



Chatham County FY25 Nonprofit Funding Application Kick-Off Webinar

Thursday, February 1st, 2024

Brenda Clegg, CDE[®], SHRM-CP
Equity & Community Engagement Officer

Eric Lindley
Budget and Management Analyst

Online Meeting Guidelines

Recorded: This meeting will be recorded

Mute: Stay on mute when not speaking

Video: **OFF** – When Listening

ON – When Speaking (if possible)

State your name and Agency name when asking a question or commenting.

Q&A Open after sections for **5-6 minutes max.**

Chat: We invite you to use it!

Webinar Housekeeping

Powerpoint slides and **webinar recording** will be sent out after the webinar.

This webinar is intended to be an **overview** of the application and evaluation process.

We will not be covering how to use **Foundant**. If you want specific instructions, contact Erik Lindley.



Funding Priorities

Eligibility

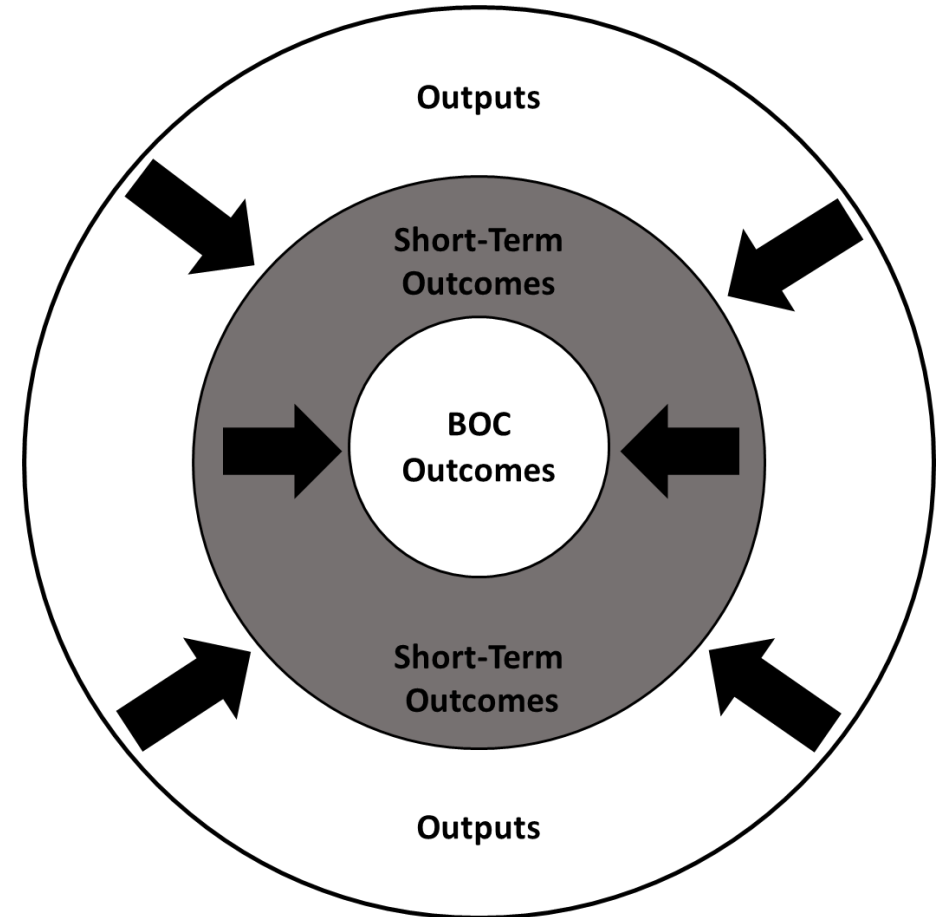
Application Review

Evaluation Criteria

Timeline and Key Dates

Q & A

In FY25, we will fund programs or services that support BOC Outcomes/Goals.



FY25 Board of Commissioner Goal

“To **mitigate the impacts of poverty** among individuals and households in the county through programs and services that **promote stabilization and resiliency**.”

<https://www.chathamcountync.gov/organizations/nonprofit-partners-grantees/nonprofit-grants-policy>

Stabilization

Process of **reducing of risk factors** that can result in crisis or emergency

Resiliency

Process of **adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress** — such as family and relationship problems, serious health problems or workplace and financial stressors *(American Psychological Association)*

FY25 Goals

Human Services



Improved **economic stability**
for low/moderate income
adults



Improved **access to**
comprehensive health care



Improved **outcomes for**
children/youth living in
poverty



Economic Stability

Includes programs/services that address:

- Poverty Mitigation
- Employment
- Housing Stability
- Food Security
- Language and Literacy



Children and Youth

Includes programs/services that address:

- Early Child Education and Development
- Language and Literacy
- High School Graduation
- Enrollment in Higher Education

Sources: [Healthy People 2020, Education](#); [NC Early Childhood Action Plan, Learning and Ready to Succeed](#)



Access to Healthcare

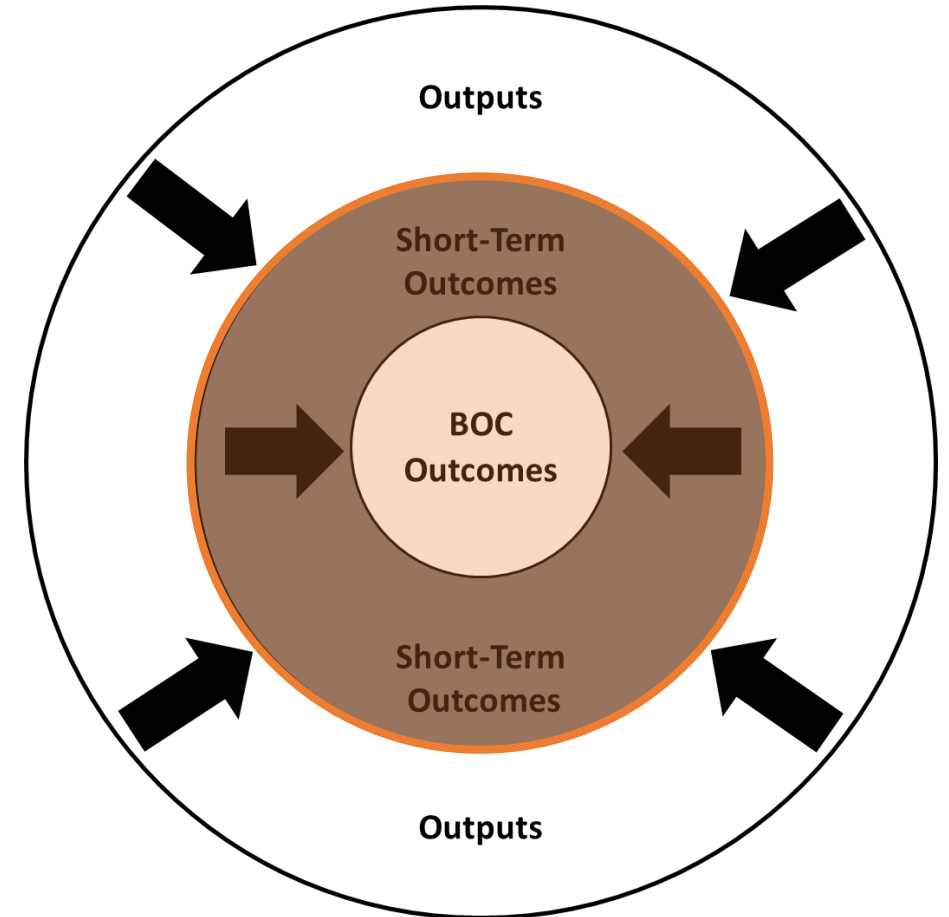
Includes programs/services that address:

