



Community Recovery Nonprofit Grant Application

Organization Information

1. Organization Name
2. Organization Address
3. Organization Phone Number
4. Contact Name
5. Contact Phone
6. Contact email address
7. Organization EIN
8. Organization UEI

Eligibility

1. Check organization non-profit designation- (attach copy of IRS determination letter)
501c3
501c19
2. Was your non-profit organization established prior to 3/1/2019? Yes No
3. Is your organization in good standing with the State of Maryland? Yes No
4. Is your organization located in Washington County? Yes No
5. Does your organization provide a majority of services (>50%) to Washington County Citizens?
Yes No
6. Has your organization been impacted adversely by the Covid-19 public health emergency or its economic impact? Yes No
Examples of impact can include:
 - Decreased revenue
 - Financial insecurity
 - Increased costs
 - Increased demand for services
 - Capacity to weather financial hardship
 - Challenges in covering payroll, rent, mortgage and other operating costs
 - Downsizing of staff and/or business services
7. What census tract(s) is organization located in?

- Human Needs- Homelessness Prevention
- Personal Development
- Public Services – Libraries and Information
- Public Services – Other Public facilities and amenities
- Public Services – Parks and Recreation
- Public Services – Public Safety
- Sports and Athletics
- Other

3. How was your organization negatively impacted by the Covid-19 public health emergency and its economic impacts? Select all that apply.

- Decreased revenue
- Financial insecurity
- Increased costs
- Increased demand for services
- Capacity to weather financial hardship
- Challenges covering payroll, rent, mortgage or other operating expenses
- Downsizing of staff and/or business services

Financial Information and Demonstration of Need

1. Amount of grant funding requested _____.
2. Requested funds will be used for:

- Replacement of lost revenue/increased costs caused by the pandemic
- Provision of increased services to local impact of the pandemic*
- Combination of both

3. If your request includes funds for increased services or a combination please check which of these eligible service types you are providing:

	Public Health	Mental Health/Substance Abuse
Low income household assistance	Seniors	Services for households/youth adversely impacted by pandemic

4. Please complete and attach the Financial Budget Template. You must provide a complete operating budget for 2020, 2021, and 2022 (include both budgeted and actual figures) for all revenue and expenditures. Be detailed and list specific revenue and grants and types of expenses. Be sure to note pending and awarded grants, and received contributions, etc.

4. Please list any and all Covid-19 and other relief grants received by the organization during the Coronavirus emergency from March 2020 to date. List by date amount, and issuing entity.

5. Attach a copy of the most recent audit or if your organization has no audit, submit a financial statement generated by your organization's financial system. The statement must be signed and dated by the Treasurer, CFO, or other key officer of the organization.

Funding Needs Narrative

1. Please describe your organization's financial need and why you are seeking funding through this relief grant program. Include how the organization plans to use the funds from any award. Be specific in itemizing the proposed use of funds, with amount and type of expense. Expense may include (but not limited to), salary and wages, inventory, rent and utilities, technology, contracted services, etc.

Narrative (continued)

Attestation and Grant Application Certification

Non-discrimination Policy

All applicants are asked to certify that they will comply with the following:

Applicants receiving funding would be considered to be a beneficiary of grant funds and as such, would be required to comply with Title VI of the Civil Rights Act of 1964, which prohibits recipients of Federal financial assistance from excluding from a program or activity, denying benefits of, or otherwise discriminating against a person on the basis of race, color, or national origin (42 U.S.C § 2000d et seq.), as implemented by the Department of Treasury's Title VI regulations, 31 CFR Part 22, which are herein incorporated by reference and made a part of this Agreement. Title VI also includes protection to persons with "Limited English Proficiency" in any program or activity receiving Federal financial assistance, 42 U.S.C § 2000d et seq., as implemented by the Department of the Treasury's Title VI regulations, 31 CFR Part 22, and herein incorporated by reference and made a part of this Agreement.

Choices- Organization will comply.

Organization will not or cannot comply.

Certification and Attestation for Application Submission

I/we the undersigned certify that the above information is true and correct and understand that any misinformation submitted or omitted could result in the ineligibility of this request. I/we understand that the application does not guarantee an award, and all eligibility guidelines, terms and conditions must be met to receive a grant. There may be additional supporting documentation requested by the review team at any time during this process.

Awardees will complete a grant agreement with the County prior to receiving their awarded funds. The grant agreement will outline the terms of the award, the reporting requirements, and important grant dates, including the date by which funds must be spent. The grant agreement will also include the requirement that awardees retain all grant documentation on spending for a period of five (5) years and agree to a County, State and/or Federal audit if required.

Applicants approved for a grant will be required to provide a Unique Entity Identification number. A Unique Entity Identification (UEI) number is provided by the Federal Government and may take time to obtain. If applicant does not already have a UEI, applicant will be required to register for a UEI on the SAM.gov Federal website. Washington County will pay award amounts to approved recipients within 30 days of execution of a grant agreement and receipt of the awardee's verified UEI number.

Applicant acknowledges that all applications submitted, as well as supporting documentation may be considered public documents. As such, all applications and supporting documents may be viewable and obtainable by the public under the provisions of the Public Information Act, MD Code Ann., State Government Article 10-613. Furthermore, the names of entities receiving grants, and the amount of grant awards they receive may be included in press releases issued by the County.

By signing below, I/we agree to comply with the grant program requirements and eligibility as described in the guidelines and application, and understand that if the application is approved, failure to comply with said terms and conditions will result in the termination of the grant award agreement, and possible forfeiture of the award.

Choices

I agree to the Terms and Conditions stated above

I do not agree with the Terms and Conditions listed above

Signature and Title of Person Completing Application

Printed Name

Title

Signature

Date

Attestation of the Executive Officer/CEO/Board President**

Printed Name

Title

Signature

Date

** Increased services must address one or more of the following- public health, mental health and substance abuse, household assistance for low income households (food, rent, utility assistance), Seniors, and services for households and children adversely impacted by the pandemic.*

***This person must have the legal authority to enter into a binding agreement on behalf of the organization.*