**UNITED WAY OF ULSTER COUNTY'S**

**COMMUNITY FUND**

2019-2021 Funding Cycle

***ANNOUNCEMENT OF FUNDING AND GENERAL GUIDELINES***

**INTRODUCTION**

The United Way of Ulster County (UWUC), an independent, privately operated not-for-profit organization located in Kingston, NY announces the availability of $400,000 to support local human service programs serving Ulster County residents. Eligible agencies must be an IRS designated 501c3 not-for-profit located in Ulster County, in operation for a minimum of two years, with the primary mission of providing human services to Ulster County residents.

Due to limited funding, the maximum grant award for new programs (those not funded in the previous grant cycle) will be between $5,000-$10,000. Funding is on a two-year cycle; the annual allocation awarded to a program will rollover for the second year of the funding cycle, pending completion of a successful site visit. Site visits to funded programs will be performed by trained community volunteers and United Way staff during July-October, 2019. If awarded funding, allocations are dispensed by UWUC on a monthly basis, and for this funding cycle, begin in July, 2019 and end in June, 2021.

**Programs funded through this grant process *must target at least one the following program areas*: Affordable Child and Elder Care, Housing Assistance, Emergency Assistance, Literacy Training, Mental Health Services, Lifeskills Training, Parent Education, Substance Abuse Prevention, and/or Vocational Training for underserved populations**.

All funded agencies are required to comply with and sign UWUC's Non-Discrimination Statement and adhere to UWUC's Agency Agreement. Both are included in the United Way Application Packet for your review. **Only “new”\* agencies (those that have not received funding in the previous grant cycle) must submit a signed Non-discrimination Statement *at the time of grant submission****.* The Agency Agreement will be sent to you for signature in July, 2019, after allocation decisions have been made. If you are a new agency, before submitting an application to UWUC, please review both documents carefully to determine if your agency is able and willing to comply with the requirements therein.

Eight copies of the completed Community Fund Application must be received by UWUC at 450 Albany Avenue, Kingston, NY **by 5:00 PM, Friday, March 22, 2019**.

**BACKGROUND**

Based on input from key county leaders in the fields of aging, criminal justice, education, employment and training, emergency assistance, mental health, planning, social services, and youth it was determined that the two greatest barriers to attaining family self-sufficiency were steady, gainful employment, and family stability; and that the following areas must be addressed in order to eliminate these barriers, and promote family self-sufficiency:

* A lack of affordable child and elder care, and the need for more accessible after school programs,
* A need to provide housing assistance to low-income families in order to avoid homelessness,
* A lack of emergency financial assistance, particularly for those who do not qualify for government assistance, and are experiencing unforeseen circumstances,
* A need to maintain support of literacy programs, particularly those targeted towards Spanish speakers,
* A need for more “family centered” mental health services which are cost-effective and programmatically sound,
* A lack of parenting skills in troubled families, resulting in generational child abuse and/or neglect,
* A need for more basic skills training for entry level workers to acquire and retain jobs,
* A need to decrease substance abuse among youth.

In an effort to have a greater impact on employability and family stability, and the issues related to them, UWUC’s Community Fund supports programs in the following program areas:

* **Affordable Child and Elder Care**: Programs that provide for affordable child care, including day care for non-school aged children, after school programs for the school-aged, and day programs for elders. After school programs that are on-site or that provide transportation to and from programming are preferred. Funds requested can be for scholarships to assist low-income families in accessing care, or for program services, equipment, and/or supplies to sustain effective, affordable, high quality care.
* **Family Mental Health Services**: Programs must include all members of the family in order to be considered for funding. While curriculum-based services are highly regarded, other family mental health services will also be considered for funding (i.e. support groups, respite programs, etc.)
* **Housing/Emergency Assistance**: Services may include rental and home mortgage assistance, shelter for the homeless, or any other assistance that is necessary to avoid the loss of employment or housing, or to maintain health and welfare (ie. assistance to acquire transportation, food, childcare, or healthcare). Case management must be a component of any housing/emergency assistance program to help ensure employment and family stability.
* **Life Skills Training**: Life Skills Training is defined as any that may justifiably be linked to the attainment of employment or family stability. Training may include, but is not limited to, vocational, academic, budgeting, communication skills, interviewing skills, interpersonal skills, anger management, or nutritional education.
* **Literacy**: Services to be considered for funding include not only traditional literacy training geared towards English speaking adults, but also English as a Second Language, geared towards both the youth and adult populations. There is a special interest in literacy services for Spanish-speakers, a significant and growing population in Ulster County.
* **Parenting Skills**: Both curriculum-based, and non-curriculum based services will be considered for funding. Special consideration will be given to services that provide transportation and child care for participants, are easily accessible or neighborhood-based, and/or include an effective outreach component to assure high rates of consumer participation.
* **Substance Abuse Treatment and Prevention**: Short-term treatment programs, and effective prevention strategies targeted at youth are preferred, however other substance abuse services will also be considered for funding.

