



Episcopal Charities  
A Commitment to Caring

## Basic Human Needs Grant Application 2010 Grant Cycle

### ABOUT THIS FORM:

This form has been created using Microsoft Word. While we understand that not every applicant may have access to a computer and this program, nonetheless we strongly urge you to complete the document using a computer.

On most pages, gray boxes indicate where information should be typed. To type your answer, simply click the gray box once and begin typing. (The gray boxes will not appear when the document is printed.)

For your convenience, the specific sections of the application form referred to on p. 3 may be accessed directly from that page—simply hold down the control key and click with your mouse.

PLEASE NOTE that there are some changes to grant guidelines, as well as to our process for application. **Applicants are instructed to indicate intent to apply by Friday, October 2 at 5:00 p.m.** This may be done by sending a simple letter/message including name of program and name of sponsoring parish, contact name and information for the arrangement of a site visit, and a notation that you have read the new eligibility requirements and grant guidelines (*see next page*). This intent to apply may be submitted by e-mail to [ssmith@dioceseny.org](mailto:ssmith@dioceseny.org) or by mail to The Rev. Sam Smith, Episcopal Charities, 1047 Amsterdam Ave., New York, NY 10025.

*Questions about this form or about Episcopal Charities may be directed to The Rev. Sam Smith, Associate Director for Programs.*

# General Eligibility Requirements and Grant Guidelines

The Board of Episcopal Charities has recently reviewed grant eligibility guidelines in an ongoing effort to help strengthen parish-based human service programs. Our task is to exercise care, objectivity, and responsibility in identifying those programs that meet our funding guidelines, while being certain not to exclude any eligible program that may have been supported in the past.

Please consider the following requirements as your starting point. Any program submitting an application for support must be able to demonstrate:

## Congregational Connection

Programs must be sponsored by and in partnership with one or more Episcopal congregations within the Diocese of New York as evidenced by the presence of these characteristics:

At least one of these three:

- The congregation is ultimately responsible for the effective delivery of services and the management of the program and the grant funds for which it applies;
- Members of the congregation are involved in the program's activities, as a significant number of volunteers, and/or a majority of the board, or a majority of the advisory committee members;
- The congregation provides material financial and/or substantial in-kind support to the program.

At least one of these two:

- The program is described as an integral part of the congregation's mission;
- The program is clearly identified as a ministry of the congregation.

## Community Outreach

The program must represent an effort by a local congregation or group of congregations to respond to an identified need affecting members of the community in which the congregation is located.

## Clients' Eligibility for the Service

Any person needing the service offered is eligible to receive the service. Eligibility for services cannot be determined by church membership, faith, or participation in church activities.

## Non-Religious Program Content

Programs must be non-sectarian and inclusive, and services provided cannot include religious content.

## Quality and Impact of Program

Episcopal Charities will consider the following issues as it evaluates grant applications:

- How are clients changed in ways that give promise of more productive and satisfying lives?
- Are there alternative programs in the community?
- Is the program sustainable?
- How many clients are served?
- How many services are offered?
- What is the quality of services delivered?
- Is there evidence of efforts to collaborate with and/or leverage other outreach efforts in community?

## Grant Allocation Limitation

The average grant in our Basic Human Needs cycle in 2009 was \$7,775 with a range of \$1,000 to \$19,000. Grant requests should fall roughly within these parameters.

Episcopal Charities seeks to make a substantial impact on all of the Parish Programs that it supports. To achieve this goal, we will only target funding Programs where our financial support would be a minimum of 10% and a maximum of 70% of the Program's operating expenses. Funding levels of 5% or less will generally be denied.

Because Episcopal Charities believes this it is important for a Program to seek and secure numerous sources of funding in order to assure successful sustainability, we will only fund programs where our financial support would be less than 70% of prior year operating expenses. Additionally, any Program that receives our maximum 70% funding would automatically have its maximum funding reduced over the following 3 years to 60%, 50%, and then 40% thereafter.

