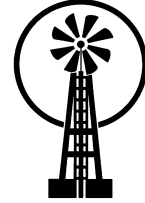




# Community Resource Program

Grant Application Packet



## **GENERAL INFORMATION:**

---

### **What Is The Community Resource Program?**

The Community Resource Program provides mini-grants and technical support for a uniquely Kansas approach to community development and joint learning. The program is designed to meet the educational, recreational, social, and cultural needs of a community. Based on the philosophy that each citizen has a skill, knowledge, experience, or idea to share, and that there are others in the community interested in learning, the program utilizes volunteer leaders, discovers untapped human resources, and offers classes and activities to the entire community. Often courses lead to a community project enhancing the quality of life in the community, encouraging community spirit by bringing people together.

Community Resource Grant Programs may be sponsored by an existing non-profit institution or agency in the community, such as a library, PRIDE Committee, hospital, or county extension unit, or it may be independently sponsored by a group specifically organized to implement a CRA Program. Community Resource Programs generally offer a catalog of class activities two to four times a year with at least six to ten classes per session. People register for classes and activities which can be held anywhere – in homes, churches, community centers, schools, and parks. Classes range from one meeting to ten or twelve weeks in length.

### **Eligibility for Grants**

Eligible organizations are local non-profit organizations, institutions, service agencies, or groups primarily concerned with the general welfare of the community which are organized for the purpose of establishing and operating community resource programs, community education programs, and community development programs.

### **Administration**

The Community Resource Act (CRA) Program is administered by Kansas State University, Division of Continuing Education, through UFM Community Learning Center. As an outreach program of UFM and the Division of Continuing Education, CRA strives to promote life-long learning throughout the state of Kansas.

A State Review Committee, made up of people experienced in community education and community development, reviews grant applications and program progress. They make recommendations to the Dean of Continuing Education who authorizes the distribution of grant funds on an annual basis.

## **Money Availability**

Small cash grants are available to assist communities in initiating their own programs. The program is designed so that local communities will eventually take over complete funding of their programs. Funds can be requested as follows:

First Year	--	75% of total budget (Max \$4,000)
Second Year	--	50% of total budget (Max \$3,000)
Third Year	--	25% of total budget (Max \$2,000)
Fourth Year	--	Total budget must be funded locally

Amounts of less than either the percentage maximum or dollar maximum may be requested. Also, if application requests exceed the amount of money available, priorities and partial funding will be considered in funding. (First-Year program grants generally range from \$3,500 to \$3,800.)

## **Technical Assistance**

Technical assistance may include pre-grant advice, and consultation on proposal preparation, program initiation and development, maintenance, and evaluation. The CRA Program staff shall serve as liaison between KSU and the community. Services are available from the Community Resource Program at UFM Community Learning Center, (785) 539-8763.

All CRA programs which receive funding are required to file two reports per year, one in July and one in January reporting financial and program data for the prior six month period.

## **Instructions**

The attached application should be completed on or before October 15, and sent to: Community Resource Program, UFM, 1221 Thurston St., Manhattan, KS 66502.

Please respond to the questions on pages one and two, but use your own format. The budget form should be either printed and completed by hand or typewriter, or you may reproduce the form using a similar format. The application may also be requested in electronic form by calling 1-785-539-8763 or emailing [ufm@ksu.edu](mailto:ufm@ksu.edu).

A community interest survey must be completed and the results included with the application. This does not need to be a long, time-consuming process. The purpose of the survey is to determine community interest in the program and the kinds of educational classes the community is interested in taking. One example of a survey can be found on page four of this packet. Please call UFM for other ideas and assistance with this process.

## **Application Procedures**

Communities interested in receiving grants to initiate a community resource program should send a completed application and Interest Survey summary to the above address. APPLICATION WILL BE NO LONGER THAN FIVE PAGES + ATTACHMENTS. TOTAL NOT TO EXCEED 12 PAGES.

## **Standards For Approval Of Applications**

Applications for grants from Community Resource funds shall be reviewed, evaluated, and approved or disapproved taking into consideration the following guidelines:

- (a) Proper and timely submission of required information;
- (b) County-wide or multi-community proposals which will promote cooperation between cities shall be given preference;
- (c) Proposals from communities with greater economic need, including those with a high proportion of elderly, low-income or minority residents, shall receive preference;
- (d) Geographical balance throughout the state in distribution of funds shall be considered desirable; and
- (e) Diversity in the types of organizations sponsoring community resource programs in the state shall be considered desirable.

The application will be examined in November by a review committee who will make recommendation to the Director of Community Outreach in the Division of Continuing Education at Kansas State University. Recommendations are then forwarded to the Dean of Continuing Education for final review. Local programming will commence January 1<sup>st</sup> of the following year. Checks for the full grant award will be sent following receipt of a signed award contract.

Assistance in completing the application may be received by contacting:  
Charlene Brownson, UFM Community Learning Center, 1221 Thurston, Manhattan, KS 66502  
or phone (785) 539-8763.

On the following pages you will find:

- Sample Interest Survey
- Guidelines for completing the budget request form
- CRA Grant Application

**(Example)Community Interest Survey (Example)**

Our community is looking at organizing a new program for everyone in the community. We need your help to secure a grant for educational programing. If we receive the grant, we would be able to offer a wide variety of classes, workshops and programs for the entire community. The CRA grant is administered by Kansas State University, Division of Continuing Education/ UFM Community Learning Center in Manhattan. Please take a moment to have each member of your family indicate which of the following programs and classes they would be most likely to attend. Thank you!!!

**Career & Finance:** budgeting understanding investments wills & estate planning  
starting a business choosing a career long-term care insurance

**Creative Free Time:** photography theater drawing watercolor knitting  
computers history basic car maintenance creative writing genealogy

**Recreation & Dance:**ballroom dance line dancing martial arts

**Wellness:** CPR yoga exercise dieting & nutrition weight loss  
aromatherpy massage senior aerobics reflexology

**Languages:** Spanish ESL German

**Personal Development:** self-defense for women improved your self-esteem  
leadership skills building better relationships getting organized

**Earth, Nature & Environment:** bird watching fishing lawn care gardening  
building a backyard ponds pet care hunting safety stargazing

**Youth:** arts & crafts field trips puppetry storytelling making gifts

**Food:** cake decorating cooking bread making vegetarian cooking

Other classes you would like to see offered \_\_\_\_\_

**UFM’s philosophy is “Everyone can learn and everyone can teach”**

Do you have interest, hobby or skill that you would like to share with other members of the community? \_\_\_\_\_

If so, what is the best way to contact you? \_\_\_\_\_

I would like to help with this program: distribute materials/flyers, recruit teachers, make phone calls, help with registration, be on a committee, assist instructors, design flyers, other \_\_\_\_\_ (circle all you would like to do)

Name \_\_\_\_\_ Phone \_\_\_\_\_ e-mail \_\_\_\_\_

Please return all surveys to \_\_\_\_\_ by \_\_\_\_\_

Guidelines for Completing the Community Resource Act Budget Request Form  
(page 3 of the application)

General Definitions of Line Items

**CRA FUNDS - Column 2**

1. PERSONNEL

Coordinator's salary  
Instructor fees (in-kind or special cases)

2. TRAVEL

The coordinator's out of town travel (deliver of brochures, pick-up supplies, attend workshops)  
To reimburse instructors from outside of community (only if necessary)

3. SUPPLIES

Office supplies  
Class supplies

4. TELEPHONE (long distance cost only, unless you have a separate CRA phone)

5. POSTAGE

Stamps  
Bulk rate fee

6. PROMOTION/ADVERTISING

Ads in paper

7. DUPLICATION (information for classes such as recipes, exercises, etc.)

8. PROGRAM MATERIALS

Brochures  
Paper  
Duplication  
Layout  
Other cost directly related to the brochure  
Flyers (in addition to brochures)

9. RENT

Office space  
Class space

10. OTHER

Legal fees (for incorporating)  
Miscellaneous - for other Program Expenses please specify (use sparingly)

**\*\*\* CRA FUNDS CANNOT BE USED TO PURCHASE EQUIPMENT OR EXPENDED FOR BUILDING RENOVATIONS OR IMPROVEMENTS**

**LOCAL In -Kind - Column 3**

(match for time, supplies or services donated directly and documented on in-kind forms)

1. Personnel (calculate match at a \$10.00/hr or amount equal to that person's professional fees for the class, prep and evaluation time)  
Advisory Board meetings & volunteer time.  
Extra help with registration, deliver brochures, etc.  
Instructors who do not receive payment.
2. Travel (calculate match at 40.5 cents/mile or current rate)  
Coordinators (e.g., Travel 20 miles to the printer)  
Instructors (10 + miles) who do not wish to be reimbursed
3. Supplies (fair market value)
4. Phone (proportion of expenses allocated to the CRA program)
5. Postage (e.g., School distributes brochures in a newsletter at no cost)
6. Advertising (free ads in newspaper - this does not include news articles which are free)
7. Duplication - calculate match at 10 cent/copy unless otherwise priced (e.g., local banks or schools sometimes provide this service at low or no cost)
8. Brochures (e.g., paper, printing, or the layout may be donated)
9. Rent (class & office space only if there is normally a charge for the facility)

**MATCH CASH - Column 4**

(Local cash match generated locally and included in the total budget)

**TOTAL - Column 5**

(Total each row and column)

## **Community Resource Program Grant Application**

Please indicate the following information in your application. Feel free to use your own format. Please type or use a word processor. A narrative style is preferred.

