



HOME INVESTMENT PARTNERSHIP (HOME) PROGRAM

**Request for Proposals
INFORMATION and APPLICATION PACKET FOR
DOWN PAYMENT ASSISTANCE FUNDING**

GENERAL INFORMATION:

The City of Beloit announces the availability of funds for Home Investment Partnership (HOME) Program projects. The funds are authorized under the Housing and Community Development Act of 1974, as amended, and are received from the U.S. Department of Housing and Urban Development (HUD). The City of Beloit administers these funds.

This application provides information and instructions for organizations and agencies interested in applying for the City’s HOME funds. Applications are available on the City of Beloit website under Government in the Document Center. It can be found inside the Community Development folder under HOME.

Eligible applicants:

- Private non-profit organizations that have received 501(c)(3) federal tax-exempt status from the U.S. Internal Revenue Service (IRS) and are registered as non-profit corporations in the State of Wisconsin.
- Public Agencies

Funding cycle:

- Funding under the 2023 program year is anticipated to be available beginning in September, 2023. However, prior year funds will be available earlier than that date. The contract start date will vary based on which year of funding is awarded.

Estimated Funds Available:

- The City has approximately \$195,000 available in HOME funds for down payment assistance to be provided to low to moderate-income families in 2023.

APPLICATION SCHEDULE: The following schedule has been developed for review of project applications and decisions on project funding.

Timetable

March 31, 2023	Requests for Proposals and HOME application forms are available.
April 14, 2023	HOME applications are due.
May 19, 2023	If awarded prior year funds, this is the anticipated date for a HOME contract
To be determined	If awarded 2023 funds, a contract will be awarded when funds are available.

PRE-APPLICATION ASSISTANCE: More information and technical assistance can be obtained from Julie Christensen, Community Development Director at 608-364-6703 or christensenj@beloitwi.gov. Staff will be happy to answer questions about the HOME program, this form and the application process, but cannot help write the application or offer comment on drafts.

APPLICATION DEADLINE:

A copy of the full application and requested attachments must be received in our office before 4:30 P.M. April 14, 2023. All proposals must be complete, signed and submitted in reproducible form. Proposals

may be e-mailed to christensenj@beloitwi.gov, mailed to the attention of Julie Christensen at 100 State Street, Beloit, WI 53511, or dropped off in one of the City Hall drop boxes.

OVERVIEW OF HOME PROGRAM REQUIREMENTS:

Down payment assistance funded by the HOME program must provide affordable housing for low to extremely low- income persons. Please see table below which outlines the income requirements for the City of Beloit.

FY2022 HUD INCOME LIMITS (Section 8) for Janesville, Beloit MSA (subject to change)

Persons in household	1	2	3	4	5	6	7	8
Low (80% of median)	\$45,650	\$52,200	\$58,700	\$65,200	\$70,450	\$75,650	\$80,850	\$86,100
Very Low Income (50% of median)	\$28,550	\$32,600	\$36,700	\$40,750	\$44,050	\$47,300	\$50,550	\$53,800
Extremely Low Income	\$17,150	\$19,600	\$23,030	\$27,750	\$32,470	\$37,190	\$41,910	\$46,630

Note: Recipients of housing must meet income guidelines—80% of Rock County Median Income for owner-occupants. Housing must meet affordability guidelines for a specified period of time depending on amount of assistance.

HOME Affordability Period	
\$0 - \$14,999	5 Years
\$15,000 - \$40,000	10 Years
Over \$40,000	15 Years
New Construction	20 Years

OTHER REQUIREMENTS INCLUDE BUT ARE NOT LIMITED TO:

Non-Discrimination and Equal Opportunity: Agencies receiving funding are required to comply with various federal, state and local laws that provide equal opportunity and prohibit discrimination against persons on the basis of race, color, national origin, religion, sex, age or disability. Discrimination is prohibited in the provision of services, in access to the services and to the facilities where the services are provided, and in all other aspects of administering HOME projects such as employment and procurement.