**PROGRAM EVALUATION**

UWUC places a high priority on program evaluation. Programs must be able to measure whether or not they are having the desired impact. Program evaluations do not need a high level of sophistication; they can consist of attendance records (which are required), and a short survey developed in-house that measures progress on identified objectives (ie. learning appropriate parenting or job skills). United Way is available to provide technical assistance. Contact Stacey Rein, at 331-4199, x1 or e-mail her at staceyrein@ulsterunitedway.org.

**PROGRAM PRESENTATIONS**

Once requests for funding are received and reviewed, a program presentation may be required to answer specific questions or concerns. If the funding request is for a program not previously funded by United Way, a program presentation is required. The Contact Person listed on the Cover Page of the Application will be given a list of questions in preparation for the presentation. Agencies will be notified of the program presentation date a minimum of one week prior to its occurrence. Program presentations will be held between mid-April and the end of May.

**QUESTIONS?**

If you have any questions related to your grant submission, contact Stacey Rein at 331-4199, x1, or e-mail her at [staceyrein@ulsterunitedway.org](mailto:staceyrein@ulsterunitedway.org).

**United Way of Ulster County**

Community Fund Application Packet

Funding Cycle 2019-2021

# Cover Page

Agency Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

United Way Annual Request: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REQUIRED DOCUMENTS**

\_\_\_\_ (1) Program Budget Justification for Income and Expenses (See sample on page 12)

\_\_\_\_\_ (1) Copy of Most Recent Audit

\_\_\_\_ (1) Copy of List of Board of Directors

\_\_\_\_ (1) Copy of Job Description or Resume of Key Program Staff

\_\_\_\_ (8) Copies of Completed Application for Funding

**FOR NEW AGENCIES ONLY**\*:

* (1)Copy of Tax Exempt Status Letter from IRS
* (1) Copy of Signed Non-Discrimination Statement
* No more than 3 recent publications, news articles, or other relevant materials about the

organization or the program for which funding is being requested.

\*“New agencies” are defined as those not receiving funding from the United Way in the 2017-2019 funding cycle.

UNITED WAY OF ULSTER COUNTY

**APPLICATION FOR FUNDING**

2019-2021

Designate the primary **Impact Area** addressed by your program.

***Affordable Child and Elder Care*** \_\_\_\_\_

***Family Mental Health*** \_\_\_\_\_

***Housing Assistance*** \_\_\_\_\_

***Life Skills***\_\_\_\_\_

***Emergency Assistance \_\_\_\_***

***Literacy***\_\_\_\_\_

***Parenting Skills***\_\_\_\_\_

***Substance Abuse Prevention/Treatment***\_\_\_\_\_

**1. Program Organization (no more than 4 pages) 1-30 points**

1. Describe the program to be offered. Include the following:

* A description of the program’s activities.
* A description of the constituents served by the project, including the projected number to be served, and how they are or will be recruited.
* A listing of agencies you partner with to provide program services.
* Where the service is located and the hours/days it operates.
* Program staffing requirements.
* Indicate whether the program presently has a waiting list. If so, how many are on the waiting list, and what is the average length of time they remain on it?
* Explain how the program increases the likelihood of employment and/or family stability.
* ***If the program is new***, what is the strategy and timeline for implementation?
* If possible, provide the number of participants served in each municipality (we use this for marketing purposes only).

