

MONTGOMERY ALLIANCE
2009/2010 Nonprofit Grant Process
INSTRUCTIONS

Montgomery Alliance seeks proposals from Montgomery County nonprofit agencies to address the following targeted areas of need:

- **Economic self-sufficiency**
Includes programs and services to assist unemployed and underemployed individuals to increase their employability or income and/or remain independent.
- **Non-emergency client assistance**
Includes programs that assist clients with health or dental care, transportation or other basic needs. (NOTE: This category does not include client assistance to prevent eviction or utility shutoffs.)
- **Nonprofit sustainability**
Includes expenses related to increasing a nonprofit's fundraising or services tracking/reporting capabilities or implementing mergers or consolidations.

Only proposals that address these three need areas will be accepted. Proposals must directly relate to the mission of the submitting agency. Proposals will be evaluated based on the following criteria:

- Proposal will **maximize the impact of a specific service** to the great extent possible, recognizing the limited grant funds to be awarded;
- Proposal clearly **demonstrates and documents the specific need** to be addressed; and
- Proposal clearly indicates how the agency will **measure the program's effectiveness**.

Funds Available – Individual grants will range from \$4,000 to \$7,000, depending on the total funds available.

Eligibility – Only nonprofit organizations that are physically located in Montgomery County are eligible to apply.

Deadline – All applications must be received by **5:00 p.m. on Wednesday, May 20, 2009**.

Number of Copies – Submit the original with the below required attachments, and seven (7) copies of the application only (*not including* the below required attachments.)

Mailing Address – All applications must be mailed or delivered to:

Montgomery Alliance
Nonprofit Grant Process
c/o Mary Lou Jacobs
30 Courthouse Square Suite 100
Rockville, Maryland 20850

Space Requirements – Applicants must respond to all of the questions contained in the grant application. The spacing of the questions on the first four pages may be adjusted to fit the length of your responses as long you answer all of the questions within four pages. Page 5 must be used for Attachment A and page 6 must be used for Attachment B. *Applications that exceed a total of six pages will not be considered.*

Font Size and Presentation – Only a font size equivalent to Times Roman 10-point or larger is acceptable. *Applications must be typed or computer generated.*

Required Attachments and Signatures – The application must be signed and dated by both the Agency Executive Director and President of the Board of the agency. If the same person holds both positions, a second leadership signature from an authorized Board member is required. The grant application will not be accepted without required signatures. ONE COPY of each of the following attachments must be included with the original copy of the application.

One copy of the following:

- List of members of the Board of Directors
- Most recent independent agency audit (no more than three years old). If unable to provide, please explain.
- Most recent filed 990 form
- Memorandum of Understanding for a collaborative program

Miscellaneous Attachments – Do not enclose cover letters, letters of endorsement, photographs, video tapes, annual reports, etc. These items will not be considered.

Nonconforming Applications – Only applications that are complete, include all required attachments and copies and comply with the above requirements on length and font size will be accepted for consideration for funding.

Questions -- Applicants may direct any questions to Mary Lou Jacobs, Grant Process Chair, at 240-314-8303.

Grant Award Notification –Written notification of grant awards will be mailed out to all applicants in mid-June.

Program Measures Instructions

Please complete each box on the Program Measures form, consistent with the following instructions.

Agency: Specify the applicant agency.

Program: Specify the *program* for which funds are requested (not the whole organization.).

Program Location: Specify the address at which *these program services* for which you are requesting funding will be delivered. If program location is confidential to protect clients, use your mailing address.

Hours/Days of Operation: Specify the hours and days of the week that these program services will usually be delivered (e.g., noon- 3 p.m., Monday – Friday).

Program Mission: Provide a one-sentence summary of the mission or purpose of the program.

Outcomes: are benefits or changes for individuals or populations during or after participating in program activities. **Indicators** identify what is being measured to track how well the program is achieving its outcome. An indicator is observable and measurable. An indicator should state the number and percent of participants who achieve a specific outcome. When an indicator is stated as a *projection* of what level of achievement the program hopes to accomplish, it is considered a target, not a promise.

To complete the statement of program measures:

- Start by stating the initial, intermediate and long term outcomes for your program. If your program provides emergency or one-time assistance, you may be able to identify only initial outcomes.
- Under each outcome, list the relevant indicator(s) you will use to track your program's success on outcomes.
- For each indicator, enter your estimates for the program's level of achievement for the period of July 1, 2009 through June 30, 2010 in the 2010 Estimated column. Enter *both numbers and percentages*. (If your request is funded, you will be required to complete the 2010 Actual column at the conclusion of the grant year and submit the program measures form with your final report.)

Outputs: Specify the direct products of program activities in the 2010 Estimated column. Outputs are usually measured in terms of the volume of work accomplished. They include the numbers of classes taught, counseling sessions conducted, educational materials distributed, and participants served.

Activities: Activities include the strategies, techniques, and types of treatment that comprise the program's service methodology. For instance, sheltering and feeding homeless families are program activities, as are training and counseling homeless adults to help them prepare for and find jobs.

At the bottom of the form, indicate the full name, title, and email address of the person who completed the form together with the date the form was completed.