APPLICATION DATE \_\_\_\_\_

**Organization applying for funding:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

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

### **Community Data:**

Tell us about our community. Provide information including:

- a. Number of people in town or community
- b. Number of people in county
- c. Any other characteristics, if important, about your community

### **Application Questions:**

- 1. EXPLAIN YOUR COMMUNITY ASSESSMENT SHOWING THE NEED FOR THE PROGRAM. (You MUST do an interest survey in the community. You may also wish to include letters of support from local leaders. Include a summary with your grant application.)
- 2. DESCRIBE SIMILAR PROGRAMS ALREADY IN EXISTENCE IN YOUR COMMUNITY. (This may be community college courses, extension offerings, recreation programs, etc.)
- 3. SHOW EVIDENCE OF JOINT PLANNING AND COOPERATION WITH PUBLIC AND PRIVATE SECTORS OF SIMILAR COMMUNITY BASED PROGRAMS. (Describe any conversations with other officials, town meetings, meetings open to the public, other communication, joint support and planning.)
- 4. DESCRIBE YOUR STEERING COMMITTEE. (Each program must have a steering committee. Please list its members, their addresses, telephone numbers, and positions in the community.)

5. DESCRIBE YOUR PLAN OF OPERATION FOR THE ORGANIZATION:

- a. When did (or will) your organization start?
- b. Name of New CRA Program?
- c. Who is the main contact person for the CRA Program?
- d. Who is on the local advisory council of the parent organization and CRA Program? (If different than the Steering Committee, please name the members, their positions in the community, addresses, and telephone numbers.)
- e. How many program sessions a year are planned?
- f. How many courses are planned for each session?
- g. If there are other activities, projects planned or envisioned, please state these.
- h. List some specific goals and objectives of the CRA program.

6. FINANCES:

- a. COMPLETE THE BUDGET FORM ON PAGE THREE, REFER TO “GUIDELINES” FOR SPECIFIC INFORMATION.
- b. Complete the budget narrative on page 4 justifying the amount budgeted for each line item.
- c. Please state the source and amount of your local cash and in-kind match.
- d. Are there other sources of income planned? If so, describe.

7. LONG TERM SUPPORT:

- a. What are your long term plans for the organization?
- b. What long term local sources of support do you expect to sustain the program after state monies are no longer available?

8. PROGRAM EVALUATION:

Describe any plans for evaluating the CRA programs/classes.

COMMUNITY RESOURCE ACT BUDGET REQUEST

**Organization Name:**

**Address:**

**Contact Person:**

**Telephone Number:**

1	2 CRA FUNDS	3 LOCAL In-Kind	4 MATCH Cash	5 TOTAL
Personnel	\$	\$	\$	\$
Travel	\$	\$	\$	\$
Supplies	\$	\$	\$	\$
Telephone	\$	\$	\$	\$
Postage	\$	\$	\$	\$
Promotion/ Advertising	\$	\$	\$	\$
Duplication	\$	\$	\$	\$
Program Materials	\$	\$	\$	\$
Rents	\$	\$	\$	\$
Other (Specify)	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$

**Budget Justification:**

WRITE A NARRATIVE JUSTIFYING THE AMOUNT BUDGETED FOR EACH LINE ITEM WITH A BRIEF EXPLANATION OF THE USE OF THESE FUNDS (i.e., supplies will include the purchase of ....., rent will include the rental of ..). Attach additional pages if necessary and show calculations of how these budget amounts have been generated.

# CRA Program Activity Agreement

SCOPE OF WORK: The grantee agrees to establish and maintain a community education program by carrying out the goals and objectives as defined in the grant application:

- A. Establish a local advisory council.
- B. Select a program coordinator.
- C. Establish a program office.
- D. Assess community instructional needs/desires.
- E. Recruit class/project leaders.
- F. Prepare course descriptions.
- G. Prepare and distribute information concerning the program.
- H. Enroll students.
- I. Conduct classes as proposed in the grant application.
- J. Maintain local checking account and budget expenditures.
- K. Maintain scrapbook containing history of program to include brochures, articles in paper, and pictures.
- L. Report semi-annually to CRA office.
- M. Evaluate effectiveness of course content.

**Organization Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

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

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

-----

For Office Use Only

Date Received: \_\_\_\_\_ Review Committee Meeting Date: \_\_\_\_\_

Application approved \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Amount Awarded \$ \_\_\_\_\_

Contract Issued \_\_\_\_\_ Contract Returned \_\_\_\_\_

Check Sent \_\_\_\_\_