- Access to Health Care (Physical and Mental)
- Access to Primary Care
- Health Literacy

Sources: [Healthy People 2020, Health and Health Care](#); [NC Early Childhood Action Plan, Healthy](#)

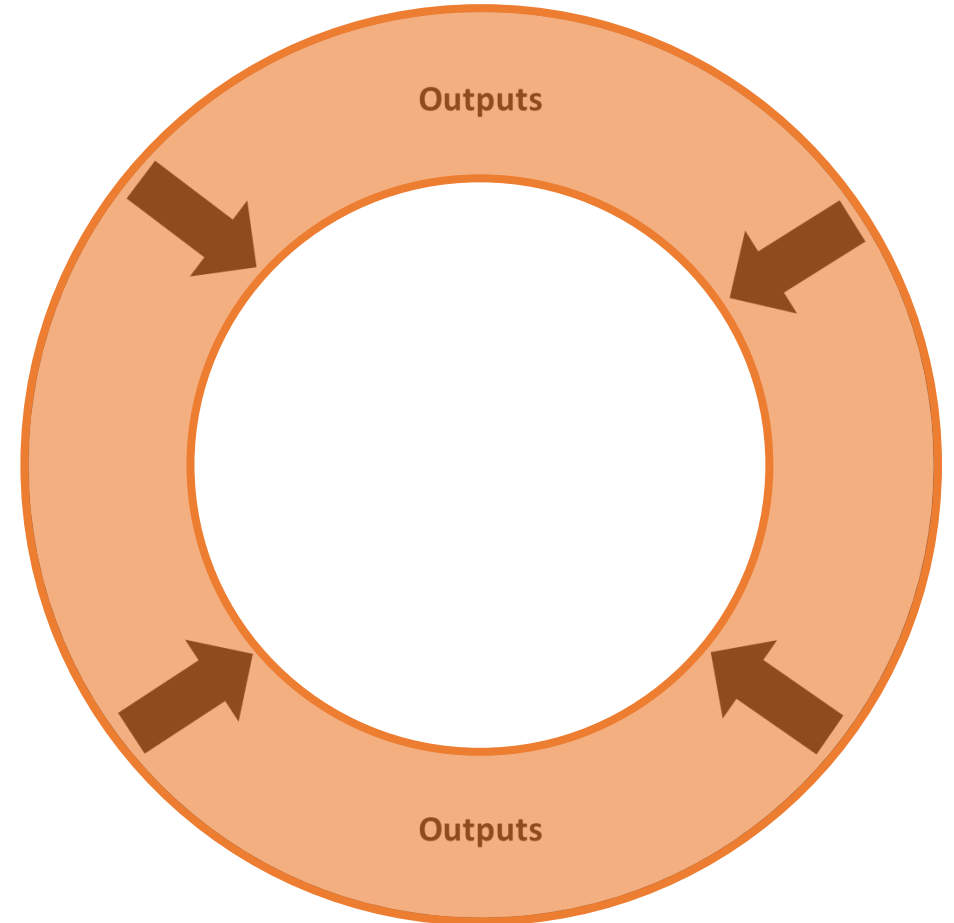
Outcomes

A measurement of the **specific results/change/effect** the program or service is intended to achieve **in the short, intermediate, and long-term.**



Outputs

A measurement of the immediate and direct result of a program or service such as the amount of service delivered, the reach of services, or how much was accomplished.



Questions/Comments?



Funding Priorities

Application Review

Evaluation Criteria

Application Timeline

Q & A

Accessing the Application

chathamcountync.gov/organizations/nonprofit-partners-grantees/nonprofit-grants-policy

The screenshot shows the Chatham County website interface. At the top, there is a navigation bar with the Chatham County logo on the left and menu items: "Our Community", "Government", "Organizations", and "English". A search icon is visible on the right. Below the navigation bar, a green sidebar menu is open, showing a hierarchy: "Carolina Community College" > "Nonprofit Partners & Grantees" > "Nonprofit Agency Resources" > "Nonprofit Grants & Policy" (highlighted). The main content area features a heading "NONPROFIT APPLICATION PROCESS:" followed by a paragraph explaining the RFP process. To the right of this text is a callout box for the "FY 2025 APPLICATION" with dates "Open from February 1, 2024 until March 1, 2024." Below this is a section titled "FY 2025 Human Services Nonprofit Funding Priorities" with a paragraph about the Board of Commissioners' goal. This is followed by definitions for "Stabilization" and "Resiliency". The page concludes with a paragraph about soliciting RFPs and a bulleted list of outcomes, including "Improved economic stability for low/moderate income adults" which includes "Poverty Mitigation".

Our Community Government Organizations English

Carolina Community College

- Nonprofit Partners & Grantees
 - Nonprofit Agency Resources
 - Nonprofit Grants & Policy

NONPROFIT APPLICATION PROCESS:

As of FY 2020, Chatham County adopted a Request for Proposal (RFP) for services approach for the annual Human Services Nonprofit Allocation Process. The County Human Services Collaborative Impact Team (CIT) Nonprofit Subcommittee and Community Partners Analyst provide guidance on Human Services funding priorities and the application process. Applications are evaluated based on their program and service's demonstrated ability to efficiently, effectively and equitably address Board of Commissioners' goal and identified outcomes.

FY 2025 APPLICATION
Open from February 1, 2024 until March 1, 2024.

FY 2025 Human Services Nonprofit Funding Priorities

Board of Commissioners' goal for the FY 2025 Nonprofit Allocation Process is to **mitigate the impacts of poverty among individuals and households in the county through programs and services that promote *stabilization* and *resiliency*.**

Stabilization: Process of reducing of risk factors that can result in crisis or emergency

Resiliency: Process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress — such as family and relationship problems, serious health problems or workplace and financial stressors (American Psychological Association)

For FY 2025, the county is soliciting request for proposals (RFP) for **programs or services that support the three outcomes** within the Board of Commissioners goal:

- Improved **economic stability** for low/moderate income adults
 - Includes programs/services that address:
 - Poverty Mitigation

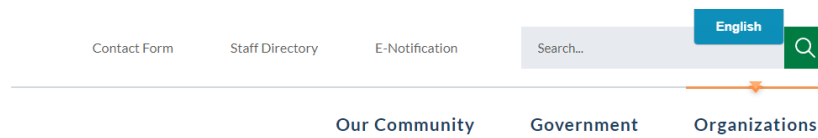
Accessing the Application

chathamcountync.gov/organizations/nonprofit-partners-grantees/nonprofit-grants-policy

OR

[Foundant Logon Page:](https://www.grantinterface.com/Home/Logon?urlkey=chathamcounty)

<https://www.grantinterface.com/Home/Logon?urlkey=chathamcounty>



Organizations » Nonprofit Partners & Grantees »

Nonprofit Agencies Process & Policy

[Print](#) [Feedback](#) [Share & Bookmark](#) [Font Size: + -](#)

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FY 2024 APPLICATION

Open from February 1, 2023 until March 3, 2023.

FY 2024 Human Services Nonprofit Funding Priorities

Board of Commissioners' goal for the FY 2024 Nonprofit Allocation Process is to **mitigate the impacts of poverty among individuals and households in the county through programs and services that promote stabilization and resiliency.**

Stabilization: Process of reducing of risk factors that can result in crisis or emergency

Resiliency: Process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress — such as family and relationship problems, serious health problems or workplace and financial stressors (American Psychological Association)



Logon Page

Email Address*

The Email Address* field is required.

Password*

The Password* field is required.

[Log On](#)

[Create New Account](#)

[Forgot your Password?](#)

Welcome to the Chatham County and United Way Application Portal.

If someone at your organization has already registered in the system, DO NOT create a new account. Contact the Grant Administrator at UWCampaign@emji.net to receive your username and password.

Existing Users: Please enter your credentials and log in. If you forgot your password, please use the "Forgot your Password" link to the left to reset your password.

New Users: Please click on "Create New Account" to complete the registration process and create your logon credentials.

Eligibility and Application Instructions

Agencies applying for human services funds may not apply for funding for the same program from different county sources and vice versa.

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All applicants must complete a certification process to assess the agency's eligibility to receive County funds.

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All applicants must complete a certification process to be assess the agency's eligibility to receive County funds.

Agencies submitting applications for more than one program or service must complete an application for each request, regardless of if they are for the same Board of Commissioner outcome.

Application Sections



General Information



Agency Information



Program/Service Information



Certification Attachments



General Information



General Information

Agency Name

Primary Contact Name

Primary Contact Email Address

Executive Director/CEO (or Board Chair if no Executive Director) Name

Executive Director/CEO (or Board Chair if no Executive Director) Email Address

Agency Mailing Address

Agency Physical Address

Office Phone

Mobile Phone

Total Chatham County nonprofit allocation funds requested for the Fiscal Year 2022?



Agency Information



Agency Mission

Organization's Mission, Vision, and Values

Character Limit: 1500



Pending Lawsuits

Are there reports of pending lawsuits, known fraud or embezzlement activity within the agency? If yes, please explain:

Character Limit: 1500



Agency Evaluation

Does your agency receive a regular evaluation, certification or similar process by an external group for any programs you operate? If so, by whom? How often? Please report any deficiencies or corrective actions taken within the last five years.

Character Limit: 1500



Board Review of Financials

Does the Board Review your agency's financials at least quarterly? If no, please explain.

Character Limit: 1500



Schedule of Positions

FTE Full-Time (e.g. 30 + hours per week) Paid Positions:_____

FTE Part-Time (e.g. Less than 30 hours per week) Paid Positions:_____

Character Limit: 250



Total Volunteer Hours

How many total hours do volunteers provide for your agency in Chatham County annually, including unpaid students and interns.

Character Limit: 250



Program/Service Information



Name of Program or Service

What is the name of the program/service that you are proposing to deliver?

Character Limit: 250



Outcome

The Chatham Board of Commissioners has a goal to “*mitigate the impacts of poverty among individuals and households in the county through programs and services that promote stabilization and resiliency*”. Which of the following outcomes will you primarily address with this funding?

- Improved economic stability for low/moderate income adults
- Improved outcomes for children and youth living in poverty
- Improved access to comprehensive health care



Program/Service Impact



Please briefly describe the impact of your proposed program/service. Include an explanation of:

- How it aligns with the Chatham County BOC Goal and Outcomes (see question above)
- What are the anticipated long-term impact(s) of your program or service on the proposed on the population served
- What evidence, quantitative and qualitative, demonstrates the impact of your program/service on the selected outcome
- How the program/service uses evidence-informed and/or research-based approaches to address need



Program/Service Delivery

Describe the proposed program/service delivery process. Include an explanation of the:

- Screening, Referral, and/or Admission Process
- Key Activities
- Frequency and Duration of Client Services
- Program/Service Schedule

Character Limit: 3000



Population Served



Please complete and upload the provided table with numbers of individuals previously served by this entire program/service.

- See [THIS LINK](#) for a map Chatham County Geographic Quadrants by Zip Code

If you are not currently collecting data, please explain your reason for not collecting this data and/or plans to collect this data moving forward. If you are estimating data, please indicate which data is estimated and how you are estimating it.

Character Limit: 1500

Do you anticipate any changes in the FY24 population served? What populations are you not serving and/or struggling to reach, and how will you try to reach them?

Character Limit: 1500



Population Served



2020/2021 Chatham County Nonprofit Funding Allocation Population Served by Program/Service			
Agency Name:			
Name of Program or Service:			
End of Fiscal Year:			
Program/Service Target Population Demographics			
	Chatham County* (%)	Actual Previous Year # (FY19)	Actual Previous Year % (FY19)
Gender			
Men	48%		#DIV/0!
Women	52%		#DIV/0!
Nonbinary/Genderqueer			#DIV/0!
Self-Describe			#DIV/0!
Unknown			
Total	100%	0	#DIV/0!
Race and Ethnicity			
Black or African-American	12%		#DIV/0!
American Indian or Alaska Native			#DIV/0!
Asian	1%		#DIV/0!
White	80%		#DIV/0!
Native Hawaiian or other Pacific Islander			#DIV/0!
Other: specify _____	6%		
Unknown			#DIV/0!
Total	99%	0	#DIV/0!
Of the above, how many Hispanic/Latinx	13%		#DIV/0!
Of the above, how many non-Hispanic/Latinx	87%		#DIV/0!
Total	100%	0	#DIV/0!

Age			
0-5 years	5%		#DIV/0!
6-18 years	16%		#DIV/0!
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Unknown			
Total	100%	0	#DIV/0!
Income			
Low Income** (Please Define***: _____)	13%		#DIV/0!
Total	13%	0	#DIV/0!

* Chatham County estimates based on 2013-2017 American Community Survey 5-Year Estimates, Chatham Community Assessment and/or ESRI 2018 Population Estimates; ** Chatham County "Low-Income" estimate defined by percent of individuals living below the poverty line; ***Agencies should report data based on the metric defined in this space



Population Served



Fill In
these
questions
firsts



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Fill In these Numbers



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Will Auto Populate

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Use for Comparisons →

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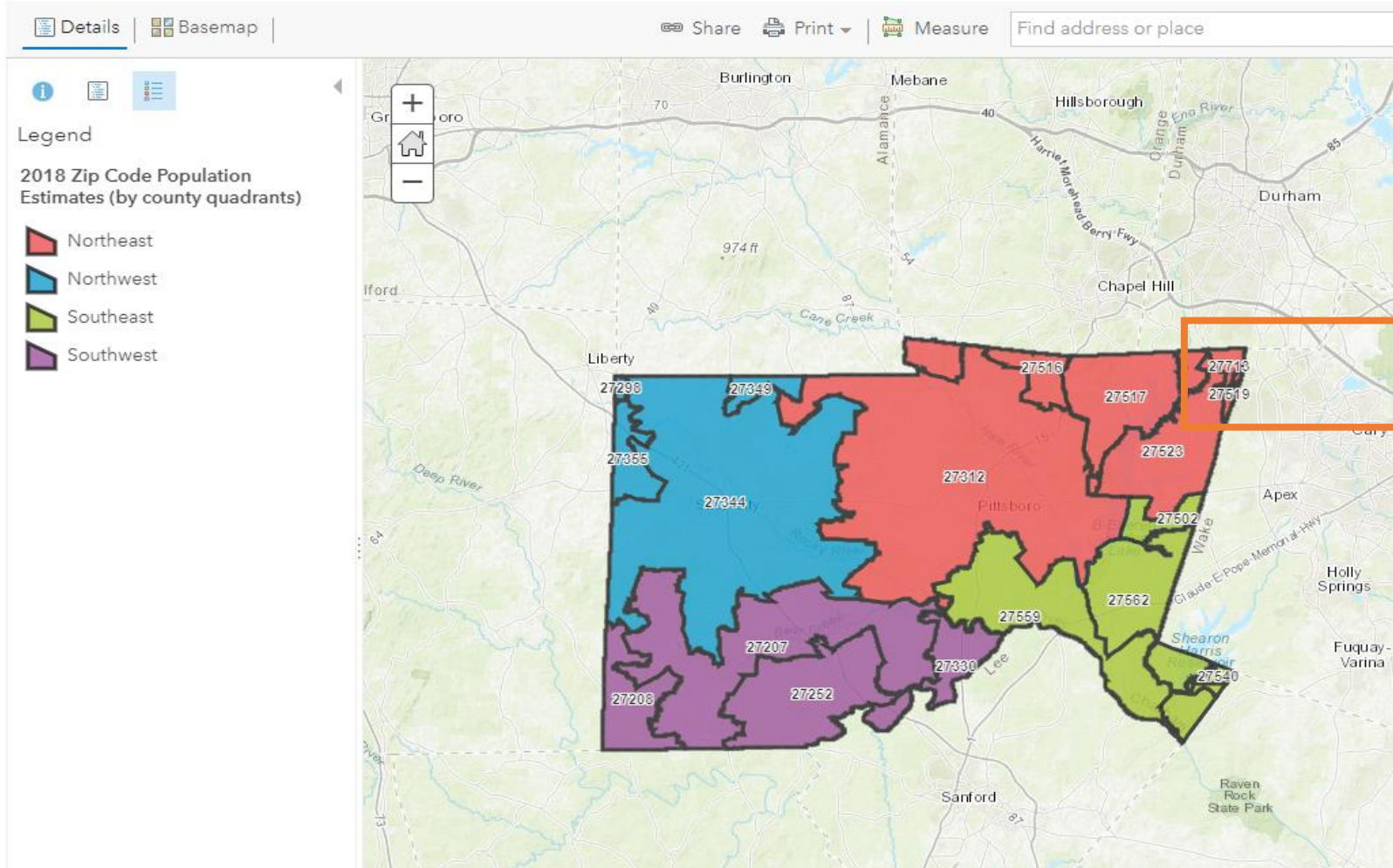


Population Served



ArcGIS ▾ 2018 Zip Code Population Estimates

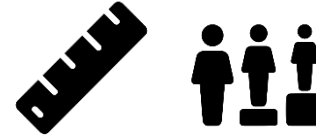
Modify M



Use Zip Codes to Identify Clients' Geographic Quadrant



Population Served



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Asian	1%		#DIV/0!
White	80%		#DIV/0!
Native Hawaiian or other Pacific Islander			#DIV/0!
Other: specify _____	6%		
Unknown			#DIV/0!
Total	99%	0	#DIV/0!
Of the above, how many Hispanic/Latinx	13%		#DIV/0!
Of the above, how many non-Hispanic/Latinx	87%		#DIV/0!
Total	100%	0	#DIV/0!

Age			
0-5 years	5%		#DIV/0!
6-18 years	16%		#DIV/0!
19-64 years	56%		#DIV/0!
65+ years	23%		#DIV/0!
Unknown			
Total	100%	0	#DIV/0!
Geographic Location (Click Cell for Map of Chatham Quandrants by Zip Code)			
Northeast (27312, 27517, 27713, 27516, 27523, 27519)	58%		#DIV/0!
Southeast (27502, 27562, 27559, 27540)	5%		#DIV/0!
Northwest (27344, 27349, 27355, 27298)	27%		#DIV/0!
Southwest (27207, 27252, 27208, 27330)	11%		#DIV/0!
Unknown			
Total	100%	0	#DIV/0!
Income			
Low Income** (Please Define***: _____)	13%		#DIV/0!
Total			

* Chatham County estimates based on 2013-2017 American Community Survey 5-Year Estimates, Chatham Community Assessment and/or ESRI 2018 Population Estimates; ** Chatham County "Low-Income" estimate defined by percent of individuals living below the poverty line; ***Agencies should report data based on the metric defined in this space

Please Include your agency's definition of Low income



Population Served



Please complete and upload the provided table with numbers of individuals previously served by this entire program/service.

- See [THIS LINK](#) for a map Chatham County Geographic Quadrants by Zip Code

If you are not currently collecting data, please explain your reason for not collecting this data and/or plans to collect this data moving forward. If you are estimating data, please indicate which data is estimated and how you are estimating it.

Character Limit: 1500

Do you anticipate any changes in the FY24 population served? What populations are you not serving and/or struggling to reach, and how will you try to reach them?

Character Limit: 1500



Client Engagement



How are the people you serve involved in planning and decision making in your program/service? Do you consult program participants before, during and/or after implementation of projects or programs? How?

Character Limit: 1500



Personnel



Please describe the qualifications of the staff and individuals delivering this program/service and the role each will play in the program/service. How do the staff and individuals delivering the program/service reflect the population or community that you serve, in terms of race, ethnicity, class, gender and/or lived experiences?

Character Limit: 1500



Partnerships and Collaboration

What other organizations or county departments are **directly involved** with or will be **directly involved in the delivery of this program/service**.

Please indicate a primary point of contact (*i.e. contact name, position, email and/or phone number*) for each organization and/or county department directly involved in program/service delivery that evaluators may use to verify this partnership and collaboration.

What other local organizations provide similar services or serve similar beneficiaries, and how do you work together?

Character Limit: 1500



Consent to Validate Partnerships

Upon checking the box below, I consent to authorizing application evaluators to validate partnerships identified in the response to this question through individual contact by phone.

Yes, I authorize evaluators to verify any partnerships I listed.



Performance Measures

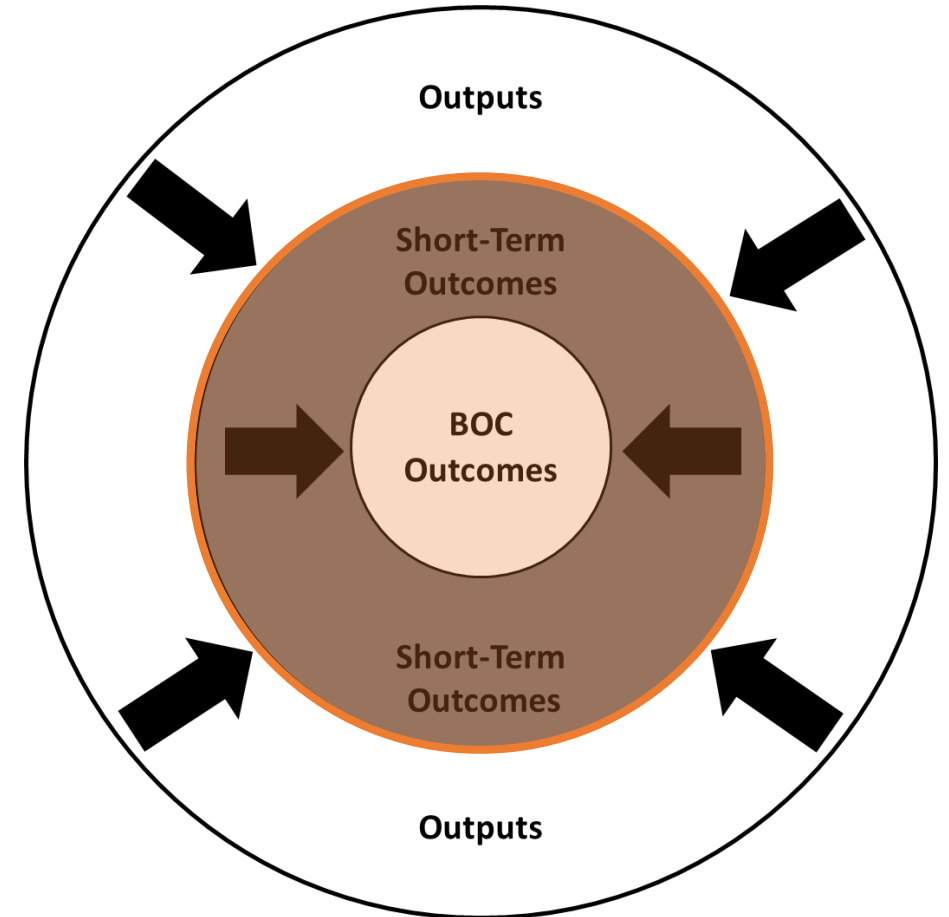
Using the provided template, indicate up to three short-term outcomes for the proposed program/service that support the selected BOC outcome, AND up to five outputs that support the previously indicated short-term outcomes.



Performance Measures

Outcomes

A measurement of the **specific results/change/effect** the program or service is intended to achieve **in the short, intermediate, and long-term.**

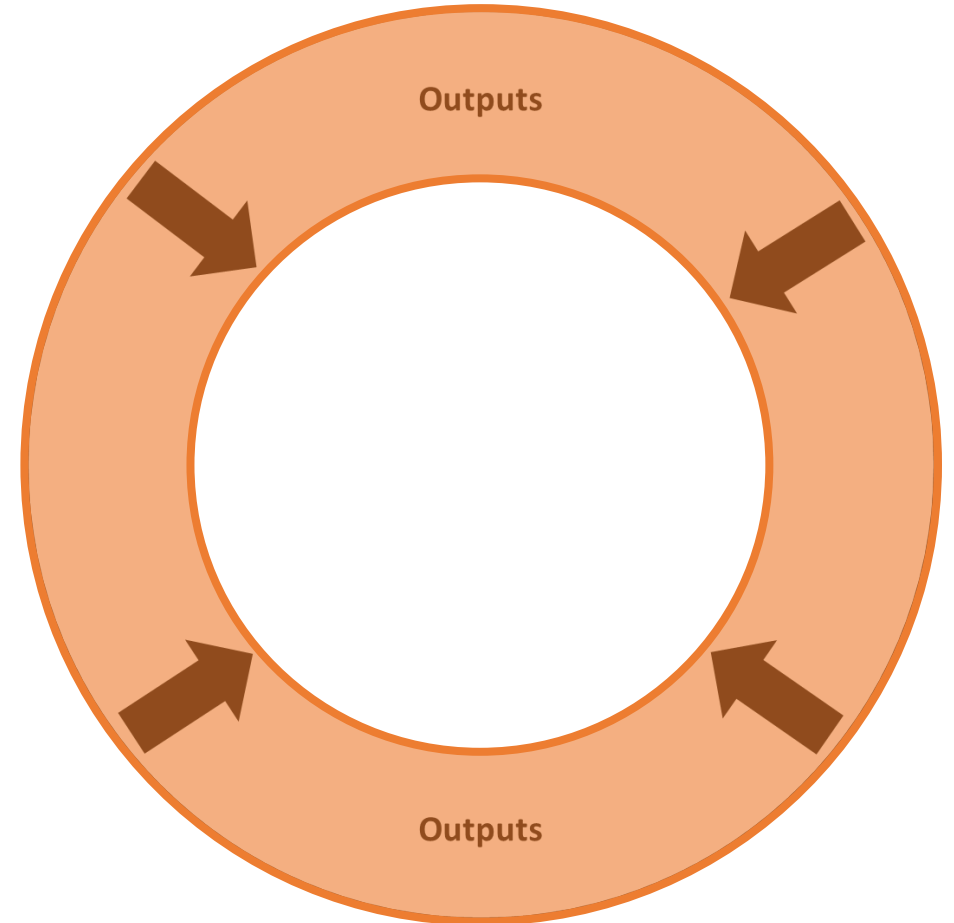




Performance Measures

Outputs

A measurement of the immediate and direct result of a program or service such as the amount of service delivered, the reach of services, or how much was accomplished.





Performance Measures

Unit of Service (e.g. individual, households, clients, etc.):

Primary BOC Outcome (Please Select):

- Improved economic stability for low/moderate income adults
- Improved outcomes for children and youth living in poverty
- Improved access to comprehensive health care

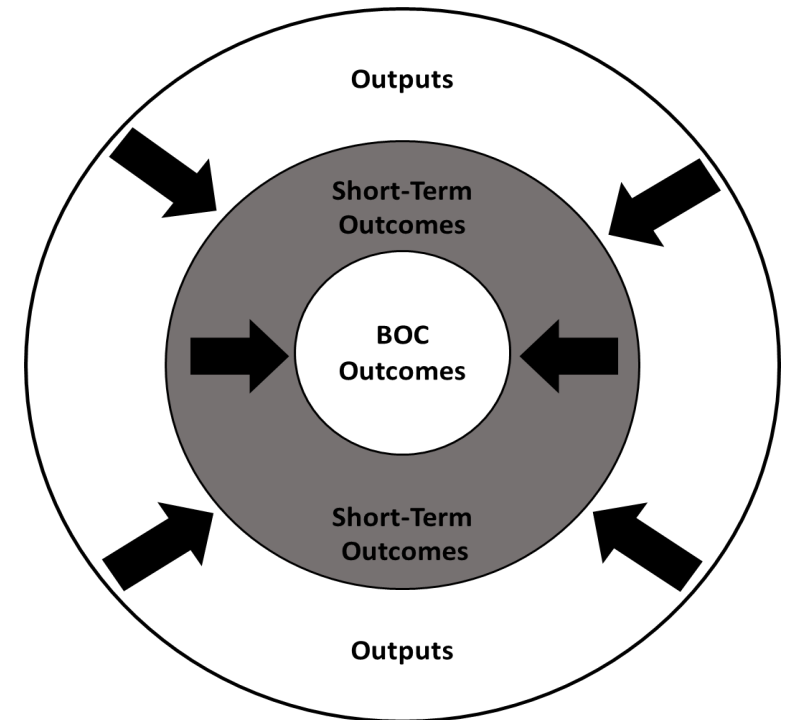


Performance Measures

Indicate up to three short-term outcomes for the proposed program/service that support the selected BOC outcome (see below), AND up to five outputs that support the previously indicated short-term outcomes.

