

Contributions Assistance Application FY23/24

Program Overview

The goal of the City of Avondale's Contributions Assistance Program is to fund programs, which provide direct services addressing the health and welfare of Avondale residents. The program allocates funding on a fiscal year basis. The fiscal year 2023-2024 begins July 1, 2023 and ends June 30, 2024.

Eligibility Criteria

- Applicants must provide direct services, which improve the health and welfare of Avondale residents with a preference for services provided in Avondale.
- Non-profit 501 (c) (3) status.
- Applicants that received previous funding must be current in their reporting. Timely and accurate reporting submissions are considered.
- Applicants must demonstrate the ability to generate revenue from other sources.
- Maximum amount of award will not exceed \$20,000.

Agency Information

Agency Name *

Executive Director/CEO *

Address *

 

Email *

Phone *

Program Information

Project Name *

Project Contact Person *

Email *

Phone *

Brief Project Synopsis *

Total Contributions Assistance Funding Requested *

Minimum Contributions Assistance Funding Requested *

Application Directions

Please answer the following questions in narrative form. There will be up to five points added to your score for the completeness and correctness of the application. Up to ten points may be subtracted if you were previously funded and reports were not submitted correctly and/or project outcomes were not met.

Submission Directions

- One electronic copy of the application and required attachments must be submitted no later than **5:00 p.m. on Thursday, April 27, 2023**.
- Late applications will not be accepted.
- Please save a copy of this application for your records before submitting.
- **Funded programs** are required to report completed goal measurements on or before **July 20, 2023 by 5:00 p.m.**

Program-Related Inquiries

Please Contact:

Edith Baltierrez at 623.333.2712 or at
ebaltierrez@avondaleaz.gov

Application-Process Questions

Please Contact:

Mayra Garibo-Davila at 623.333.2720 or at
mgaribodavila@avondaleaz.gov

Project Description (30 points)

Please provide a brief description of your project and the needs of the project.

Response *

Health and Human Services Outreach

Briefly describe how you will collaborate with the City of Avondale and work with other organizations for outreach in order to provide health and human services to the residents of Avondale.

Response *

Total number of persons expected to be served by this project during the funded year. *

Total number of Avondale residents you expect to serve by this project during the funded year. *

Measurable Goals (25 points)

Please provide three goals and describe how progress will be measured to ensure success in providing health and human services to the residents of Avondale. Please see the example below.

Goal Example: Of the 80 persons served by the project, 40% (32 persons) will find employment within three months of entering the program. This will be measured by follow-up contact with each program participant.

Measurable Goal No. 1 *

Measurable Goal No. 2 *

Measurable Goal No. 3 *

Project Budget (15 points)

Total Program Budget *

(This should include the total cost the organization spends for the entire program beyond servicing Avondale.)

Total From Other Funding Sources *

(This should include additional funding sources that support the entire cost of the program.)

Total Contributions Assistance Funding Requested *

(This amount should reflect the maximum amount requested for Contributions Assistance.)

For the maximum amount of Contributions Assistance requested, please indicate the allocation of funding, accordingly, per the categories below.

**Contributions Request Payroll/Wages/
Salaries ***

Contributions Request Professional Services *

Contributions Request Supplies *

Contributions Request Training *

**Contributions Request Administrative
Cost (up to 10%) ***

Contributions Request Other *

Budget Explanation

Please explain how the Contributions Assistance funds will be utilized for your project? *

Describe how these funds will benefit residents of Avondale directly. Please include data that supports the need for your project. *

If the project receives the minimum amount of funding, what adjustments would be made to the project and services provided to Avondale residents? *

Up to 10% of the funding amount may be requested to support administrative costs associated with your project. Please explain how this portion of funds will be utilized to support administrative costs for your project. *

Attachments

Organization's Mission Statement *

[Upload](#) or drag files here.

Organization's 501(C)(3) Status *

[Upload](#) or drag files here.

Organization's Board of Directors *

[Upload](#) or drag files here.

Current W9 *

[Upload](#) or drag files here.

Signature *

×

[draw](#) type

Submitted Date *



[Submit](#)