

# City of Westminster Human Services Board 2025 Funding Application

#### **Human Services Board Goal, Funding Criteria, and Review Process**

The Human Services Board (HSB) of the City of Westminster considers applications for funding requests that further the City's mission of improving the lives of Westminster residents. The Board makes recommendations for funding to Westminster City Council as a component of the City's budget review process and in accordance with the following City's Guiding Principles adopted by Council:

<u>Collaboration and Partnership</u>: Enhance and sustain our relationships with neighboring governments and community-based partners, leveraging our collective resources for maximum impact and benefit to Westminster.

<u>Stewardship and Fiscal Responsibility</u>: Responsibly manage all of the resources entrusted to our care to support the City's financial wellbeing and meet the needs of today without sacrificing the ability to meet the needs of the future.

<u>Transparency and Accountability</u>: Engage meaningfully, transparently, and responsibly with the community to provide for all people to be heard and included in decision making thereby building trust and confidence with the community.

<u>Diversity, Equity, and Inclusion</u>: Achieve equitable outcomes for the people of Westminster by providing opportunity for all voices to be heard and drawing upon community diversity in decision making.

Innovate and Initiate: Foster a culture of continuous improvement and approach opportunities and challenges with drive, inventive thinking, and resourcefulness, resulting in a resilient and sustainable future for our City.

<u>Prevention and Proactivity</u>: Solve problems at their source and focus the City's policies, practices and investments on prevention and community education and addressing root causes, leading to a better quality of life and greater prosperity for all in our community.

<u>Sustainability and Resiliency</u>: Act and operate in an environmentally responsible manner and lead by modeling best practices and incorporating sustainability in every aspect of our work.

The HSB will consider the following criteria when evaluating applicants:

- Number of Westminster residents served
- Ability to provide unduplicated services
- Mission alignment with Human Services Board (see above)
- Ability to leverage collaborations in the community
- Ability to create a positive impact in the broader community
- Timely and thorough completion of all aspects of the funding application including post- grant reporting

Grants awarded in previous years have ranged from \$1,000 - \$10,000. However, given guidance from Council and discussion within the Board, the HSB will consider potentially larger awards for applications that fund innovative programs - specifically those that have the potential to increase positive impacts to a greater number of Westminster residents.

## **Timeline for the Human Services Board 2025 Award Process:**

- May 10th, 2024 HSB applications posted on City website and emailed to community partners
- June 21st, 2024 HSB applications due
- Late June Mid-July 2024 HSB reviews applications
- August 15, 2024 HSB recommendations to Westminster City Council in the 2025
   Proposed Budget
- October 2024 City Council reviews HSB funding recommendations and adopts the 2025 Budget
- **November 2024** HSB staff emails notice of award to applicants
- January 31, 2025 2024 Funding Cycle Grant Report Form due to City\*
   \*Applicable if your organization received HSB funding in January 2024
- January 2025 HSB staff mails award checks to grant recipients

NOTE: All applications must be typed or completed on a computer. Submittals of completed applications will be accepted via <u>email only</u>.

#### **CHECKLIST**

The HSB application consists of the following components, which should be submitted in the order listed below. This checklist is provided to help ensure a complete proposal.

SUMMARY FORM Two-page form below
NARRATIVE Provide a response to each of the following questions  1. Organization Background  2. Goals  3. Current Programs  4. Program or Project Requests Only  5. Evaluation  6. Collaboration  7. Inclusiveness  8. Board/Governance  9. Volunteers  10. Planning  11. Supplemental  12. Optional
ATTACHMENTS If any of the required attachments are omitted, provide an explanation  Financial Attachments  1. Budgets 2. Current (year-to-date) financial statements 3. Year-end financial statements, audit and Sources of Income Table 4. Major contributors 5. In-kind contributions
Other Attachments  ☐ 6. Board of directors list ☐ 7. Proof of IRS federal tax-exempt status, dated within the last five years ☐ 8. Anti-discrimination statement ☐ 9. Names and qualifications of key staff ☐ 10. Annual report, if available ☐ 11. Evaluation results (optional)
Additional Attachments for Organizations Using a Fiscal Agent/Fiscal Sponsor  12. Memorandum of understanding  13. Financial attachments 1, 2, and 3 for the fiscal agent/fiscal sponsor  14. Proof of IRS federal tax-exempt status for the fiscal agent/fiscal sponsor  15. Board of directors list for the fiscal agent/fiscal sponsor

