**PROJECT NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APPLICANT’S NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ELIGIBILITY TO APPLY**

|  |  |
| --- | --- |
| **Eligibility Criteria** | **Response** |

|  |  |
| --- | --- |
| **Nonprofit status:** Employer Identification Number or other documentation for 501(c)3 organizations or tribal sovereign nations. |  |
| **Answer YES or NO to statements 1-5 below** | **Yes or No** |
| Does your organization have a non-discrimination policy? |  |
| 1. **Financial audit:** Has your organization completed its last three audits with *no substantive findings*? |  |
| 1. **Fiscal experience:** Has your organization had previous administrative and fiscal experience with grant funding? |  |
| **3.  Fast start:** Are you able to initiate grant funded activities within 30 days of receiving funds? |  |
| **4.  Evaluation:** Is your organization committed to participating in the project-wide ACT evaluation as requested by ACT project staff and/or the ACT project Evaluator? |  |
| **5. Completion of ACT 2.0 grant deliverables:** Did you complete your ACT 2.0 grant deliverables? |  |

**PROJECT NARRATIVE.** Please describe the following: (maximum word count in parentheses)

**A. Project Overview:** During the grant period for ACT 2.0, what were the objectives and successes achieved by the project in the selected Community Action Area? (250 words)

**B. Tools and Resources Sharing:** Provide some examples of the tools, resources, or expertise that your project is willing to share with the ACT 3.0 project? These examples could include recruitment plans, educational materials, outreach strategies, policy samples, presentations, community-led advocacy processes, policy adoption and/or implementation processes, or any other relevant materials or knowledge that may benefit the ACT 3.0 project(s). (250 words)

**C. What is your priority for how we match you with your collaboration partner?** Which of the following criteria are you most interested in being matched by? If you know of an ACT 3.0 that you would like to be matched with, please describe.Please select projects from the ACT 3.0 Projects List (attached). [Final project match will be decided by ACT Director.]

* Geographic area
* Community Action Area
* Tool or resource you used or developed that is relevant to an ACT 3.0 project

**D. Proposed Collaboration Plan:** Describe key factors that made your project successful. As a grantee, please describe effective community-led policy change, strategies for recruiting and retaining youth, coalition building, and ways to use data to inform policy campaigns. (250 words)

**E. Learning Community Engagement:** Can you confirm that your project will attend and co-facilitate at least two Learning Community sessions to share best practices with ACT 3.0 projects? Additionally, what ideas do you have on how best to share your learnings with ACT 3.0 projects during these sessions? (250 words)

**F. ACT Annual Conference:** Can you confirm that your project will identify at least one staff, two youth and one adult Design Team members to attend the ACT conference? Are you interested in presenting at the conference? What tools, materials, and insights could you share related to the conference themes listed below?     A $500 stipend will be provided for each presentation by ACT in addition to this grant.  (250 words)

Conference Themes:

1. Trauma-Informed Approaches
2. Community Engagement
3. Building Community Resilience for Longevity
4. Equitable Access to Resources & Policy and Systems Change
5. Youth Development

\*Please note conference presentation(s) is optional but highly encouraged.

**BUDGET FUNDING REQUEST**

The grant payments will be on a cost-reimbursement basis with monthly invoicing due 30 days after the end of the month. Complete attached Budget Funding Request that aligns with your proposed project. Provide a budget estimate that includes ACT-funded staff time for Learning Community sessions, collaborative meetings, and participation and presentation in ACT conference.  Please specify the number of adult and youth community members attending the ACT conference and include stipends for their participation in the project and attendance at the conference, as well as conference registration fees for all participants, and staff travel costs for attending the annual ACT conference. Administrative costs are eligible up to 15% of total personnel costs.  Operating expenses should be limited due to scope of work.

Please download budget template for your budget proposal linked here: [**Budget Template**](https://docs.google.com/spreadsheets/d/1YBhLSryxZJ9x6V_tTnxvyHmgPT7W_0HA/edit?usp=sharing&ouid=113178421057829297049&rtpof=true&sd=true)

**Please submit your application by 5:00 p.m.  July 26, 2024 at** [**Info@act-ca.org**](mailto:Info@act-ca.org)**.**

**Thank you again for your interest in partnering with All Children Thrive-California. If you have any questions, please feel free to contact Lourdes Perez at** [**LP@phadvocates.org**](mailto:LP@phadvocates.org)**.**