) to solicit applications for its annual funding made available through donations from the community. The United Way of Greater Augusta (UWGA) partners with organizations by funding both existing and new programs, measuring outcomes, and embracing accountability.

All Proposals must be received no later than 12 midnight on Sunday, March 6th via electronic submission through the Common Grant Web site. Please contact UWGA staff if you are having technical difficulties.

Grants typically range from $1,000 to $40,000. The average amount in FY15 was $12,000. All allocated funds must be expended between July 1, 2016 and June 30, 2017.

Fiscal Information

Projects and programs funded will be required to submit programmatic and annual end of grant-cycle financial reports to UWGA. Payment will be made via ACH deposit on or about the 15th of each month.

Community Investment Fund Request Timeline

January 6, 2016	Request for Proposals is issued
March 6, 2016 (12 midnight)	Deadline for receipt of grant proposals
March 15, 2016	Site Visits (Backup date is March 16th)
May 25, 2016	Applicants notified of awards process
July 1, 2016	Project period begins
January 15, 2017	Semi-annual reports due
	For services provided: July 1, 2016 – December 31, 2016
July 15, 2017	Final reports due
	For services provided: July 1, 2016 – June 30, 2017.

Questions

Questions about this Request for Proposals may be addressed to:

Email: awardfunding@unitedwayga.org   **Telephone**: (540) 885-1229

Funding Priorities

Throughout 2016-2017, United Way of Greater Augusta will be offering five different grant options for applicants. The grant priorities were established through a community assessment process that included but not limited to: data analysis, town hall meetings, community conversations, and surveys. Projects or programs with measurable outcomes within the program descriptions below will be considered for funding.

The five grant options are listed below: *(after you have determined the grant in which you are applying-click on it and it will link you directly to the application on Common Grant)*

Community Impact Grant-Income

Maximum Funding per grant: $40,000

The Community Impact grant will focus on Financial Stability which is the top priority area for the United Way of Greater Augusta. This grant aims to foster partnerships so that residents become financially independent.
Areas: Increasing Income, Managing Credit, Building assets, Income Support Resources

Community Benefit Grant-Education

Maximum Funding per grant: $10,000

The Community Support grant will focus on Education for the United Way of Greater Augusta. This grant aims to foster partnerships so that identified Education areas of need are addressed in the community.
Education Areas: Schools Readiness and Youth Career Readiness

Community Benefit Grant-Health

Maximum Funding per grant: $10,000

The Community Support grant will focus on Health for the United Way of Greater Augusta. This grant aims to foster partnerships so that identified Health areas of need are addressed in the community.
Health Areas: Mental Health and Aging

Community Collaboration Grant-Income

Maximum Funding per grant: $30,000

The Community Collaboration grant will focus on Financial Stability which is the top priority area for the United Way of Greater Augusta. This grant aims to create a collaboration among two or more organizations to move residents to financial stability.

A collaboration is a relationship of two or more organizations that includes a jointly–developed structure and shared responsibility and goals, mutual authority and accountability for success and sharing of resources and rewards.

Areas: Increasing Income, Managing Credit, Building assets, Income Support Resources

Community Contribution Grant-Education, Income or Health

Maximum Funding per grant: $2,000

The Community Contribution grants of $2,000 or less awarded in the United Way focus areas of Education, Income or Health. They are awarded for smaller projects.

This grant has a limited application questions and can be applied for year-round until funds are expended.

Contract Period

Contracts awarded under this **Request for Proposals** will commence July 1, 2016 and must end on or before June 30, 2017. Awards amounts could be subject to change in the event of an unforeseen decrease in anticipated UWGA income.

Documents Required (after funding awarded) from Grant Recipients 2016-2017

- Program Reports: Provide required reports listed below at or before the designated deadline. All reports will be made available for public inspection. Report forms and instructions will be provided to recipient organizations for completion.
    - Mid-year (due January 15, 2017)
        - Logic Model with mid-year results
        - Demographic Report
    - Annual end of grant cycle (Due July 15, 2017)
        - Logic Model with Final results
        - Demographic report
        - Financial reports on the use of these funds.
- Memorandum of Understanding (and all attachments): Community Partners must read, sign, comply and return a Memorandum of Agreement

Attachments Required with Application

1. 501(c)3 – Tax Determination Letter
2. Complete 2015 990 Tax Return
3. Profit and Loss Statement Previous versus Current (Annualized on organization's fiscal year.)
4. Profit and Loss Budget versus Actual (Annualized on organization's fiscal year.)
5. Board of Directors Roster
   a. Name
   b. Organization
   c. Years on the Board
   d. Gender
   e. Ethnicity
   f. City or County of Residency
   g. Other Non-profit Boards Currently serving on
   h. Age Range
      i. 20-39
      ii. 40-59
      iii. 60+
6. Program Logic Model
7. (If Applicable) Collaboration Worksheet

Grant Application Questions

General Questions

Grant seeker Name (Name of Organization)

Program Name

Total Amount Requested

Top Executive Leader

1. Name
2. Title
3. E-Mail

Board Chair

1. Name
2. Title
3. E-Mail

Organization Address

Organization Phone Number

Organization Web Site

Organization Facebook

Organization Twitter

Grant seeker Fiscal Agent Contact (if applicable)