**2. Program Objectives & Outcomes Form 1-20 points**

Complete the attached **Program Objectives & Outcomes Form** (page 8) for the 2019-2021 funding cycle. Make sure the program’s objectives are measurable. *Records of attendance as well as an additional evaluation tool are required* as part of the program evaluation. Include a sample of an evaluation tool you plan to use.

**3. Past Performance 1-20 points**

**If you** **received funding from the United Way for this program in the last funding cycle,** complete the attached ***Final Report Form*** (page 9) for the last calendar or fiscal year, **AND PROVIDE A SAMPLING OF COMPLETED EVALUATION TOOLS**.

If the outcomes achieved were less than anticipated, note why, and what modifications, if any, are planned. **ALSO NOTE ANY PROGRAM ENHANCEMENTS YOU MAY HAVE IMPLEMENTED DURING THE LAST FUNDING CYCLE**.

**4. Program Budget 1-20 points**

* Complete the attached Budget Forms (pages 10-11), reflecting two fiscal years, one beginning in 2019, and the other beginning in 2020.
* Explain any budget line items that have changed significantly (+ or – 20%) from the “Previous Year’s Budget” column as compared to the “Previous Year’s Actual”, “2019 Budget”, or “2020 Budget” columns.
* Attach a budget justification for each budget line item in the proposed budget including ***income and expenses****.*
* If the program were to receive less funding than requested, what modifications would need to be made?
* If United Way funds are to be used for scholarships, indicate

1. The number of scholarships to be granted.
2. The eligibility requirements of scholarship recipients (i.e. age, family income).

**5. Committee Concerns (for previously funded programs only) (-10) - 0 points**

If you recently received feedback from the United Way on this program, based on the recently completed site visit, please reiterate the concern(s) here, and discuss how you plan to address it.

**6.** Please note that the United Way will take into account the accuracy, **1-10 points**

timeliness, and completeness of the application submission.

United Way Objectives and Outcomes Form 2019-2021

***(for all programs requesting funding)***

Agency Program\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| **Program Activities**  *(Summarize from Section #1)* | Program Objectives (*must be measurable, limited to 5, and clearly relate to program activities*) | **Projected Outcomes**  *(the number or percentage of people who are projected to achieve the objectives.)* | **Tools Used to Measure Outcomes**  *(i.e. attendance records, surveys, report cards)* |
|  |  |  |  |

United Way Final Report Form 2017-2019

***(for previously funded programs only)***

Agency Program\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| Program Objectives (*must be measurable and limited to 5*) | **Tools Used to Measure Outcomes**  *(i.e. attendance records, surveys, report cards, post-tests, etc.)* | **Outcomes**  *(based on tools used to measure outcomes, provide the number or percentage of people who achieved each objective.)* | **Modifications (**if program objectives were not met) and/or **Program Enhancements** |
|  |  |  |  |

**PROGRAM BUDGET FORM**

**Agency Name:**  **Program Name:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Previous Year’s Budget | Previous Year’s Actual | 2019 Budget | 2020 Budget |
| INCOME | *Complete these columns only if the program was funded by the United Way in 2017-2019 cycle:* | |  |  |
| 1. United Way Request |  |  |  |  |
| 1. Individual Contributions |  |  |  |  |
| 1. Fundraising Events/Products |  |  |  |  |
| 1. Foundations and Corporations (indicate whether this is projected or confirmed) |  |  |  |  |
| 1. Government Grants and Contracts (indicate whether this is projected or confirmed) |  |  |  |  |
| 1. Membership Income |  |  |  |  |
| 1. Program and/or Client Fees |  |  |  |  |
| 1. Investment Income |  |  |  |  |
| 1. Other Income |  |  |  |  |
| **Total Income (Lines 1-9)** |  |  |  |  |