Short-Term Outcome (%)
1)
2)
3)

Outputs (#)
1)
2)
3)
4)
5)





Proposed Program/Service Expenditures

Please complete the provided expenditures template or submit your own expenditures file (as long as it contains the same information, in the same format, as requested in the provided template) for your proposed use of county funds for this program/service. Please explain “Other” in your file.



Proposed Program/Service Expenditures

2021/2022 Chatham County Nonprofit Funding Allocation Proposal Budget	
Agency Name:	
Name of Program or Service:	
Total Cost of Program/Service:	
Expense Item	Amount Requested
Total	\$ -

← Will Auto Populate



Proposed Program/Service Expenditures

Please use this optional space to provide any additional notes or clarifications to the proposal program/service budget.*

What is the overall cost of the proposed program/service?

What percent of the proposed program/service will the county funding cover?

What is your plan for funding the balance of the program/service budget?

What is your funding timeline and what are your other sources of support?

How will this program/service be impacted if it is not fully funded at the requested amount?



Certification Attachments



1. Audit

An audit is required by Chatham County for agencies with annual revenue of \$500,000 and over. For agencies with annual revenue of less than \$500,000, a financial review by an independent CPA is required. For agencies with annual revenue of less than \$100,000, a financial analysis will be administered by Chatham County staff.



2. Management Letter (If Applicable)



3. Agency Budget

Please complete the provided template OR submit your own board-approved agency budget file. All agency budgets must meet the following criteria:

- Include agency revenue and expense budget categories
- Include agency revenue and expense over prior year, current year and next year
- Provide an explanation for any variance between the last two years of more than 10%.
- Your budget is required to balance, which means that total revenues and expense should equal each other. Please include any use of cash reserve funds in your budget, and an explanation for their use/contribution.
- Please explain “Other” in your budget.



3. Agency Budget

2021/2022 Chatham County Nonprofit Funding Allocation					
Agency Budget					
Agency Name:					
Fiscal Year End Date:					
AGENCY REVENUE	Prior Year	Current Year	Next Year	Percent Change	Explanation is Required if Percentage Increase is +/-
Private Donations	\$ -	\$ -	\$ -	0	
Agency Generated Revenue (fees)	\$ -	\$ -	\$ -	0	
Local Government Grants:					
Nonprofit Allocation - Chatham County	\$ -	\$ -	\$ -	0	
Other - Chatham County	\$ -	\$ -	\$ -	0	
Pittsboro	\$ -	\$ -	\$ -	0	
Siler City	\$ -	\$ -	\$ -	0	
Other Local Government	\$ -	\$ -	\$ -	0	
Other Grants					
United Way of Chatham County	\$ -	\$ -	\$ -	0	
State Government	\$ -	\$ -	\$ -	0	
Federal Government (CDBG/HOME/etc.)	\$ -	\$ -	\$ -	0	
Private Foundation Grants	\$ -	\$ -	\$ -	0	
Other	\$ -	\$ -	\$ -	0	
Cash Reserves	\$ -	\$ -	\$ -	0	
Other Revenue	\$ -	\$ -	\$ -	0	
Total Agency Revenue	\$ -	\$ -	\$ -	0	
AGENCY EXPENSES					
Salaries and Benefits	\$ -	\$ -	\$ -	0	
Rent & Utilities	\$ -	\$ -	\$ -	0	
Supplies & Equipment	\$ -	\$ -	\$ -	0	
Travel & Training	\$ -	\$ -	\$ -	0	
Other Expenses:	\$ -	\$ -	\$ -	0	
Contribution to Cash Reserves	\$ -	\$ -	\$ -	0	
Total Agency Expenses	\$ -	\$ -	\$ -	0	



4. NC Solicitation License or Letter of Exemption



5. IRS Form 990



6. Board Roster

Please include names, addresses, professional and/or community affiliations, year joined the board, and number of years on the current board. Include an explanation of board term policies, if needed.



7. Board Composition



Please describe how your board of directors and staff reflect the people and communities you serve. If the board currently do not reflect the people and communities you serve, please share the policies and procedures you have in place to promote equity, diversity and inclusion in your organization. We appreciate your honest reflections.



8. COI Disclosure/Non-Discrimination Form

DISCLOSURE OF POTENTIAL CONFLICTS OF INTEREST AND NON-DISCRIMINATION CLAUSE

CONFLICT OF INTEREST

Are any of the Board members or employees of the agency that will be administering this program, their business associates, or members of their immediate family:

YES

NO

- | | | |
|-------------------------------------|--------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | a) Employees of or immediate family members of employees of Chatham County? |
| <input type="checkbox"/> | <input type="checkbox"/> | b) Members of or immediate family members of the Chatham County Board of Commissioners? |
| <input type="checkbox"/> | <input type="checkbox"/> | c) Current beneficiaries of the program for which funds are being requested? |
| <input type="checkbox"/> | <input type="checkbox"/> | d) Paid providers of goods or services to the program or having other financial interest in the program? |

If you have answered YES to any questions, **please provide a full explanation below**, including the steps that will be taken by your agency to address any conflict of interest, potential conflicts of interest and the appearance of conflict of interest. The description must include the name(s) of the person(s) involved and a description of the relationship and any potential transaction:

Providers agree as a part of their consideration of the granting of funds by funding agencies to the parties hereto themselves, their agents, officials, employees and servants agree not to discriminate in any manner of the basis of race, color, religion, sex (including pregnancy), national origin, age, disability, genetic information, marital status, political affiliation, whistleblower activity, parental status and military service (past, present or future), and against retaliation for participation in EEO activity or opposition to discrimination, or other legally protected status with reference to any activities carried out by the grantee, no matter how remote. This provision is enforced by action for specific performance, injunctive relief, or other remedy as by law provided. This provision shall be binding on the grantees, the successors and assigns of the parties hereto with reference to the above subject manner.

To the best of my knowledge and belief all the above information is true and current. I acknowledge and understand that the existence of a potential conflict of interest does not necessarily make the program ineligible for funding, but the existence of an undisclosed conflict may result in the termination of any grant awarded.

