# 2014

## City of Loveland

## Human Services Grant

### Model Partnership Award Pre-Application

Email this pre-application (form online at www.cityofloveland.org/hsgrants) and attachments to beverly.walker@cityofloveland.org by **12:00 pm** on **January 31, 2014**.

***Human Services Grant Program Goal:***

*Financially support services that value diversity, foster self-reliance, treat people with dignity, build self-respect, address issues of safety, and allow people to live free of fear through the provision of food, shelter, physical and mental health care as well as services that prevent crises and assist in sustaining independent living.*

| |
|---|
| **Lead Agency or Organization:** |
| **Program or Project Name:** |
| **Contact Person & Title:** |
| **Mailing Address:** |
| **City, State, Zip:** |
| **Phone Number:** |
| **E-mail Address:** |

Amount of 2014 grant funding requested ($10,000 maximum). $ _____

☐ Yes ☐ No Does the Lead Agency/Organization have a 501c3 with a minimum of one year's history of operation?

**OR**

☐ Yes ☐ No Is the Lead Agency/Organization part of a collaboration that includes an IRS-designated 501c3 agency with at least one year's history of operation that will serve as the fiscal agent?

**1. How does the program provide services that fulfill all or some of the attributes found in the Human Services Grant Program Goal?**

**2. Please describe the program and how it is a partnership.**

**PRE-APPLICATION ATTACHMENTS**

*These attachments are required and the pre-application will not be considered without them.*

**Form 990 –** Attach the Lead Agency's most recently filed 990, main form only, **no schedules**.
If your agency does not file a form 990, please attach a document with an explanation as to why in no more than two pages.

**Current Board of Directors Roster –** Attach a current roster for each agency. List professional affiliations, if possible.

**Organizational Chart** – Attach an organizational chart showing staff and programs, including the relationship between the agencies.

**Pre-Award Agreement** - Attach the agreement found on the following page.

# 2014 Pre-Award Agreement

# Human Services Grant Applicants

If the agency is awarded 2014 Human Services Grant funds and/or Community Development Block Grant funds by the City of Loveland, I understand that the following will be required as a condition of receiving grant funds:

1. All agencies receiving grant funds from the City must enter into a legal agreement defining services to be provided, the amount of the grant funds, the terms of the grant, and other specific details. No grant funds will be issued without a fully executed grant agreement.

2. All grant funds are issued on a reimbursement basis. Documentation of authorized expenses dated after the executed contract date must be submitted and approved by the City before any funding will be disbursed to grant recipients.

3. All Human Services Grant funds will be expended and drawn no later than **June 30, 2015**.

4. A member of the Loveland Human Services Commission or the Affordable Housing Commission may make a site visit to agencies receiving grant funding from the City of Loveland.

**By typing in your name, you agree to the above requirements in receiving grant funds.**

***Name:*** _____

***Title:*** _____