FY26 Community Assistance Fund

Missoula County

INTRODUCTION

Thank you for your interest in applying to Missoula County's Community Assistance Fund (CAF) grant opportunity. CAF grants are awarded on an annual basis to non-profit and governmental entities which provide members of at-risk populations with one of the following basic needs: Food, Shelter, Medical Services, and Emergency Transportation.

At-risk populations are broadly described as groups of persons who experience temporary or permanent situations that interfere with their ability to access or receive assistance to meet their basic human needs. Such at-risk populations may include but are not limited to Children; Older adults; Persons with disabilities; Persons who live in an institutional or group center setting; Persons with chronic conditions; Persons who are economically disadvantaged; Persons with substance use dependency; Persons experiencing homelessness; Persons with limited access to transportation.

HIGHLIGHTS

- Read through the Notice of Funding Availability before beginning your application.
- Closing date: Friday, May 9, 2025, at 5 p.m. The grant portal will close and you will not be able to submit an application after that.
- Timeline: The county's 2026 fiscal year runs from July 1, 2025 until June 30, 2026. In May and June, 2025, applications will be evaluated and scored by a citizens review committee with recommendations for funding brought before the Board of County Commissioners (BCC) at the end of June or early July. An email will be sent to applicants after the BCC meeting to inform them of the outcome. This notice is a courtesy and is not a guarantee of funding. The recommendations will be taken under advisement as the county's budget is developed in July and August, 2025.
- Contracts: Once the county's budget is adopted in September, 2025, contracts with successful applicants will be drafted. Contracts executed after the county budget is adopted will be retroactive to July 1, 2025.
- **Program timeline**: Programs and projects must take place between July 1, 2025 to June 30, 2026.

ONLINE GRANT APPLICATION SYSTEM

A few notes about this online system:

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• **Tutorial:** If you are unfamiliar with the online application system, we encourage you to watch the tutorial video and other instructions provided by Foundant Technologies that is available at this link: https://support.foundant.com/hc/en-us/articles/4479853059991

- Character counts: Each of the text boxes in which you will insert your answers has a maximum character count. You will see that number below each box. Note that the number represents 'character count with spaces.'
- Offline document: It's recommended that you create a Word document offline for your own reference and use. This will help you keep the information organized, check the character count with spaces before adding to the system, and do a spell check. Then, copy/paste into the appropriate online fields. You may need to modify the formatting within the field once the text has been added.
- Goals sections: Pay close attention to how the goals, objectives, and implementation fields are presented. It may be a bit confusing to see how they are all connected in this online format. The goals and objectives will be included in the contract and you will be reporting the progress made on a quarterly basis.
- Auto-reply: Once you submit your application, you should receive an auto-reply email
 indicating the application has been received. If you do not receive this email, check your
 spam folder or contact us to verify it has been received.
- Saving and submitting your application: The system saves your application after every 100 characters are typed in. Also, at the very bottom of the application, in the lower-right-hand corner, there are two buttons. One is SAVE which allows you to save your application as you work on it. You can continue it another time. The other button is to Submit your application. Once you submit the application, it can not be retrieved.

Need help?

♣ If you encounter problems with the online system or have questions about the Community Assistance Fund grant opportunity, please reach out to our staff at grants@missoulacounty.us

(A) PROGRAM OVERVIEW

PROGRAM TITLE*

Descriptive yet succinct. 125 characters with spaces

Character Limit: 125

PROGRAM SYNOPSIS*

In two to four sentences, explain the program or project specifically associated with the funding you are requesting from the Community Assistance Fund, what will be accomplished, and who will be served.

Character Limit: 400

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BASIC NEED*

What basic need is being provided by the proposed program?

Choices

Food

Shelter

Medical services

Emergency transportation

AMOUNT REQUESTED*

Amount requested from the Community Assistance Fund for 2026 (July 1, 2025 - June 30, 2026).

Example: \$5,000. Do not use decimals.

Character Limit: 20

Date BOD approved submission of CAF application*

Date of the Board of Director's (BOD) meeting whereby a motion was passed to approve the submission of this application. If the meeting is slated to occur after the closing date of the application, provide the future date of the meeting. Be prepared to provide the minutes from the meeting if requested.

Character Limit: 10

(B) PROGRAM NARRATIVE (60 POINTS)

The Program Narrative section is where you provide a description of the program or project for which you are requesting county funding. There are seven sections to be completed. Pay attention to the points associated with each individual section. (60 total points)

EXECUTIVE SUMMARY*

(5 points)

Summarize the program or project for which you are seeking funds.

State the problem or need. Identify the human service need (food, shelter, medical services, or emergency transportation) that your program will meet. Describe specific action items and outcomes. Be clear who will be implementing the program. Be clear who the beneficiaries are. Be clear about what is to be accomplished. Include the amount of CAF funds you are requesting. Be concise but make sure the content can stand on its own if it were to be separated from the rest of the application.

Character Limit: 3000

BASIC NEED*

(10 points)

Identify the problem(s) to be addressed. Make a compelling case for the need for your program based upon the purpose of the Community Assistance Fund.

Describe how the program fits into the mission and goals of your organization. Cite current and local statistics to support your request for funding. Explain why your program is important and necessary. Be very clear about the population your program will serve and how your program meets the specific needs of that population.

Character Limit: 4000

PROGRAM DESIGN*

(15 points)

Describe what you plan to do, how you plan to do it, and why.

Explain the basis for your program and how you determined that your approach would be successful (e.g., best practices, evidence-based). Address how your services are coordinated with other agencies in the community and describe how the services are not duplicative of one another.

This section is worth 15 points, indicating the value associated with showing the reviewers that you have thoroughly vetted the idea of the program and thoughtfully determined what it will take to accomplish its purpose. Later in the application, you will support your proposal with a budget which should reflect your program design, goals, objectives, and implementation plan.

- If this is a new program, ensure that what you are proposing to do and that the number of clients to be served are realistic and can be achieved.
- If this is a continuation program (one for which your agency is currently receiving Community Assistance Funds), describe what has been accomplished and number of clients served since July 1, 2024 and what improvements to the program you are planning and why.
- Driving point: How will a grant from the Community Assistance Fund improve the outcomes of persons who live in the city of Missoula and throughout Missoula County?

Character Limit: 5000

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RESIDENTS SERVED OUTSIDE CITY LIMITS*

(5 points)

How will your proposed program physically serve county residents located outside the city limits?

An example is providing housing workshops on-site in the Seeley-Swan Valley or direct delivery

of food to residents in Lolo. Be specific. Stating that persons who are county residents come to your location within the city for services is NOT sufficient to receive points.

Character Limit: 1500

PROGRAM EVALUATION*

(5 points)

In what ways does your organization engage with individuals who have used your services? How does this inform program change?

Be specific and provide examples.

Character Limit: 1500

ASSESSMENT*

(10 points)

Describe how you plan to assess your progress in meeting your goals and objectives.

You will be expected to report quarterly with quantitative responses on progress made toward your objectives in addition to a narrative description of accomplishments and challenges. What specific data will you collect and how will you collect it? How will analysis of that data show progress, success, and areas for improvement? How will you ensure the funds are being maximized and meeting the purpose for which they are intended? What methods will you utilize to determine if your services improved the outcomes intended for those you serve (e.g., client interviews, pre/post surveys).

Character Limit: 4000

CAPACITY

(10 points)

Describe the agency's capacity for successfully implementing the proposed program.

Why is your agency best suited for this endeavor? Describe the experience and expertise of specific staff who will be responsible for implementing the program for which funding is requested. Does your proposal leverage additional agency or other community resources? What other financial or in-kind resources are you using to provide basic human services to atrisk populations?

Character Limit: 4000

(C) WORKPLAN (20 POINTS)

(20 points)

The Workplan is comprised of Goals, Objectives, and Implementation activities that your agency will follow to accomplish the program for which you are seeking county funds.

There are two goal sections below. You are required to complete at least one. If you do
not have a second goal, leave those sections blank.

- Plan ahead. The Workplan is a major component to your application and is scored accordingly. Put thought and time into this.
- Outline/Structure:
 - o Maximum # of goals is 2.
 - o Within each goal, there is a maximum # of 3 objectives.
 - O And, within each of the objectives, you are limited to 4 rows to describe the specific steps for implementing the objective.
- NOTE: If you are a successful candidate and are awarded funding, you will report on each of the goals and objectives within four quarterly Progress Reports throughout the contract period, July through June.

IMPORTANT GUIDANCE FOR THE WORKPLAN

A <u>GOAL</u> is a statement that conveys the program's intent – with Community Assistance Fund monies – to change, reduce, or eliminate the problem(s) described in the Basic Needs section. Goals are clear, achievable, realistic, tangible, and succinct. One sentence.

An <u>OBJECTIVE</u> is a specific milestone that is <u>measurable</u>, realistic, and time-bound. Objectives start with the word "To." You must include a number that is quantifiable and NOT a general percentage.

- For example, "To provide 300 blankets to the Hettinger Homeless Center" or "To provide 16 sewing classes to residents of the Moms with Toddlers Shelter."
- Example of <u>unacceptable</u> objective statement: "Reach 80% of the youth who play basketball."

The <u>IMPLEMENTATION</u> table is where you include the action steps/activities that will take place to accomplish the objective and indicate the person responsible for ensuring it happens. Show the quarter(s) within the fiscal year during which the activity will take place (**Q1**=Jul, Aug, Sept; **Q2**=Oct, Nov, Dec; **Q3**=Jan, Feb, Mar; **Q4**=Apr, May, Jun).

Note: 250 characters with spaces per cell.

GOAL 1

GOAL ONE*

Character Limit: 250

OBJECTIVE 1.1*

Character Limit: 125

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IMPLEMENTATION 1.1

Action Steps/Activities	Responsible Party	Timeframe (Q1, Q2, Q3, Q4)

OBJECTIVE 1.2

Character Limit: 125

IMPLEMENTATION 1.2

Action Steps/Activities	Responsible Party	Timeframe (Q1, Q2, Q3, Q4)

OBJECTIVE 1.3

Character Limit: 125

IMPLEMENTATION 1.3

Action Steps/Activities	Responsible Party	Timeframe (Q1, Q2, Q3, Q4)

GOAL 2

GOAL TWO

Character Limit: 250

OBJECTIVE 2.1

Character Limit: 125

IMPLEMENTATION 2.1

Action Steps/Activities	Responsible Party	Timeframe (Q1, Q2, Q3, Q4)

OBJECTIVE 2.2

Character Limit: 125

IMPLEMENTATION 2.2

Action Steps/Activities	Responsible Party	Timeframe (Q1, Q2, Q3, Q4)

OBJECTIVE 2.3

Character Limit: 125

IMPLEMENTATION 2.3

Action Steps/Activities	Responsible Party	Timeframe (Q1, Q2, Q3, Q4)

(D) BUDGET DETAIL WORKSHEET (5 POINTS)

(5 points)

Click on <u>BUDGET DETAIL WORKSHEET</u>. To download a copy of the file, click File - Save As - Download a Copy.

- Click on the "BUDGET DETAIL WORKSHEET" link above and save the Excel template file to your computer.
- Save the file with a preferred filename structure that includes your agency's name and FY26 in the filename of the saved worksheet.
- Here's an example of a preferred filename structure: Fruit-N-Kids_FY26.CAF.Budget.Worksheet.xlsx
- Upload the file using the "Upload a file" button below.

This Excel worksheet is where you provide revenue sources and program costs. Program costs are direct costs associated with delivering the services for the proposed program.

- Include only direct costs for delivering this service or accomplishing this program.
- Administrative fees and general overhead/indirect costs are not eligible expenses.
- Look at the second tab at the bottom of the worksheet for guidance on Allowable-Unallowable expenses.
- Detailed calculations showing how each program cost is associated with the county funding request must be explained in the Budget Narrative section.
- Commas are acceptable. No decimals.

NOTE: The Budget Detail Worksheet is the basis for requests for reimbursement of expenditures which you will submit each quarter throughout the fiscal year.

Budget Detail Worksheet*

Upload the completed Budget Detail Worksheet

File Size Limit: 5 MB

(E) BUDGET NARRATIVE (15 POINTS)

The Budget Narrative explains in detail how you arrived at the program costs for which you are seeking grant funding.

This section is worth 15 points which represents the time, effort, thought, and accuracy of what you are including. *It is highly recommended that you develop the Budget Narrative before you complete the Budget Detail Worksheet.*

What you'll be including in the Budget Narrative:

- How the costs were derived for each line item in the Program Cost section of the Budget Detail Worksheet which you downloaded as an Excel spreadsheet (see section above).
- A brief narrative description that explains how the funding request will accomplish the
 goals and objectives of the program for each cost area. See this as another opportunity
 to educate the reviewer about your program. It is also another means to convince the
 reviewer that you have invested time into how your agency will use county taxpayer
 dollars wisely.
- NOTE: The Program Costs included in the Budget Narrative are for Community Assistance Funds only (not all funding sources).
- The bottom line is that you need to show, in detail, how you arrived at the program costs. Do not make the reviewer try and figure out where you got the numbers and how they pertain to your program.