Fiscal Management: Agencies receiving funding are required to comply with federal uniform administrative requirements regarding fiscal management including financial reporting, record keeping, accounting systems, payment procedures, procurement of goods and services, conflict of interest, and audit requirements. Non-profit organizations must administer programs in compliance with 24 CFR Part 84 and 2 CFR Part 200 Subpart F, 2 CFR Part 230. Public agencies must administer programs in compliance with 24 CFR Part 85 and 2 CFR Part 225

Insurance Requirements: Agencies receiving funding are required to provide proof of general liability insurance coverage. If services provided under the contract are provided by a licensed professional, then professional liability insurance will also be required. In addition, if driving is within the scope of services provided under the contract, then automobile insurance will also be required. Worker’s Compensation Insurance is also required.

Reporting Requirements: Agencies receiving funding are required to submit quarterly and annual progress reports and budget reports. Required data to be reported includes: demographic data on clients served (income level, race, ethnicity, disability, household composition), outputs (units of service provided), progress towards meeting outcomes, amount of funding leveraged from other federal, state/local, private or other funding sources, and additional information indicating compliance with other grant and contract requirements.

SAM.gov/CAGE Code: SAM.gov (System for Award Management) Registration is required prior to awarding HOME funds. A CAGE (Commercial and Government Entity) Code is also required.

Other Federal Requirements: Funding recipients must comply with all other requirements set forth in 24 CFR 570 and in grant contracts. Federal regulations are available online at <http://www.access.gpo.gov/nara/index.html> and OMB circulars are available online at <http://www.whitehouse.gov/omb/circulars/index.html>.

REVIEW AND DECISION-MAKING PROCESS:

- Step 1 Staff Review and Assessment.** City of Beloit Community Development staff will perform a technical review of the applications for compliance with HUD requirements and the threshold criteria.
- Step 2 CDA Presentation and Recommendation.** All applicants will present their application to the Beloit Community Development Authority on April 26, 2023 sometime after 4:30 PM. CDA will then make a recommendation at that same meeting.
- Step 3 Final decision by Beloit City Council.** The Beloit City Council will make the final decision on funding on May 15, 2023.

NOTE: Disposition of final project awards is contingent on project eligibility and funding availability, as well as federal, state and local statutes, regulations, policies and contract requirements.

City of Beloit
HOME INVESTMENT PARTNERSHIP PROGRAM (HOME)
THRESHOLD REVIEW AND EVALUATION CRITERIA

Incomplete or late applications will not be considered. Applications must meet HOME regulations to be considered for funding.

EVALUATION CRITERIA

Applications will be evaluated based on the answers to the following questions based on a scoring matrix. (see attached matrix).

APPLICATION INSTRUCTIONS

- Please read all questions and instructions carefully. The care that goes into accurately and informatively completing this application is evidence of your agency's ability to manage the complexities of the HOME program requirements.
- An electronic copy of the application is available upon request.
- Submit a copy of the full application by 4:30 p.m. on April 14, 2023. The application must be received in our office by that date and time to be considered. Late applications will not be accepted.
- Any attachments should be attached at the back of the original application in the order listed.
- Additional printed documentation, photographs and maps may be placed immediately behind the page they refer to.
- Include a UEI (Unique Entity ID) Number on your application.

CITY OF БЕЛОIT

Application for HOME Project for Fiscal Year 2023

1. APPLICATION COVER SHEET

Project Title: _____

Project Applicant Contact Information

Legal Name of Applicant/Organization: _____

Applicant is: Unit of Local Government Municipal Corporation

Religious Organization Educational Institution Economic Development Corporation

Private, Non-Profit Organization EIN# _____

Other (explain) _____

UEI # _____

Primary Contact Name: _____

Title: _____

Mailing Address: _____

Phone: _____

E-mail: _____

Has your agency previously received HOME funding? Yes/No

Amount of Request _____

CERTIFICATION and AUTHORIZED SIGNATURE: To the best of my knowledge and belief, the information contained in this application, and in the additional required documentation submitted with this application, is true and correct. The submission of this application has been duly authorized by the governing body of the Applicant. The Applicant agrees that if the project is allocated funding, it will comply with all federal, state and local statutes, regulations, policies and requirements applicable to CDBG/HOME funding.