1. Name
2. Title

Organizational Questions

1. Mission
2. Vision (if applicable)
3. Values (if applicable)
4. Organization Overview (500 characters/ 75 Words or less)
5. Organization History (500 characters/ 75 Words or less)
6. Year Established (50 characters/10 words)
7. Geography/Area Served: (drop down: Augusta County, Staunton, Waynesboro, Nelson, Bath, Highland, Rockbridge, Rockingham, Harrisonburg and Other)
8. Does your organization have its own foundation? If yes, please explain the purpose of the foundation and the current assets in the foundation both in material and monetary assets. Does your organization have an endowment? If yes, what is its value and long-term purpose?
9. Are you currently engaged in or planning to run a capital campaign, or non-event fundraising within the next year? If so, please indicate the campaign's purpose, amount and target date.
    a. Campaign purpose:
    b. Amount:
    c. Estimated campaign end date:
10. What is the limit on your organization's liability and officer/director insurance?
11. How many hours have volunteers donated to your organization in the past year?
12. How does your organization provide staff development and training? Over the course of the most recently completed fiscal year, how many hours of training that support the program did staff members receive? What percentage of CURRENT agency staff participated? What topics were covered?
13. How does your organization provide Board development and training? Over the course of the most recently completed fiscal year, how many hours of training that support the program did Board members receive? What percentage of CURRENT agency Board participated? What topics were covered?
14. How many seats are on your Board of Directors (per your bylaws) and how many are currently open? If more than 30% of your Board seats are vacant please outline a plan for filling those seats by July 1, 2016.
15. In the last 12 months, how many times did your board meet and at how many was a quorum present?
16. How often are your By-Laws reviewed by the Board of Directors? What date were they last amended?
17. How often does your Board receive and review financial reports? Do those reports compare income and expenses to budgeted expectations?

18. How often does your board receive and review program reports? Do those reports compare the expected outcomes for grants to those it achieved?
19. What is your board term and how often can it be renewed?
20. Briefly describe changes in leadership and any major staff turnover your agency has experienced in the past 12 months.
21. Does your organization have a strategic Plan? Yes_____   No_____

    If yes, does the plan reflect continuous use of assessment, planning, implementation, achievement of results, and evaluation?

    If no, please submit a timeline for the development of a strategic plan.

Financial questions

1. What is your fiscal year?
2. Please explain any major difference between the budgeted and actual for a year represented on the report provided
3. Who generates your financial reports? If generated in house, is this individual bonded or do you maintain employee theft insurance? If external, please list the firm.
4. Has your organization ended two or more of the past five years with an operating deficit? If yes, please explain the strategies put into place to eliminate this deficit. Include the use of cash reserves to eliminate deficit.
5. In the most recently completed fiscal year did your organization balance the budget through the use of reserve or carryover funds? Is your organization planning on doing so for FY16?
6. How many months of operations can be covered by your agency's cash reserve?
7. Does applicant conduct an annual audit in accordance with OMB regulations (2 CFR Part 200.331 (f) or Circular A-133, as applicable)? Most recent fiscal year completed?
8. Were any audit findings specifically related to awards from UWGA reported? If yes, please contact UWGA Staff.
9. *Does the most recent audit report reveal Material Weakness (Y or N) or Significant Deficiencies (Y or N)?*

Program Questions

1. Program Name
2. Program Overview
3. Funding Cause: Drop down provided by Common Grant
4. Did our organization fund this program previously? If so what were the actuals versus the projected outcomes?
5. Program Geography/Area Served Area (drop down: Augusta County, Staunton, Waynesboro, Nelson, Bath, Highland, Rockbridge, Rockingham, Harrisonburg and Other)
6. What client changes will indicate the success of your program? How does this compare to results from previous years?
7. Does any other organization provide a similar program or service? How do these programs differ?
8. What agencies/programs are serving as partners specific to this program? Please provide responsibilities of each partner.

9. Explain the process your organization will use to determine if your program participants are eligible for your program.
10. How is the client expected to participate within the program toward his/her own success? (limited words and characters)
11. Number of people served, counting each person only once. (Check box indicating < or > than 125% of the federal poverty guidelines.
12. What is your organization's target population?
13. How many volunteers worked in support of this program last year and how many hours did they donate?

Program Budget (forecasted) (fill in the blank on site)

1. General Information
    a. Fiscal Year
    b. Year End
    c. Actual/Planned
    d. Cash/Accrual
2. Statement of Activities (Income and Expenses)
3. Income: Support
    a. Board Gifts
    b. Government Grants (e.g. CAPSAW)
    c. Foundations (e.g. Community Foundation, Augusta Health Foundation)
    d. Corporations
    e. Workplace Giving (e.g. United Way)
    f. Other
4. Income: Revenue
    a. Government Contracts
    b. Earned Income
    c. Consulting Contracts
    d. Other Revenue
    e. Total Income (Support + Revenue)
5. Expenses
    a. Salaries and Wages
    b. Insurance and Benefits
    c. Payroll Taxes
    d. Consultants and Professional Fees
    e. Travel
    f. Equipment
    g. Supplies
    h. Printing and Copying
    i. Telephone, Fax, and Internet
    j. Postage and Delivery
    k. Rent and Utilities
    l. In-kind
    m. Depreciation
    n. Other Expenses
    o. Total Expenses

Logic Model (submit with application)

Organization: Program:

Priority Area: Amount Requested:

Family: [   ]   Agency: ___[   ]___   Community: ___[   ]___

| Identified Problem, Need, Situation

What needs to change? | Service or Activity

Identify the # of clients served.
Identify the time frame for the project. | Outcome

General statement of results expected | Indicator

Projected # of clients suspected to achieve each outcome divided by the number served: the % expected to achieve | Actual Results

The ACTUAL # of clients achieving the outcome divided by the number served; the % of clients who achieved each outcome | Measurement Tool

What evidence will you collet to prove your outcomes were achieved? | Data Source

Include collection procedure, personnel responsible | Frequency of Data Collection and Reporting |
|---|---|---|---|---|---|---|---|
| (Planning) | (Intervention) | (Benefit) | (Performance) | (Performance) | (Accountability) | (Accountability) | (Accountability) |
| | | | | | | | |

Mission:

Mission:

Proxy Outcome:

Proxy Outcome: