



ATTACHMENTS

Attachment A:	Application Cover Sheet
Attachment B:	Project Narrative
Attachment C:	Budget Form & Sample Budget
Attachment D:	Agreements and Certifications
Attachment E:	Draft Mini-Grants Program Agreement



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ATTACHMENT A: APPLICATION COVER SHEET

Applicant/Agency Name: _____
Name of Project: _____

CONTACT PERSON FOR THIS APPLICATION:

Contact Person & Title:		
Address:	City:	Zip Code:
Phone Number:	Cell Number:	Fax Number:
Email:		

Type of Applicant Agency (Check one):

- 501 (c) (3) organization (include copy of tax exempt status documentation)
- Governmental Unit
- Business License holder (include copy of Business License)

Federal ID No. _____

Has your agency received General Mini-Grant funding from First 5 Merced County within the past 24 months? <input type="checkbox"/> No <input type="checkbox"/> Yes
Is your agency currently receiving First 5 funding for any projects/services? <input type="checkbox"/> No <input type="checkbox"/> Yes, Please list currently funded project(s) name and amount awarded _____

Total Annual Budget for the Organization/Program: _____
Total Request for Mini-Grant Funding: \$ _____ (Maximum \$3,000.00)

I certify that the information contained in this proposal is true and accurate to the best of my knowledge and belief. I further certify that this grant application is submitted with the full knowledge and endorsement of the governing board of this organization, which is empowered to enforce compliance with all contract conditions.

Signature(s): _____ Date _____

Name: _____ Title: _____

ATTACHMENT B: PROJECT NARRATIVE

On a separate sheet of paper, please describe your proposed project by responding to the following items. Use no more than two single-spaced pages for your project narrative, with the sections sequentially numbered and titled as indicated below.

1. Organization Capacity

Briefly describe the purpose and primary activities of your organization, and your history in providing similar services to those you intend to implement with this funding.

2. Project Plan

Please describe the proposed project or event your group aims to support with these funds. Include the following in your response:

- What are the project activities?
- What needs will you address? How will you address them?
- Who is your specific and/or primary target audience?
- Provide a timeline detailing when this project/event will take place. Include any key dates (e.g. start or ending dates) as appropriate.

3. Benefiting Children 0-5

Explain how your project or event will directly benefit children 0-5 years and their families.

4. Identification of Outcomes

What do you hope to accomplish and how will you know if the project has been a success? Please identify at least one or two results you hope to see.

5. Funding Plan/Financial Viability

Describe the total cost of the project/event and identify any other sources of funding to be used in meeting the budget needs. This section should correspond to Attachment C "Budget Form".

ATTACHMENT C: BUDGET FORM

Line Item Budget Please list the items for which you are requesting funds. (E.g., Supplies, equipment, other. See Sample Budget for examples.)	Budget Justification (Detailed Narrative) Please provide sufficient detail explaining how the proposed funds will be utilized for each line item. Use separate sheets if necessary.	Funds Requested from the Commission	Funds from <u>Other</u> Sources (Include in-kind, if appropriate)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
Total Grant Requested From Commission		\$	
Total Funds from Other Sources			\$
Total Project Cost		\$	

SAMPLE BUDGET FORM

Line Item Budget	Budget Justification (Detailed Narrative) Please provide sufficient detail explaining how the proposed funds will be utilized for each line item budgets. Use separate sheet if necessary.	Funds Requested from the Commission	Funds from <u>Other</u> Sources
1. Child care	Child care will be provide to children ages 0-5 for families attending the event	\$170.00	
2. Set-up and clean up			Kiwanis Club students
3. Printing	150 flyers will be printed at Kinko's to promote the event through the months of Jan & Feb.	\$100.00	
4. Outreach Staff			Community members
5. Facility	UC facility has been secured and partial funding through First 5 dollars will pay the cost of the rental fee	\$100.00	\$100.00 donation from other parents
6. Incentives for participants	Pencils, growth charts, and other educational material will be purchased and given to each child at the end of the event	\$150.00	
7. Workshop instructor	Hired trainer specialized in ASQ-SE from Fresno County will be given a stipend for services to provide a 5 hour workshop for parents and an 1 hour Q & A session following the training	\$200.00	
8. Binders/markers/post-its/pencils for parents	Supplies will be purchased for participants of the training	\$400.00	
Total Grant Requested From Commission		\$1,120.00	
Total Funds from Other Sources			\$100.00
Total Project Cost		\$1,220.00	