Signature of Authorized Applicant Representative

Date

Name and Title of Authorized Applicant Representative (Please Print or Type)

2023 HOME APPLICATION

Answer each question fully but concisely.

A. THRESHOLD AND ELIGIBILITY

1. Please describe what process is used to select your program participants.
2. How long has your organization provided this type of service?

B. PROJECT DESCRIPTION & SOUNDNESS

1. **Project Description:** Please describe the project for which you are requesting funding.
2. **What are the specific output goals for the proposed project?**
Households Served. Indicate the number of unduplicated households and persons to be assisted in total and the number to be assisted with HOME funds requested. Unduplicated means that each household and person served by the project is counted only once during the program year.

	PY2023
Project Outputs	Households
1. Total assisted with HOME funds	

3. **HUD requires recipients of federal funding to access outcomes for the program. All approved applicants are required to comply with the Performance Measurement System. Please complete the following:**
 - A. State the outcome. Outcomes are the benefits or impacts that result from the services provided. Outcomes measure a change in knowledge, attitude, skills, behavior, conditions or status in the persons served.
 - B. Indicate the anticipated percentage and number out of total families/households served who will achieve the outcome each year.
 - C. List the indicators that will be used to show that the persons served achieved the outcome.
 - D. State the basis for selecting the outcome and how it demonstrates achievement of the overall goals of the project.
 - E. Indicate how you are going to measure the outcome include the data collection tools, the measurement timeline, and who will be responsible for monitoring progress and compiling the information required for reporting.
4. **What experience do you have in serving the target population and in providing the type of service in the proposed project?**

Describe past experience and performance achieved by this project or similar project; include any barriers encountered and how those barriers were addressed, as well as whether project goals were achieved.

C. ORGANIZATIONAL CAPACITY

1. What is your organization's experience in managing publicly funded projects?

- A. Describe any specific experience your organization has in the administration of federal, state, and local government funds. If your organization does not have experience as an organization, then the relevant experience of board members or staff may be used.
- B. Describe your organization's fiscal management including financial reporting, record keeping and accounting systems.
- C. Describe whether your organization has a written personnel policy manual that includes procedures for personnel and financial management, a process for grievance, and a plan for affirmative action.
- D. If you have current HOME projects/contracts, are they progressing timely and in accordance with the project accomplishments and schedule? If not, explain why.

2. List funders and describe type and frequency of monitoring, as well as any findings, and the resolution of those findings.

3. What are the qualifications of the staff members involved in the project?

Describe the qualifications (e.g., education, training, experience) of the specific staff members who will manage the project and provide services.

4. How will your organization assure that project services are provided in a culturally competent and linguistically accessible manner?

Explain your agency's commitment to and ability to provide services that are culturally competent and linguistically accessible. Include a description of:

- A. How the project's service design and delivery provide for the cultural and linguistic needs of project clients;
- B. The cultural backgrounds and experiences of board members and staff; and
- C. The training and policy guidance provided to board members and staff regarding cultural competence and language barriers.

5. How does your organization use collaboration with other local community organizations to support the proposed project?

- A. List the committees, groups, or meetings your organization participates in. For recurring meetings, the expectation is that you list organizations where your agency is present at 75% or more of meetings.
- B. Describe how the collaborations listed help to develop support for the proposed project (such as enhanced access to services needed by project clients, a shared scarce resource, or improved public policy).

D. FINANCIAL FEASIBILITY

1. **Provide a copy of the latest Budget Summary for your organization.**
 - A. Detail by line item the applicant's proposed project budget separating requested HOME funding from additional agency funding dedicated to the project.
 - B. Explain in narrative form how HOME funds will be used as shown in the budget summary and budget worksheets (e.g. specific positions, type of communication costs, type of supplies, description of equipment items in support of direct services). If your program generates program fees or program income, explain how these dollars are generated (ex. late fees, counseling fees, etc.). For each position for which you are requesting full or partial HOME funding, attach a current job description that includes a list of the duties and minimum qualifications for filling the position.