Signature: _____
Executive Director

Date

Signature: _____
Board Chairperson

Date



8. Non-Discrimination/COI Disclosure Form

DISCLOSURE OF POTENTIAL CONFLICTS OF INTEREST AND NON-DISCRIMINATION CLAUSE

CONFLICT OF INTEREST

Are any of the Board members or employees of the agency that will be administering this program, their business associates, or members of their immediate family:

YES

NO

- a) Employees of or immediate family members of employees of Chatham County?
- b) Members of or immediate family members of the Chatham County Board of Commissioners?
- c) Current beneficiaries of the program for which funds are being requested?
- d) Paid providers of goods or services to the program or having other financial interest in the program?

If you have answered YES to any questions, **please provide a full explanation below**, including the steps that will be taken by your agency to address any conflict of interest, potential conflicts of interest and the appearance of conflict of interest. The description must include the name(s) of the person(s) involved and a description of the relationship and any potential transaction:

Providers agree as a part of their consideration of the granting of funds by funding agencies to the parties hereto themselves, their agents, officials, employees and servants agree not to discriminate in any manner of the basis of race, color, religion, sex (including pregnancy), national origin, age, disability, genetic information, marital status, political affiliation, whistleblower activity, parental status and military service (past, present or future), and against retaliation for participation in EEO activity or opposition to discrimination, or other legally protected status with reference to any activities carried out by the grantee, no matter how remote. This provision is enforced by action for specific performance, injunctive relief, or other remedy as by law provided. This provision shall be binding on the grantees, the successors and assigns of the parties hereto with reference to the above subject manner.

To the best of my knowledge and belief all the above information is true and current. I acknowledge and understand that the existence of a potential conflict of interest does not necessarily make the program ineligible for funding, but the existence of an undisclosed conflict may result in the termination of any grant awarded.

Signature: _____
Executive Director

_____ Date

Signature: _____
Board Chairperson

_____ Date



9. IRS 501(c)(3) Letter of Tax Exemption

* Only for first time applications or agency's whose status has changed since December 31, 2023



10. By Laws

*Only for first time applicants or agency's that changed their bylaws in the last year

Questions/Comments?

Type questions into the Chat Box.

Ask questions that will be relevant to all applicants.

Reserve questions that are specific to your organization for Office Hours.



Funding Priorities

Application Review

Evaluation Criteria

Timeline and Key Dates

Q & A

Application Evaluation Criteria

We will be sharing our evaluation criteria to **increase transparency** in this funding process.

Download on the Chatham County Website (Nonprofit Agencies Process and Policy tab)

Evaluation Criteria

FY 2024 Nonprofit Human Services Allocation Process Applications will be evaluated based on the following [evaluation criteria](#).



Available Here

Application Evaluation Criteria

Values

Effective

Efficient

Equitable

Application Evaluation Criteria

Values	Criteria Areas		
Effective	Program/Service Quality	Performance Measurements	Organizational Background and Capacity
Efficient			
Equitable			

Application Evaluation Criteria

Values	Criteria Areas		
Effective	Program/Service Quality	Performance Measurements	Organizational Background and Capacity
Efficient	Resource Efficiency	Partnerships and Collaboration	
Equitable			

Application Evaluation Criteria

Values	Criteria Areas		
Effective	Program/Service Quality	Performance Measurements	Organizational Background and Capacity
Efficient	Resource Efficiency	Partnerships and Collaboration	
Equitable	Demonstrated Community Need	Equity	

Application Evaluation Criteria

Values	Criteria Areas		
Effective	Program/Service Quality	Performance Measurements	Organizational Background and Capacity
Efficient	Resource Efficiency	Partnerships and Collaboration	
Equitable	Demonstrated Community Need	Equity	

Application Evaluation Criteria

Program/Service
Quality

Values	Criteria Areas	Associated Question(s)	Priority Block	Evaluative Scale		
				1 Point	2 Points	3 Points
Effective	Program Service/Quality	<p>Program Description</p> <p>Program Delivery</p> <p>Experience</p> <p>Personnel</p>	One	<p>Vague or incomplete description of program/service and its delivery; and/or</p> <p>Does not use or consider evidence-informed approaches; and/or</p> <p>Organization lacks experience in delivering similar program/services and/or does not have a plan for evaluation for new/innovative programs/services; and/or</p> <p>Staff delivering program/service are not qualified and experienced.</p>	<p>Provides somewhat clear and complete description of program/service and its delivery; and/or</p> <p>Considers but does not use evidence-informed approaches; and/or</p> <p>Organization has some experience in delivering similar program/service and/or has some plan for evaluation for new/innovative programs/services; and/or</p> <p>Some staff delivering program/service are qualified and experienced.</p>	<p>Clear and complete description of program/service and its delivery; and</p> <p>Uses evidenced-based or evidence-informed approaches; and</p> <p>Organization experienced in delivering similar program/service and/or has strong plan for evaluation for new/innovative programs/services; and</p> <p>Program/service staff are qualified and experienced.</p>
	Performance Measurements	<p>Performance Measurement</p> <p>Population Served</p>	Two	<p>Outputs and outcome are generally unclear, unachievable and irrelevant; and/or</p> <p>Provides an unclear explanation of how outputs and outcomes support BOC outcomes; and/or</p> <p>Provides an incomplete population served form.</p>	<p>Outputs and outcomes are generally clear, achievable and relevant; and/or</p> <p>Provides a clear explanation of how outputs and outcomes support BOC outcomes; and/or</p> <p>Provides a complete population served form.</p>	<p>All outputs and outcomes are clear, achievable and relevant; and</p> <p>Provides a clear and convincing explanation of how outputs and outcomes support BOC outcomes; and</p> <p>Provides a complete population served form that demonstrates that the program serves underrepresented populations.</p>
	Organizational Background and Capacity	<p>Mission Summary</p> <p>Agency Evaluation</p>	Three	<p>Organization does not have or has an unclear mission, vision and values; and/or</p> <p>Organization does not have any previous accomplishment with similar program; and/or</p>	<p>Organization has a mission, vision, and values; and/or</p> <p>Organization has some record of accomplishments with similar programs; and/or</p>	<p>Organization has a clear mission, vision, and values; and</p> <p>Organization has a strong record of accomplishments with similar programs; and/or</p>

Application Evaluation Criteria

Program/Service
Quality

Criteria Areas	Associated Question(s)	Priority Block	Evaluative Scale		
			1 Point	2 Points	3 Points
Program Service/Quality	<p>Program Description</p> <p>Program Delivery</p> <p>Experience</p> <p>Personnel</p>	One	<p>Vague or incomplete description of program/service and its delivery; and/or</p> <p>Does not use or consider evidence-informed approaches; and/or</p> <p>Organization lacks experience in delivering similar program/services and/or does not have a plan for evaluation for new/innovative programs/services; and/or</p> <p>Staff delivering program/service are not qualified and experienced.</p>	<p>Provides somewhat clear and complete description of program/service and its delivery; and/or</p> <p>Considers but does not use evidence-informed approaches; and/or</p> <p>Organization has some experience in delivering similar program/service and/or has some plan for evaluation for new/innovative programs/services; and/or</p> <p>Some staff delivering program/service are qualified and experienced.</p>	<p>Clear and complete description of program/service and its delivery; and</p> <p>Uses evidenced-based or evidence-informed approaches; and</p> <p>Organization experienced in delivering similar program/service and/or has strong plan for evaluation for new/innovative programs/services; and</p> <p>Program/service staff are qualified and experienced.</p>