Salaries & Wages Amount*

If you have no costs for this category, enter 0 (a zero).

Character Limit: 20

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Salaries & Wages Narrative* EXAMPLE

Position title: Program Manager

Position FTE and equivalent hours: 1 FTE (equal to 2080 hours per year)

Hourly wage: \$20.00 per hour

FTE portion supported by CAF: .25 FTE (equal to 520 hours per year)
Amount of CAF funding for position: \$10,400 (\$20 per hour x 520 hours)

Narrative: The program manager for Fruit-N-Kids oversees a variety of projects that

benefit the community. Multiple revenue sources support the manager's position. For the CAF funded program, .25 FTE is needed to conduct outreach to generate volunteers to drive to pick up the fruit and distribute it to the elementary school, to work with the school administration for fruit distribution, and to submit the quarterly reports required by the funder.

If you have no costs in this category, enter "Not applicable."

Character Limit: 2000

Payroll Taxes Amount*

If you have no costs for this category, enter 0 (a zero).

Character Limit: 20

Payroll Taxes Narrative*

Payroll tax calculations should be based on the Salaries & Wages requested from CAF (this is what appears in the "Salaries & Wages Amount" field above).

EXAMPLE

Total Salaries & Wages amount used to calculate Payroll Taxes: \$10,400

FICA portion from CAF: \$796 (7.65% x \$10,400)

Unemployment Insurance portion from CAF: \$208 (2.00% x \$10,400) Workers Compensation portion from CAF: \$432 (4.15% x \$10,400)

Total amount of CAF funding for Payroll Taxes: \$1,436

Narrative: Fruit-N-Kids calculates payroll taxes in the following manner: Federal Insurance Contributions Act (FICA) is determined at 7.65% of total salary. Unemployment Insurance is determined at 2.0% of total salary. Workers Compensation is calculated at 4.15% of total salary.

If you have no costs in this category, enter "Not applicable."

Character Limit: 2000

Employee Benefits Amount*

If you have no costs for this category, enter 0 (a zero).

Character Limit: 20

Employee Benefits Narrative*

Employee Benefits calculations should be based on the Salaries & Wages requested from CAF (this is what appears in the "Salaries & Wages Amount" field above.)

EXAMPLE

Total Salaries & Wages amount used to calculate Employee Benefits: \$10,400 Total amount of CAF funding for Benefits: \$3,640 (35% x \$10,400)

Narrative: Fruit-N-Kids calculates Employee Benefits using a general percentage of 35% for each employee. This percentage represents employer contributions for health insurance, dental insurance, vision insurance, and life insurance.

If you have no costs in this category, enter "Not applicable."

Character Limit: 2000

Professional Services Amount*

If you have no costs for this category, enter 0 (a zero).

Character Limit: 20

Professional Services Narrative* EXAMPLE

Teacher in-service consultant fee: \$250

Narrative: To assist teachers with the "Let's Learn About Fruit" week, a 2-hour workshop will be provided by a consultant hired to lead the in-service workshop. Participants will include Seeley Lake Elementary teachers and staff. Included in the consultant fee are costs for materials and resources to augment the learning experience for teachers and students. Discussions are currently taking place with Abundant Fruit Educational Services about the possibility of hiring one of their consultants.

If you have no costs in this category, enter "Not applicable."

Character Limit: 2000

Materials & Supplies Amount*

If you have no costs for this category, enter 0 (a zero).

Character Limit: 20

Materials & Supplies Narrative*

EXAMPLE

Utility wagon for moving boxes of fruit: \$170 (\$85 per wagon x 2 wagons)

Narrative: To facilitate the transfer of the fruit, two moving carts are needed. The model best suited for this is a collapsible utility wagon with a steel frame and polyester walls which can be folded up to fit it in a vehicle (the wagon folds up to 15% of its expanded

size). The wagons will be used in Missoula when picking up the boxes of fruit and moving them to the vehicle. Then, upon arriving in Seeley Lake, the wagons can be opened up and the boxes put inside the cart for transport from the vehicle to the school. Due to the amount of fruit anticipated, two carts will be needed. The utility wagon desired was found on Uline.com (model #S-21433R).