2. **If funded, will the proposed project leverage additional resources?**

List the source and amount of funds to be leveraged with HOME funding for this project on the Budget Summary for each year of funding requested. Identify which of those funds have been secured, applied for, or are anticipated to be applied for in the future. Match is required for HOME funds. Therefore, please indicate the source and amount for any eligible match that you will contribute to the project. Priority will be given to projects which require match.

3. **If the proposed project is funded at a level lower than requested, at what amount of funding can the sponsoring agency still deliver meaningful service?**

Due to the limited availability of resources it is often necessary to fund proposed projects at levels below the levels requested. Please describe a reduced level of funding at which effective service can be delivered and what reductions in your budget can be made.

4. **Financial Planning for Project Sustainability.**

Describe efforts by the agency to develop:

 - A. alternative future sources of funding to support the proposed project, and
 - B. a financial contingency plan in preparation for possible funding reductions.

5. **Financial Management Capability:**

Provide a narrative of your agency's financial management capacity and include financial audits; describe type, frequency, findings, and resolution to findings.

E. CONFLICT OF INTEREST

1. Please indicate if any of your agency's staff and/or board/committee members has served on the Beloit Community Development Authority and/or Beloit City Council. Please also indicate if any of your agency's staff and/or board/committee members has served in the last year on the Beloit Community Development Authority and/or Beloit City Council.

If yes, please list their information below.

Name	Title or Position

City of Beloit
HOME INVESTMENT PARTNERSHIP PROGRAM (HOME)
THRESHOLD REVIEW AND EVALUATION CRITERIA

Incomplete or late applications will not be considered. Applications must meet threshold criteria to be considered for funding.

THRESHOLD CRITERIA		
Criteria:	Yes	No
A. Application package is complete and was submitted on time.	<input type="checkbox"/>	<input type="checkbox"/>
B. Is eligible under the HOME Investment Partnership Program.	<input type="checkbox"/>	<input type="checkbox"/>
C. Consistent with Consolidated Plan	<input type="checkbox"/>	<input type="checkbox"/>
Application Meets Threshold Criteria: If yes, proceed to review below.	<input type="checkbox"/>	<input type="checkbox"/>

EVALUATION CRITERIA

Applications for HOME projects can receive a maximum of 95 points using the following criteria. Details of the criteria expectations can be found throughout the application materials.

COMMUNITY NEED AND BENEFIT

1. Scope of Needs and Gaps

Evaluate the identified community need in the context of the priorities for the proposed services. How comprehensive is the description of the related need for the services proposed? Are current local statistics, agency statistics or other evidence provided to document and support the need?

0 = No mention of community needs or mentioned that there was a need but provided no evidence of need.

1 = Provided some information that partially documented community need but no referenced statistics.

3 = Provided some referenced statistics and a description of community need, including the needs of low-to-moderate income persons, but lacked essential components or the statistics presented did not fully support the need described.

5 = Provided a clear and detailed description of community need, especially the needs of low-to-moderate income persons, supported by detailed and referenced current statistics.

2. Service Location and Target Population

Evaluate how well services are located as compared to need in community. Is the target population and their unique service needs clearly identified? If there is to be an expansion of services, are details provided?

0 = No mention as to where the services will be delivered, or whether this is an expansion of services AND no information on the target population and their unique service needs identified

1 = Information is unclear where the services will delivered, and whether this is an expansion of services AND indicated that people need their services but did not specify who or what.

3 = Broad description of the location where the services will be delivered, and whether this is an expansion of services AND general description of target population and service needed.

5 = Provided clear and detailed information about location and expansion AND detailed description of target population, including their unique needs and specific service needs.

Community Need and Benefit Points (Max = 10) _____

PROJECT DESCRIPTION and SOUNDNESS

1. Project Design

Provides clear detailed information to support that project design is (a) evidence-based or (b) introduces an innovation that substantially improves the services provided.