Application Evaluation Criteria

Program/Service Quality

Criteria Areas	Associated Question(s)	Priority Block	Evaluative Scale		
			1 Point	2 Points	3 Points
Program Service/Quality	<p>Program Description</p> <p>Program Delivery</p> <p>Experience</p> <p>Personnel</p>	One	<p>Vague or incomplete description of program/service and its delivery; and/or</p> <p>Does not use or consider evidence-informed approaches; and/or</p> <p>Organization lacks experience in delivering similar program/services and/or does not have a plan for evaluation for new/innovative programs/services; and/or</p> <p>Staff delivering program/service are not qualified and experienced.</p>	<p>Provides somewhat clear and complete description of program/service and its delivery; and/or</p> <p>Considers but does not use evidence-informed approaches; and/or</p> <p>Organization has some experience in delivering similar program/service and/or has some plan for evaluation for new/innovative programs/services; and/or</p> <p>Some staff delivering program/service are qualified and experienced.</p>	<p>Clear and complete description of program/service and its delivery; and</p> <p>Uses evidenced-based or evidence-informed approaches; and</p> <p>Organization experienced in delivering similar program/service and/or has strong plan for evaluation for new/innovative programs/services; and</p> <p>Program/service staff are qualified and experienced.</p>

Application Evaluation Criteria

Program/Service
Quality

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			1 Point	2 Points	3 Points
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Application Evaluation Criteria

Program/Service
Quality

And/or = Can Earn Full Points Without
meeting ALL Criteria

Criteria Areas	Associated Question(s)	Priority Block	Evaluative Scale		
			1 Point	2 Points	3 Points
Program Service/Quality	<p>Program Description</p> <p>Program Delivery</p> <p>Experience</p> <p>Personnel</p>	One	<p>Vague or incomplete description of program/service and its delivery; and/or</p> <p>Does not use or consider evidence-informed approaches; and/or</p> <p>Organization lacks experience in delivering similar program/services and/or does not have a plan for evaluation for new/innovative programs/services; and/or</p> <p>Staff delivering program/service are not qualified and experienced.</p>	<p>Provides somewhat clear and complete description of program/service and its delivery; and/or</p> <p>Considers but does not use evidence-informed approaches; and/or</p> <p>Organization has some experience in delivering similar program/service and/or has some plan for evaluation for new/innovative programs/services; and/or</p> <p>Some staff delivering program/service are qualified and experienced.</p>	<p>Clear and complete description of program/service and its delivery; and</p> <p>Uses evidenced-based or evidence-informed approaches; and</p> <p>Organization experienced in delivering similar program/service and/or has strong plan for evaluation for new/innovative programs/services; and</p> <p>Program/service staff are qualified and experienced.</p>

Application Evaluation Criteria

Program/Service
Quality

And = Must meet ALL Criteria
to Earn Full Points

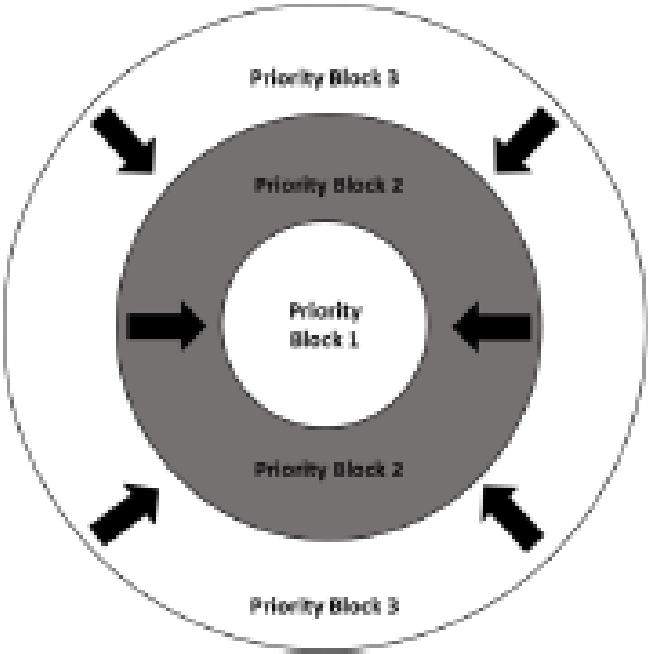
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Application Evaluation Criteria

Program/Service
Quality

Criteria Areas	Associated Question(s)	Priority Block	Evaluative Scale		
			1 Point	2 Points	3 Points
Program Service/Quality	<p>Program Description</p> <p>Program Delivery</p> <p>Experience</p> <p>Personnel</p>	One	<p>Vague or incomplete description of program/service and its delivery; and/or</p> <p>Does not use or consider evidence-informed approaches; and/or</p> <p>Organization lacks experience in delivering similar program/services and/or does not have a plan for evaluation for new/innovative programs/services; and/or</p> <p>Staff delivering program/service are not qualified and experienced.</p>	<p>Provides somewhat clear and complete description of program/service and its delivery; and/or</p> <p>Considers but does not use evidence-informed approaches; and/or</p> <p>Organization has some experience in delivering similar program/service and/or has some plan for evaluation for new/innovative programs/services; and/or</p> <p>Some staff delivering program/service are qualified and experienced.</p>	<p>Clear and complete description of program/service and its delivery; and</p> <p>Uses evidenced-based or evidence-informed approaches; and</p> <p>Organization experienced in delivering similar program/service and/or has strong plan for evaluation for new/innovative programs/services; and</p> <p>Program/service staff are qualified and experienced.</p>

Application Evaluation Criteria | Priority Blocks



Priority Block 1
Max 30 points

Demonstrated Community Need

Program/Service Quality

Priority Block 2
Max 18 points

Performance Measurements

Resource Efficiency

Priority Block 3
Max 18 points

Organizational Background and Capacity

Partnerships and Collaborations

Equity

Questions/Comments?

Type question into the Chat Box.

Ask questions that will be relevant to all applicants.

Reserve questions that are specific to your organization for Office Hours.



Funding Priorities

Application Review

Evaluation Criteria

Timeline and Key Dates

Q & A

Timeline and Key Dates

Thursday,
February 1st

Friday,
March 1st @
5PM

May/June
(During Budget
Process)

Friday,
July 12th

FY2025
Application
Opens &
Kick-Off
Webinar

FY2025
Application
Due

Evaluation Process

Funding
Allocations
Announced

FY2025
Funding
Agreement
s Due

Timeline and Key Dates

Mid-Year
Report

(Due January 15, 2025)

Year-End
Report

(Due July 15, 2025)

Timeline and Key Dates

FY2025 Applications are Due
on Foundant by

Friday, March 1st at 5PM



Funding Priorities

Application Review

Evaluation Criteria

Timeline and Key Dates

Q & A

Questions/Comments?

Type question into the Chat Box.

Ask questions that will be relevant to all applicants.

Reserve questions that are specific to your organization for Office Hours.

Thank you for your participation!

Comments/Questions? Contact Brenda Clegg and Erik Lindley,
(brenda.clegg@chathamcountync.gov) or 919-545-8328
(erik.Lindley@chathamcountync.gov) or 919-545-8408