ATTACHMENT D: AGREEMENTS AND CERTIFICATIONS

Applicant/Agency Name: _____

Project/Program Title: _____

Address: _____

Street/P.O. Box

City

State

Zip Code

- A. I have reviewed the Expectations for Successful Applicants presented in this document, including contract requirements for successful grantees. I understand that selection of an applicant for funding does not constitute a contract, and the contract to be developed will not be binding on either the Commission or the applicant until executed by each.
- B. I understand that in developing contract terms and negotiating a County Contract Agreement, certain evaluation trainings and/or informational meetings will be mandatory for successful applicants.
- C. Contract negotiation may include, but is not limited to, agreement to collect and report additional information and data that will be necessary for the evaluation of, and ongoing reporting on, the proposed project.
- D. I certify that all Proposition 10 funds will be used only to supplement existing levels of service and not to fund existing levels of service. No moneys shall be used to supplant state or local general fund money for any purpose, pursuant to Revenue and Taxation Code section 30131.4.

Revenue and Taxation Code section 30131.4 identifies the specific manner in which moneys raised by the Children and Families Act of 1998 shall be appropriated and expended. Section 30131.4 not only requires that expenditures must be for the purposes expressed in the Act, but such moneys "shall be used only to supplement existing levels of services and not to fund existing levels of services. No moneys in the California Children and Families Trust Fund shall be used to supplant state or local General Fund money for any purpose." All moneys raised pursuant to the Act shall be appropriated and expended only to supplement (add to or augment) existing levels of services. In contrast, the Act specifically prohibits appropriation and expenditures of such moneys to supplant (replace) state or local General fund money. Further, moneys are prohibited to be used to fund any existing levels of service.

**Typed Name and Title of Individual
Authorized to sign Contracts**

Authorized Signature

Date

**MERCED COUNTY
CHILDREN AND FAMILIES COMMISSION
POLICY ON TOBACCO FREE ENVIRONMENT**

1. Development of a Comprehensive Smoke-Free Environment Policy

All contractors receiving funding and/or services from the Merced County Children and Families Commission must provide a written copy of an established comprehensive tobacco-free policy prior to the disbursement of granted funds.

This policy shall prohibit the use of tobacco products at any time inside agency vehicles and buildings, or outside within 15 feet of facilities or 25 feet of children's play areas and shall prohibit smoking as required by law.

Note: Family day care homes and licensed day care centers. California law prohibits smoking of tobacco in a private residence during the hours of operation as a licensed family day care home and in those areas of the licensed family day care home where children are present. The law also prohibits smoking of tobacco on the premises of a licensed day care center. Health and Safety Code section 1596.795.

The policy shall have clear procedures for implementation, protocols for monitoring compliance, reporting of violations and instituting sanctions.

The following activities should be included in the implementation of the policy:

- a. Information about the policy and enforcement procedures shall be communicated by administration clearly to staff, parents, and/or clients within the larger community.
- b. Signs stating "NO SMOKING" shall be prominently displayed at all entrances of building property. Additional "NO SMOKING" signs shall be posted in restrooms and other areas as appropriate, such as windows through which secondhand smoke can enter and playground areas.
- c. Information about smoking cessation and support programs shall be made available and promoted for staff, parents, and/or clients at intake and on a continuing basis when appropriate.
- d. Information about secondhand smoke and children shall be made available and promoted for staff, parents, and/or clients.
- e. Families with small children will be encouraged, and in some cases will be required, not to allow smoking in their homes, and whenever and wherever children are present, including outdoors.

Motion by: Fox
Second by: Melville
Ayes: Brown, Fox, Goodger, Melville, Mochel, Nevatt, Pagan and Quigley
Adopted: September 26, 2002
Amended: December 2, 2002

ATTEST: Jerald O'Banion
Supervisor Jerald O'Banion
First 5 Merced County Chair