- Project Design -	
(a) Evidence-Based	or (b) Innovative
0 = No mention of evidence-based practices or did not specify which evidence-based practice is being used	0 = No evidence that proposed project is innovative or mentioned that project is “innovative” but did not specify how
1 = General, vague description of evidence-based practice with no link to proposed project	1 = Provided general, vague description of proposed project innovation
3 = Good description of evidence-based practice to be used but poor link to proposed project	3 = Good description of innovation but reviewer had to infer that it addresses needs in an improved way OR a population that has yet to be served OR a new aspect of population needs
5 = Clearly tied proposed project to a well described evidence-based practice	5 = Provided detailed description of an innovation and clearly specified how it addresses needs in an improved way OR a population that has yet to be served OR an aspect of population needs that have yet to be addressed

2. Project Activities

Were the services or activities the proposed project will provide clearly defined and described (i.e. how they will be implemented, who will implement them, the frequency and duration of services).

- 0 = No mention of activities to be provided or mentioned “activities” without specifying what they are.
- 1 = Listed activities to be provided without providing descriptions of them.
- 3 = Listed activities with vague descriptions and/or no reference to implementation or project goals.
- 5 = Detailed description of activities, how they would be implemented AND by whom, with clear linkage to project goals.

3. Proposed Service(s) and Link to Need

Evaluate how well the overall goal of the project and the proposed services will fit the purpose of this funding. How do the services help meet client and community needs?

- 0 = No information of service(s) proposed and how they meet needs.
- 1 = Information on service(s) proposed, but no clear link to how they meet needs.
- 3 = Information partially described the services proposed, but only provided limited explanation of how the services helped meet needs.
- 5 = Information provided a clear, detailed description of services proposed AND how they helped meet the identified needs and the outcomes above AND filled gaps in services.

3. Outreach and Access

Evaluate the outreach activities and how effective the project will be in reaching the target population. How are any barriers described, and how will they be addressed? How does the applicant identify if and how they will prioritize who receives services? How are any exclusion criteria described and why are they selected?

0 = No information on how target population is recruited, or how they will access services ,or how their barriers are addressed, or how clients will be prioritized to receive services ,or any exclusion criteria and why they are selected.

1 = Information provided on any or all of the above, but did not specify how or who or what.

3 = General, vague information on how target population is recruited, AND how they will access services, AND their barriers, AND how clients will be prioritized to receive services, AND any exclusion criteria AND why these criteria are selected.

5 = Project provided a detailed description of how target population is recruited, AND how they will access services, AND how their barriers would be addressed, AND how clients will be prioritized to receive services, AND any exclusion criteria AND why these criteria are selected.

4. Complementary Services/Programs and Collaborations

Evaluate the complementary services or resources offered to project clients. Do these services help meet needs and promote increased self-sufficiency? Is there evidence of inter- and intra-agency collaboration? Are there details of any formal agreements and history of partnerships in the community and linkages to mainstream resources?

0 = No information on complementary services/programs or collaboration/coordination.

1 = Information on some complementary services/programs and collaboration/ coordination, but did not provide detail.

3 = Partial information provided on complementary services/programs, collaboration/coordination, and gave some detail on how these services help meet needs and promote increased self-sufficiency.

5 = Provided a clear detailed description of complementary services/programs and how they help meet needs and promote increased self-sufficiency, AND described intra-agency collaboration/coordination, AND included details on formal agreements and a history of partnerships in the community and linkages to mainstream resources.

5. Project Outputs and Outcomes

Evaluate the outputs and outcome projections; are they reasonable for the target population, especially for those projects targeting high needs populations? Is there a strong link between the outcomes, the project goals, and the services provided?

0 = No mention of project outcomes

1 = Project outcomes are not measurable client benefits or impacts (i.e. a change in knowledge, attitude, skills, behavior, conditions or status in the persons served)

3 = Project outcomes are measurable client benefits or impacts but are not well connected to project goals and services or are not reasonably or accurately quantified

5 = Project outcomes are measurable and appropriately quantified client benefits or impacts well connected to project goals and services

6. Outcome Measurement and Evaluation

Evaluate the effectiveness of how proposed project outcomes and performance will be measured, including the program/agency review process and use of relevant methods and tools. Are the methods and tools to be used to evaluate progress clearly described?