**PROGRAM BUDGET(Continued)**

**Agency Name:**  **Program Name:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Previous Year’s Budget | Previous Year’s Actual | 2019 Budget | 2020 Budget |
| EXPENSES | *Complete these columns only if the program was funded by the United Way in 2017-2019 cycle:* | |  |  |
| 1. Salaries |  |  |  |  |
| 1. Employee Benefits/Payroll taxes, etc. |  |  |  |  |
| 1. Consultant/Professional Fees |  |  |  |  |
| 1. Supplies |  |  |  |  |
| 1. Telephone/Fax/Internet |  |  |  |  |
| 1. Postage & Shipping |  |  |  |  |
| 1. Occupancy |  |  |  |  |
| 1. Equipment Purchases |  |  |  |  |
| 1. Printing & Copying |  |  |  |  |
| 1. Travel |  |  |  |  |
| 1. Special Assistance to Individuals |  |  |  |  |
| 1. Professional Development & Training |  |  |  |  |
| 1. Administrative Overhead (up to 25% of budget) |  |  |  |  |
| **Total Expenses (Lines 10-22)** |  |  |  |  |

**SAMPLE: Budget Justification**

**Income**

1. We are requesting a modest 5% increase from the United Way for 2013-2015.
2. We project a 5% increase in individual donations in 2013 and again in 2014.
3. We project a 5% increase in fundraising income, largely due to our successful Scrabble event.
4. We project a 5% increase in foundation grants (Dollar General, Community Foundation, Ulster Savings).
5. New York State Department of Education (NYSED) grant increases are confirmed for 2013 and 2014.
6. We are not a membership organization.
7. We are reducing our materials fee for new volunteers and are encouraging them to borrow materials from the mid-Hudson libraries.
8. Interest on our money market averages 8%.
9. Dyson Foundation awarded a 3-year general operating grant, which is listed separately from other foundations due to its impact on the budget.

**Expenses**

1. The CEO voluntarily reduced her salary in 2012, some of which will be restored in 2013.
2. Benefits averaged at 10% of payroll expenses.
3. We recently hired a new CPA whose rates are more affordable for ULA.
4. Our fundraising campaign in 2011 resulted in a large number of in-kind donations – mainly office supplies. Also, the mid-Hudson library system has generously pruchased many of our literacy materials, so we do not have to purchase them ourselves.
5. Telephone and internet fees are fixed, but we anticipate increases as a result of opening our satellite office in Port Ewen.
6. Postage costs were reduced due to improved mailing list management, but we anticipate increases as a result of opening our satellite office.
7. We anticipate renewing our lease at Aaron Court with no increase.
8. Equipment will likely need to be purchased when we open our satellite office in Port Ewen.
9. Printing costs were offset by a grant from the mid-Hudson Library System, but we anticipate increases as a result of opening our satellite office.
10. Travel costs for mandatory trainings are included in professional development fees.
11. The CEO participates in White Eagle retreats, and the entire staff participates in quarterly trainings offered through Literacy New York and the Regional Adult Education Network in Orange County.

**UNITED WAY OF ULSTER COUNTY**

**COMMUNITY FUND PROCESS**

**TIMETABLE**

**March 22, 2019 Applications Due at United Way**

**April-May, 2019 United Way Committees Meet**

**Program Presentations Scheduled**

**June 20, 2019 Recommendations Presented to United Way**

**Board of Directors**

**Week of June 24, 2019 Notification of Grant Awards**

**Week of July 15, 2019 First Monthly Payments to Agencies**

**July-October 2020 Site Visits to All Funded Programs**

#### UNITED WAY OF ULSTER COUNTY

# NON-DISCRIMINATION POLICY STATEMENT

The \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is committed to a policy of non-discrimination in both its employment practices and the delivery of its program services to the residents of Ulster County. This agency will pursue a practice where the health and human service needs of Ulster County residents are addressed without regard to age, race, religion, gender, sexual orientation, disability, national origin, or any other classification or category. Further, this policy prohibits job discrimination and ensures equality of opportunity in all aspects of employment.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name of Executive Director Print Name of Board President

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Executive Director Signature of Board President

Date: \_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

**UNITED WAY OF ULSTER COUNTY**

##### AGENCY AGREEMENT

###### I. PURPOSE OF AGREEMENT

This Agreement describes the relationship between the United Way of Ulster County, Inc. (hereinafter United Way) and Funded Agencies (hereinafter Agency) who join together to provide needed human services to the residents of Ulster County.