# Basic Human Needs Grant Application 2010 Grant Cycle

1 <sup>st</sup> Time Mandatory Grant Writing Workshop	Wednesday, September 23, 2009	6:00 PM
Intent to Apply Deadline	Friday, October 2, 2009	5:00 PM
Grant Application Deadline	Friday, October 16, 2009	5:00 PM
Notification Letters Mailed	Friday, January 15, 2010	

**If this is your first application:** All new applicants must attend the grant writing workshop, which will be held on Wednesday, September 23, 2009 at 6:00 PM in Room 105 of Diocesan House.

**Intent to Apply:** All applicants are asked to indicate their intent to apply for a grant by sending a simple letter/message including name of program and name of sponsoring parish, contact name and information for the arrangement of a site visit, and a notation that one has read the new eligibility requirements and grant guidelines. Intent to apply may be submitted by e-mail or regular mail to The Rev. Sam Smith, Associate Director for Programs, by Oct. 2, 2009.

**If you'd like help with the application:** Episcopal Charities' staff will be pleased to review a draft of your proposal several weeks before the deadline. This review will help you revise the proposal, if needed, and submit a complete proposal. However, this staff review does not guarantee that your proposal will be funded. To be reviewed, please submit your application by Monday, October 5, 2009.

**Core Values:** Episcopal Charities considers the following issues as it evaluates grant applications:

- How are clients changed in ways that give promise of more productive and satisfying lives?
- Are there alternative programs in the community?
- Is the program sustainable?
- How many clients are served?
- How many services are offered?
- What is the quality of services delivered?
- Is there evidence of efforts to collaborate with and/or leverage other outreach efforts in community?

**Note to Feeding Programs:** Episcopal Charities will only fund feeding programs that also provide beyond emergency services. For examples, see the explanation within this application.

**Applications should be hand-delivered or mailed to:**

The Rev. Sam Smith  
Episcopal Charities  
1047 Amsterdam Avenue  
New York, NY 10025

*(To reach Diocesan House on foot, please note that, due to construction, one may need to enter the Cathedral Close by the north drive [nearest the Cathedral], pass the guard booth, then turn right, before Cathedral House. There is currently no parking available on the Cathedral Close.)*

**We must receive applications  
by 5:00 p.m. on October 16.**

**Questions?**

Contact The Rev. Sam Smith,  
ssmith@dioceseny.org,  
or 212-316-7426

**Be Sure that:**

- ✓ Every line on the application form is filled in either with information or "Not Applicable."
- ✓ You file a separate proposal and budget for each individual program.
- ✓ The proposal follows the outline, in order, with no omissions.
- ✓ Each line of the checklist (page 1) is checked off and initialed.
- ✓ One signed and dated copy of the checklist is filed with the application materials.

**Late applications will not be accepted**

**Checklist of Required Attachments: BHN 2010 Grant Cycle**

Item and Order of Application:	Initialed:
1 initialed copy of this checklist page	
1 signed copy of the <a href="#">"Important Notice"</a> , p 3	
25 copies of EPISCOPAL CHARITIES 2010 BASIC HUMAN NEEDS GRANT CYCLE SUMMARY SHEET and FINANCIAL INFORMATION, pp. 4, 5, 6, and 7	
5 copies of the <u>entire</u> application form (pages 3-9, 10, 12)	
<a href="#">Summary Sheet</a> , pp.4-5	
<a href="#">Basic Human Needs Financial Information</a> , pp. 6-7	
<a href="#">Sponsoring Congregation/Program Information</a> , p. 8	
<a href="#">Demographic &amp; Program Census Information</a> , p. 8	
<a href="#">Application Narrative Questions</a> , p. 9	
<a href="#">Program Vignettes</a> , p.10	
FEEDING PROGRAMS ONLY: <a href="#">Beyond Emergency Service checklist</a> , p.12	

**Provide appropriate attachments for your program type:**

**Parish-Based Programs:** Programs that are directly run and operated by the parish

Required:	1 copy, current (2009-2010) parish budget	
	1 copy of current vestry list	
	Either: 1 copy, 2008 certified audit, or 1 copy, 2008 Diocesan Audit Form	

**501(c)(3) Status Programs:** Programs operated by a free-standing 501(c)(3) status organization that is governed by the entire vestry, a significant number of the vestry, and/or the rector.