Applicants must fully complete all questions and include all requested attachments in order to be considered for funding. If you have any questions, please contact the HSB Staff Liaison Mikeal Parlow at 303.658.2459 or mparlow@westminsterco.gov

# **SUMMARY FORM**

Legal name of organization:								
<b>DBA</b> (if a	pplicable):							
Mailing	addross (and	physical addr	oss if it id	different and	l not confide	ntial):		
Ividilitig d	duress (and	physical addr		S unierent and	THOU CONTINUE	ential).		
Phone:			Fax:			EIN:		
Website:								
Organiza	tion email a	ddress:						
Name of	CEO or Exec	utive Director	:					
Phone:			Ema	ail:				
Applicati	on contact 8	<b>&amp; title</b> (if <i>not</i> tl	ne CEO d	or Executive D	irector):			
		·			·			
Phone:			Email:					
i ilolie.			Lillall					
Organiz	ation Info	mation						
Year Fou								
	Statement:							
Geographic Area Served (specific to this proposal):								

Tax Ex	emption Status:						
	501(c)(3)						
	Using a fiscal agent/fiscal sponsor						
	Name of fiscal agent/spo	onsor:					
	Other than 501(c)(3):						
Numbe	er of Employees: Full-tim	e:	Part-time:				
Grant	: Request Information	 1					
	nt of Request:						
Ailloui	it of Request.						
Descri	be what the grant will be	used for:					
	cial Information  Bud  Exaction's current budget	get numbers should m		presented in Atta	echment 1 (Budget).		
	_	7					
Incom	e:	Expenses:					
AND, i	f other than a general op	erating request,					
Progra	m or Project Budget:		Dates: from:	/ /	to:/ /		
Incom	e:	Expenses:					
By signii my knov	ng below, I certify that the infowledge.	ormation contained in t	this application is t	true and correct to	the best of		
CEU/EX	ecutive Director			Date			

#### **NARRATIVE**

Use 12-point font with 1-inch margins and include the **HEADING** provided for each question. It is not necessary to repeat the text of the questions.

- **1. ORGANIZATION BACKGROUND:** Discuss the founding and development of the organization. Explain the original issue and/or opportunity the organization was founded to address and how that may have changed over time.
- **2. GOALS:** Describe the organization's current goals.
- **3. CURRENT PROGRAMS:** Provide a brief description of the organization's current programs. Include population and numbers served, as well as expected results. *If this request is for a specific program, describe the organization's other programs here. Describe the program for which you are seeking funding in Question 4.*

#### 4. FUNDING REQUEST:

- a) Provide a summary of the plan for the program or project request.
- b) Explain why the organization is approaching the issue and/or opportunity in this way.

#### 5. EVALUATION:

- a) Describe the organization's overall approach to evaluation.
- c) Describe how the organization measures impact.
- **6. COLLABORATION:** Describe the organization's most significant interactions with other organizations and efforts.
- **7. INCLUSIVENESS:** Describe how the organization strives to be inclusive in its programs, staff, board and volunteers, and describe the progress to date.
- **8. BOARD/GOVERNANCE:** Describe the role of the board of directors in advancing the mission of the organization. Include the key issues related to board effectiveness that are being addressed this year, the organization's policy regarding board terms, and the percentage of the board that contributes financially to the organization.
- **9. VOLUNTEERS:** Describe how the organization involves volunteers and unpaid personnel (other than the board of directors) within a typical 12-month time period. Include number of volunteers and hours (if tracked by the organization).
- **10. PLANNING:** Describe the challenges and opportunities facing the organization in the next three to five years. Additionally, describe how the organization engages in planning and describe the focus of any current planning efforts.
- **11. SUPPLEMENTAL:** (required questions for consideration of funds)
  - 1. How many Westminster Residents are served by your program?
  - 2. How is this tracked, and do you have this tracked by county (Adams and Jefferson)?
  - 3. How many citizens served by county?
  - 4. What percentage of your funding is represented by HSB Funding?
  - 5. What is the significance of the funds if you were to receive a grant from the Human Services Board?
- **12. OPTIONAL.** If there is additional information that is vital to convey in this proposal, do so here.