If you have no costs in this category, enter "Not applicable."

Character Limit: 2000

Occupancy Amount*

If you have no costs for this category, enter 0 (a zero).

Character Limit: 20

Occupancy Narrative* EXAMPLE

Office space rent per month: \$200

Portion associated with Fruit-N-Kids program: \$50 (25% x \$200) Total amount of CAF funding for rent: \$600 (\$50 x 12 months)

Narrative: The Fruit-N-Kids program is coordinated by the A2Z non-profit organization which rents a 150 square foot office in a commercial building in Seeley Lake for \$200 per month. Since the Fruit-N-Kids program is one of four which the non-profit coordinates, 25% of the monthly rent is attributed to this program.

If you have no costs in this category, enter "Not applicable."

Character Limit: 2000

Travel Amount*

If you have no costs for this category, enter 0 (a zero).

Character Limit: 20

Travel Narrative*

EXAMPLE

Miles traveled: 1,920 miles Rate per mile: 70 cents per mile

Total amount of CAF funding for Travel: \$1,344 (1,920 miles x .70 per mile)

Narrative: Round-trip mileage from Seeley Lake to/from Missoula is 120 miles. It is anticipated that twice a month for 8 months, a trip for fruit will need to be made (2 x 8 x 120 miles=1,920 miles).

The 2025 mileage rate is \$.70 per mile. To find the current year mileage rate, visit irs.gov.

If you have no costs in this category, enter "Not applicable."

Character Limit: 2000

Specific Assistance for Individuals/Families Amount*

If you have no costs for this category, enter 0 (a zero).

Character Limit: 20

Specific Assistance for Individuals/Families Narrative* EXAMPLE

Coupons for fruit: \$5 per coupon

Number of students to receive coupons: 173

Total amount of CAF funding for fruit coupons: \$865 (\$5 coupon x 173 students)

Narrative: There were 173 students attending Seeley Lake Elementary (K-8) during the 2023-2024 academic year according to the most recent available data from the Montana Office of Public Instruction. An agreement has been reached with the local grocery store to accept the \$5 coupon from students who purchase fruit at the store. The coupons will be purchased all at once by the Fruit-N-Kids program and provided to the school for distribution by the teachers during the "Let's Learn About Fruit" week where lesson plans will focus on healthy eating.

If you have no costs in this category, enter "Not applicable."

Character Limit: 2000

Other Expense Amount*

If you have no costs for this category, enter 0 (a zero).

Character Limit: 20

Other Expense Narrative* EXAMPLE

Driving Records: \$16 (\$4.12 per record x 4 persons)

Narrative: A major component of the Fruit-N-Kids program is the transport of the fruit. For the four volunteer drivers who will be driving to/from Missoula for the bi-monthly pickup of fruit, a current driver's license and a driving record showing a clear motor vehicle accident history will be required. Each volunteer will complete the Montana Department of Justice form "Consent to Release Driving Record & Non-identifiable Personal Information Request" (form 34-0100A (1/23). Upon receipt of the completed form, the Fruit-N-Kids program manager will submit a "Driver Record Request" (form 34-0100A (1/23)).

0100). After receiving the results from the MT DOJ, a determination will be made if the volunteer can drive for the program.

If you have no costs in this category, enter "Not applicable."

Character Limit: 2000

(F) ATTACHMENTS

Organizational Chart*

Upload a file showing the structure of the applicant's organization/agency.

File Size Limit: 5 MB

Board of Directors*

On agency letterhead, include each Board of Director's name, title, and period of service.

File Size Limit: 5 MB

Certificate of Insurance*

A Certificate of insurance (COI) must be provided with the following included per Missoula County policy:

- a. Minimum \$1 million per occurrence
- b. Minimum \$2 million in the aggregate for general liability coverage plus workers compensation as required by state law
- c. If automobiles are used in carrying out the service provided under contract, \$500,000 in auto liability is required
- d. Missoula County as an Additional Insured
- e. Missoula County as a Certificate Holder

Name and address to include for Certificate Holder (see COI example):

Missoula County 200 W. Broadway Missoula, MT 59802

File Size Limit: 5 MB

COI expiration*

Character Limit: 10