Required:	1 copy, current roster of board/staff	
	1 copy, year-to-date financial statement	
	1 copy, current (2009-2010) agency budget	
	1 copy, 2008 certified audit	
	copy, most recent annual report (if available)	

<b>Signature of Person Completing Application:</b>		Date:
<b>Signature of Rector or Clergy person in Charge:</b>		Date:
<b>Signature of Program Director (or Senior Warden):</b>		Date:



# Episcopal Charities

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## ***IMPORTANT NOTICE***

Read, sign and return with your application:

This application for a Basic Human Needs 2010 grant award is submitted with the understanding that a representative of my program agrees to attend Episcopal Charities' "Program Sustainability Institute" quarterly workshops.

Episcopal Charities will provide advance notice of these workshops and offer each one in the Manhattan diocesan offices *and* at an upstate New York location. These workshops are offered on Saturdays.

I understand that if a representative does not attend a program workshop (unless excused), Episcopal Charities may suspend its grant award to my program immediately.

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Program Director Signature

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Program Director Name

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Program

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Date

**EPISCOPAL CHARITIES 2010  
BASIC HUMAN NEEDS GRANT CYCLE SUMMARY SHEET**

Name of Program:

Name of Sponsoring Congregation:

Clergy-In-Charge:

Address:

Telephone:

Email Address:

Program Director/Lead:

Address:

Telephone:

Email Address:

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Type of program you are applying for (circle one):

Food Pantry

Soup Kitchen

Shelter

Literacy Program

Other:

Year program began:

Number of *unduplicated* adults served by program annually:

Number of *unduplicated* children/youth served by program annually:

Number of *unduplicated* women served annually:

Number of *unduplicated* men served annually:

For food pantries:

Number of food packages distributed annually:

For soup kitchens:

Number of meals served annually:



## Basic Human Needs Financial Information

Name of Program:

<b>PROGRAM INCOME:</b>	<b>2008 Actual</b>	<b>2009 Budget</b>	<b>2009 Actual as of Date:</b>	<b>2010 Budget</b>
Endowment				
Government Funds				
Grants (list separately):				
<i>Episcopal Charities</i>				
<i>Others:</i>				
Government Feeding Program Food Credits (Specify Program)				
Sponsoring Parish ( <i>cash outlay only</i> )				
Tuition/Fees ( <i>per week per client \$</i> )				
Other ( <i>describe</i> )				
<b>Total Income:</b>				
<b>PROGRAM EXPENSES (COSTS):</b>				
Staff Salary:				
(list positions)				
Fringe Benefits				
Insurance (specify type/insurer)				
Maintenance				
Other ( <i>explain if more than \$500</i> )				
Office Supplies				
Food (cash only)				
Food (Government food program credits)				
Trips				
Supplies (art, book, video)				
Explain:				
Rent (cash only)				
Utilities (electric, telephone, etc.)				
<b>Total Expenses:</b>				
<b>Net Surplus or (Deficit)*</b>				

Name of Person Completing this Budget:

## Financial Information (Continued)

- For the 2008, 2009 and 2010 budget columns, income and expenses must balance (be equal).
- Any line item in the 2010 budget that shows a 25% decrease or increase from the 2009 budget must be explained in writing and attached to this page.

**IMPORTANT: Review your budget for accuracy and complete the question below.**

Your 2010 grant request of \$            is            % of the program budget  
(no more than 70%).