###### II. UNITED WAY RESPONSIBILITIES

The United Way agrees to:

A. Raise and allocate to the Agency funds to support programs, which address identified community needs.

B. Make available to member agencies management and technical assistance.

C. Increase the public's understanding and awareness of health and human services.

###### III. AGENCY RESPONSIBILITIES

The Agency agrees to:

A. Maintain status as a voluntary, not‑for‑profit corporation with tax‑exempt status as a charitable organization under Section 501 (c) (3) of the Internal Revenue Code of 1954 and applicable state laws and regulations and provide proof thereof to United Way upon request.

1. Comply with the United Way’s Non-Discrimination Policy as evidenced by formal endorsement of the policy by the agency's Board of Directors.

C. Display the United Way logo on all appropriate premises, printed materials and stationery and identify itself as a United Way member agency in all media communications, including those related to fundraising efforts.

D. Give full and active support to the United Way campaign.

E. Cooperate with the United Way and other social agencies so as to prevent unnecessary duplication and to promote high standards, efficiency and economy.

F. Increase the public's understanding and awareness of health and human services.

1. Maintain fiscal records in accordance with AICPA guidelines for voluntary health and welfare organizations. Submit an annual financial audit to the United Way prepared by an independent certified public accountant within (6) months of the end of the Agency fiscal year. Annually submit agency financial statements detailing income and expenditures, and within thirty (30) days when requested to do so by the United Way.
2. Provide statistical data, records and reports as requested.

I. Maintain appropriate insurance for all programs, service and office operations.

J. Maintain current licenses, certifications, and permits as required by law to operate programs.

K. Notify the United Way prior to discontinuing any program funded in whole or in part by United Way.

L. Participate in fund distribution as determined by the United Way, which includes participation in planning and implementation.

1. Allow for designated United Way volunteers and/or staff to observe and evaluate

funded programs.

N. The Agency agrees to indemnify and hold the United Way harmless from any and all loss, expense, damage, cost (including attorney’s fees), liability, and/or cause of action incurred by the United Way in connection with or caused by any breach by the Agency of its obligations here under or by any other acts or omission of the Agency in connection with this Agreement.

O. Notify the United Way if the agency is under investigation or the subject of a complaint for non-compliance with any state or federal statute.

###### IV. SUPPLEMENTAL FUND RAISING

The United Way recognizes the Agency's right to generate additional support for its programs from outside sources, and encourages it to do so, with the following stipulations:

A. The agency shall not engage in payroll deduction solicitation at any time.

1. The agency shall not solicit *unrestricted* corporate gifts during the United Way

campaign (9/15 - 12/15).

1. The agency shall not engage in any direct fund solicitation of individuals or general membership drives between 9/15 –Thanksgiving. The exception is solicitation in exchange for goods (flowers, candy, etc.) or for event sponsorship.

D. Exceptions to the above provisions may be granted by the United Way Board.

V. FUNDING

1. In consideration of the mutual promises made herein, the United Way agrees to give

the Agency the sum of $\_\_\_\_\_\_\_\_\_\_\_\_\_ annually to operate the program or programs identified in Schedule A attached hereto and made a part hereof, for the period from July 1, 2017 to June 30, 2019.

1. The Agency agrees to accept an established payment schedule from the United Way

for the above allocation.

1. Payment by United Way shall be contingent upon Agency compliance with this

Agreement. Failure by the United Way to insist upon compliance with any part of this Agreement shall not constitute a waiver either of that part of the Agreement nor of any other part of this Agreement.

1. The Agency acknowledges and accepts that non-compliance to Part IV of Agency

Agreement will result in a 20% reduction in that agency’s base allocation in the next

allocations cycle.

This agreement was reviewed and approved by the Agency Board of Directors at its meeting of and the officers and executive director of the Agency were there authorized to enter into this Agreement as attested by the Resolution of the Board, duly signed by the Secretary thereof and submitted herewith, and copy of the official minutes of the Agency for the meeting above‑referenced.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Agency Board Chair

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Agency Executive Director

Date:

Board Chair, United Way of Ulster County

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

President, United Way of Ulster County

Revised 12/21/16