



APPLICATION TO BE USED FOR SOCIAL SERVICE PROJECTS ONLY

**WILLIAMSON COUNTY
FY 2012 COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG)
APPLICATION FORM
SOCIAL SERVICE PROJECTS**

FUNDING FOR FY2012 (OCT. 1, 2012 – SEPT. 30, 2013)

Please read the following Federal Regulation (CFR 570.201) before completing the application:

Basic Eligible Activities 570.201

(e) *Public services.* Provision of public services (including labor, supplies, and materials) including but not limited to those concerned with employment, crime prevention, child care, health, drug abuse, education, fair housing counseling, energy conservation, welfare (but excluding the provision of income payments identified under § 570.207(b)(4)), homebuyer down payment assistance, or recreational needs. **To be eligible for CDBG assistance, a public service must be either a new service or a quantifiable increase in the level of an existing service above that which has been provided by or on behalf of the unit of general local government (through funds raised by the unit or received by the unit from the State in which it is located) in the 12 calendar months before the submission of the action plan.**

HUD will begin using American Community Survey 3-5 year data beginning with the 2012 funding cycle. This data is expected to be available June or July 2012 and will be used in determining the eligibility of projects. All projects requesting Williamson County CDBG funds will be reviewed for funding. However, the proposed funding amounts are not guaranteed until final verification of project eligibility is determined based on the new American Community Survey data.

Applicant Organization Name & Contact Information

ORGANIZATION NAME	
NAME & TITLE OF CONTACT PERSON	
ADDRESS LINE 1	
ADDRESS LINE 2	
CITY	
STATE	
ZIP	
TELEPHONE NUMBER	
FAX NUMBER	
EMAIL ADDRESS	

Project Information

PROJECT TITLE	
PROJECT DESCRIPTION	
WILL THE PROJECT BE READY TO BEGIN ON OR ABOUT OCTOBER 1, 2012?	YES <input type="checkbox"/> NO <input type="checkbox"/>

Type of Proposal (place an X in all appropriate box(es))NEW PROJECT ☐INCREASE OF EXISTING PROJECT ☐**Project Funding**

AMOUNT OF CDBG FUNDS REQUESTED	\$
TOTAL FUNDS OBTAINED FROM OTHER RESOURCES	\$
TOTAL COST OF PROJECT	\$

BACKGROUND INFORMATION**Organization History and Purpose**

--

Description of the Community Need

--

Method or Solution Proposed (Identify new service or quantifiable increase in the existing service)

How Project will Effectively Address Problem(s)

Resources Necessary for Project

Results

CLIENT DATA (ensure that totals agree between client tables)

Precinct and Census Tract (Use data from February 2011 through January 2012.)

Precinct Number	1	2	3	4	Non-County	Total
Census Tract Served						
Number of Clients Served						

If Applicable, explain why agency serves non-urban county residents:

Ethnicity and Gender (Use data from February 2011 through January 2012.)

Ethnicity	Male	Female	Total
White			
Black			
Native American			
Asian			
Hispanic			
Other			
Total			

Age of Client Population (Use data from February 2011 through January 2012.)

Client Age	0-5	6-13	14-18	19-21	22-34	35-54	55-64	65+	Total
Number of Clients Served									

Explanation if needed:

Percent Low-Mod**Eligibility****Does project participation depend upon income or any other determination of eligibility?**YES ☐NO ☐**If yes, attach the program's eligibility criteria.****Does the project charge client fees?**YES ☐NO ☐**If yes attach the program's fee policy.**

Service Area (Identify the geographic boundaries of the proposed service area. Please include cities and/or areas served.
 Attach a map that shows the project site and/or defines the service area.)

SERVICE COLLABORATION

Agency/Program Name	Type of Collaboration	Length of Affiliation	Impact for Client

BOARD DATA

NUMBER OF BOARD MEMBER POSITIONS AUTHORIZED	
NUMBER OF BOARD MEMBER POSITIONS FILLED	
NUMBER OF ANNUAL BOARD MEETINGS SCHEDULED	
THE LENGTH OF THE BOARD MEMBERSHIP TERMS	
NUMBER OF CONSECUTIVE TERMS A MEMBER CAN SERVE	

Briefly describe how board members are recruited and selected

--

PROGRAM FUNDING DATA

Funding Source	Previous Year FY 10/11	Current Year FY 11/12	Requested FY 12/13
Local Government			
State Government			
Federal Government			
Non-Government			
In-Kind Contributions			
Total Funding			

Specify each funding source and the amount awarded by each.

--

Authorization

Executive Director

Signature

Date

Chair of Board of Directors

Signature

Date

Please include the following documents with this proposal:

1. Detailed budget of project, specifically outlining the use of CDBG funds and leveraged funds for this project.
2. Agency charter and amendments.
3. Agency by-laws and amendments.
4. Copy of the agency's mission statement
5. Tax exempt Status (copy of current authorization).
6. Certificate of Occupancy (copy of current authorization).
7. Copy of most current fiscal audit of the agency.