**Additional Financial Information You Wish to Provide:**

## Sponsoring Congregation Information

Sponsoring congregation or diocesan entity:		
Congregation address:		
City:	State: <i>New York</i>	Zip:
Phone:	FAX:	Email:
Clergy person-in-charge of congregation:		IPC:

## Program Information

Program/agency name:		
Program address:		
City:	State: <i>New York</i>	Zip:
Phone:	Fax:	Email:
Program director:	Title:	No. years as director:
Number of paid staff:	Full time:	Part time:
Number of volunteers:	Full time:	Part time:

## Demographic and Program Census Information

This information is used by Episcopal Charities in seeking funding and does not influence the grants decision. Please estimate your program's client census and break down the total census numbers into the sub-categories listed. Be certain that the sub-category totals add up to the total census number provided. Briefly describe:

Target population served:
Principal services offered:

For soup kitchens, pantries, feeding programs only:

Number of meals served per year:
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For all other programs:

Number of clients, 2008:	Number of clients, 2009: (actual + projected to end of year)	Projected clients, 2010:
Males:	Males:	Males:
Females:	Females:	Females:
Adults:	Adults:	Adults:
Children/teenagers:	Children/teenagers:	Children/teenagers:

**Application Narrative Questions:** Please attach a Program Narrative on separate typewritten pages. Write no more than one paragraph for each numbered category below. The answers **must be titled and numbered, and must appear in the order shown below.**

### **1. Program History**

Year of founding.

The history of this program.

The type of needs assessment used to determine the need for this program.

The church and/or community resources, financial and material, that were (or are) used in funding or administering this program or agency, including number of years you have received funding from Episcopal Charities.

### **2. Program Description**

The mission of the program (Mission Statement) and the nature of services provided.

The days and hours of operation.

If applicable, certifications/licensing required of or held by your agency or staff (State/Federal).

The accomplishments of the program in the prior year and in the current year to date, including how the program significantly changes the lives of those served.

### **3. Congregational Connection**

The relationship between this program and the sponsoring congregation, including: a) the number of parishioners involved and their level of involvement and b) use of facilities and any related financial arrangements for their use.

The degree of oversight by the vestry and clergy.

The lines of accountability for each staff member to the director and rector (attach an organization chart if available).

Cash support provided by the sponsoring congregation. If none, explain why no cash support is provided.

If applicable, in-kind contributions and shared staff between the two institutions.

### **4. Use of Grant Funds Requested**

The specific use for the program funds requested and the aspects of the program that will change as a result of the funding requested.

How the funds would be used if the amount of your grant is less than the amount requested.

The impact on your program if this grant is not approved.

The impact on your program if the grant amount received in 2009 was less than the amount you requested.

### **5. Evaluation**

Goals: offer a maximum of 6 measurable goals. What is different this year?

Objectives: provide information about activities to achieve goals

## **Mandatory Vignettes:**

It is helpful to our development efforts to tell the stories of the people directly impacted by the work of the programs.