#### **ATTACHMENTS**

Label each attachment and provide in the order listed below

#### **Financial Attachments**

Note: Provide explanations for items that may raise questions in any of the attached financial documents. The explanations can be written onto the documents themselves or included as an additional page.

- 1. BUDGETS: Include revenues and expenses.
  - a) The organization's operating budget for the current fiscal year. If available, also include the budget for the upcoming fiscal year.
  - b) If the request is for a program or project, also include: Program or project budget for the program period.
- 2. CURRENT (YEAR-TO-DATE) FINANCIAL STATEMENTS: Include a Statement of Financial Position (Balance Sheet) and Statement of Activities (Income and Expense Statement) through the most recently completed operating month available (must be within the past three months). Provide the Statement of Activities in a budget-to-actual format if the organization uses that format.
- **3. YEAR-END FINANCIAL STATEMENTS, AUDIT AND SOURCES OF INCOME:** Include the most recent fiscal year-end financial statements, audited if available. If the organization has an audit, but it is not available for the most recent fiscal year-end, also include the most recent audit.

Complete the table below for the organization as a whole, based on the most recently completed fiscal year. Categories may be modified to fit your organization's funding sources.

#### **Sources of Income Table**

Percentage	Funding Source		
%	Government grants (federal, state, county, local)		
%	% Government contracts		
%	% Foundations		
%	Business		
%	Events (include event sponsorships)		
%	Individual contributions		
%	Fees/earned income		
%	Workplace giving campaigns		
%	In-kind contributions (optional)		
%	Other		
%	TOTAL (must equal 100%.)		

- **4. MAJOR CONTRIBUTORS:** For the previous two fiscal years, list major contributors (foundations, businesses, government, individuals) with amounts. Do not include names of individual donors.
- **5. IN-KIND CONTRIBUTIONS:** Summary of significant in-kind donations (donated goods and professional services) received by the organization for the last fiscal year.

#### Other Attachments

- **6. BOARD OF DIRECTORS LIST:** Include the following information for each board member:
  - Position(s) on the board (officer and committee positions)
  - Occupation and name of employer and/or affiliation(s)
  - City or county of residence
  - Term end date for each board member
- **7. PROOF OF IRS FEDERAL TAX-EXEMPT STATUS:** Also called a Letter of Determination. This letter must be dated within the last five years.
- 8. ANTI-DISCRIMINATION STATEMENT
- **9. LIST OF NAMES AND QUALIFICATIONS OF KEY STAFF: I**nclude length of service with the organization. *Do not* include job descriptions or resumes.
- 10. ANNUAL REPORT: If available
- **11. EVALUATION RESULTS (optional):** Provide the organization's most recent evaluation results or findings, relevant to this request.

### Additional Attachments for Fiscal Agents/Fiscal Sponsors (If applicable)

- **1. THE MEMORANDUM OF UNDERSTANDING** or the contract between the organization and the fiscal agent/fiscal sponsor.
- **2. FINANCIAL ATTACHMENTS** 1, 2 and 3 for the fiscal agent/fiscal sponsor.
- **3. PROOF OF IRS FEDERAL TAX-EXEMPT STATUS** for the fiscal agent/fiscal sponsor, dated within the last five years.
- **4. BOARD OF DIRECTORS LIST** for the fiscal agent/fiscal sponsor.