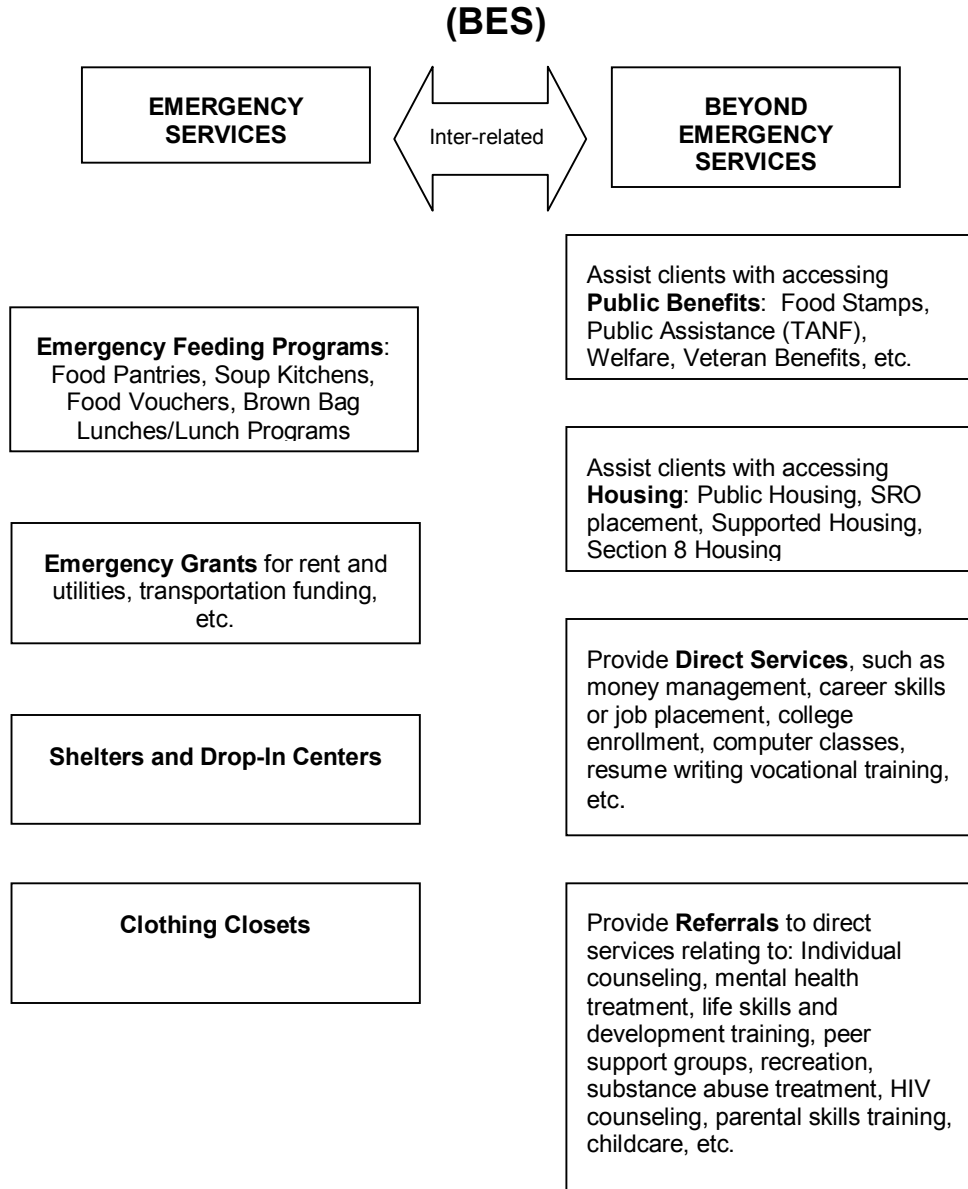
Please provide us with a few short stories (no more than 3 per program along with 1 or 2 program photos) that best illustrates the impact the program has had on a particular guest, her/his family or a volunteer/staff member. If we plan to use a vignette, we will contact you to discuss the release of this information in greater detail.

***Applications without vignettes submitted will not be considered.***

## What are Beyond Emergency Services?

*Most feeding programs offer much needed emergency services, such as: food pantries, soup kitchens, food vouchers, brown bag lunches and other lunch programs. Because Episcopal Charities seeks to address the root causes of hunger, all awards for grants to feeding programs must provide beyond emergency services.*

### A Comparison of Emergency Services and Beyond Emergency Service



## The BES Checklist

**Name of Program:**

**The following are ways that our feeding program is providing BES  
(place an "X" beside all that apply):**

	<b>Provision of a "street sheet" a listing of available community resources</b>
	<b>An information and referral volunteer or paid staff member assists guests at our feeding program with accessing Public Benefits, such as: Food Stamps, Public Assistance (TANF), Welfare, Veteran Benefits, etc.</b>
	<b>A volunteer or paid staff member assists clients with accessing housing: Public Housing, SRO placement, Supported Housing, Section 8 Housing</b>
	<b>The program provides budgeting and/or money management sessions to guests</b>
	<b>The program assists guests in building career skills and/or job placement</b>
	<b>The program provides computer classes</b>
	<b>Resume writing and/or other vocational training is provided either on site, or referrals are made by the program to other programs</b>
	<b>Support is given to individuals interested in entering college either through college entrance exam preparation, financial aid assistance, or other assistance with the college entrance application</b>
	<b>Referrals to direct services related to individual counseling, mental health treatment, life skills and development training, peer support groups, recreation, substance abuse treatment, HIV counseling, parental skills training, childcare, etc. are provided by the program</b>
<b>Other, please explain:</b>	