0 = No indicators provided about evaluation or measurement, including timelines and process

1 = Indicators listed are not clearly related to outcome, OR number of indicators to be met are not specified, OR specific measurement tools and timelines are not provided for every indicator

3 = Indicators listed are clearly related to outcome but measurement tools and timelines not provided OR are not adequately described

5 = Listed indicators are clearly related to outcome, AND indicators listed are an adequate measure of the identified outcome, AND how outcome will be measured is clearly defined, AND an appropriate measurement timeline is identified for each indicator.

7. Past Performance and Benchmark Criteria

Evaluate any relevant performance benchmarks. Is there a plan for dealing with any perceived barriers to meeting or exceeding these? If the project is unable to meet a benchmark, is there a plan for what the project can offer in the first year, and how it can move closer to meeting or exceeding the target in the second year? Are the methods and tools to be used to evaluate progress clearly described?

0 = No information of plan to meet or exceed project benchmarks, barriers, performance goals or evaluation

1 = Indicated some plan to meet or exceed stated benchmarks, but does not offer details on barriers, performance goals or progress evaluation

3 = Partially demonstrated a plan to meet or exceed stated benchmarks; provided some evidence but evidence was not complete

5 = Provided clear and complete evidence of meeting and exceeding project benchmarks, overcoming barriers (if applicable) AND provided clear description of methods and tools used to evaluate progress

Project Soundness Points (Max = 40) _____
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ORGANIZATIONAL CAPACITY

1. History of Publicly Funded Project Management

Evaluate how well the agency demonstrates the ability to successfully implement and manage publically funded (federal, state, and local) projects in a timely manner, consistent with funding requirements AND the agency's experience working with similar programs (housing programs, emergency shelters, outreach, etc.) or programs with similar activities (case management, assessments, etc.).

0 = No mention of previous publicly funded project management experience or similar program experience.

1 = Mentioned that agency has managed publicly funded and similar projects in the past but no evidence or further details were provided.

3 = Partial or vague description of implementation and management of publicly funded projects and similar projects but evidence was not complete.

5 = Provided clear and complete description of publicly funded projects AND similar projects implemented AND that they were managed with all relevant details included (e.g., timelines, funding requirements, deliverables, etc.).

2. Program Monitoring Record

Evaluate the agency's program monitoring record and whether any findings were resolved prior to submission of the application. Does the application describe a history of complete and timely performance reporting?

0 = No information about program monitoring frequency or findings was provided.

1 = Indicated that program monitoring has occurred but did not specify regularity and did not provide detail or if there were any prior findings.

3 = Indicated that program monitoring and reporting has met funder expectations, but did not indicate whether the agency has received any specific findings, or how those findings may have been resolved.

5 = Demonstrated that program monitoring and reporting has met funder expectations; provided detail on whether the agency has received any findings, and described how those findings have been resolved.

3. Staffing Capacity

Project demonstrates that they have the staff experience and proper level of staffing to carry out the project.

0 = No mention of staff qualifications or experience or of current level of staffing.

1 = Vague mention that they have adequate staffing but no evidence of such.

3 = Partially demonstrated that the staff has adequate experience and qualifications and that the proper level of staffing is available; provided some evidence but evidence was not complete.

5 = Clear detailed description of staffing level and organizational structure was provided; qualifications and experience of staff to be involved with the project were clearly presented.

4. Cultural Competency

Evaluate how well the agency demonstrates their ability to implement programs that are culturally competent and linguistically accessible for the target population AND the agency's cultural competency (staff and board members).

0 = No information was provided about culturally competent service delivery or agency capacity to provide such service.

1 = Indicated that service delivery and the agency were culturally competent but did not specify or describe how.

3 = Provided a partial description of how the agency delivers culturally competent services and the staff and board members' ability to be culturally competent.

5 = Provided a clear detailed description of how the agency addresses cultural needs of clients, AND described the cultural backgrounds and experiences of staff and board members, AND described ongoing efforts by the agency to ensure that services are delivered in a culturally sensitive manner.

5. Agency Community Participation

Evaluate the degree of agency participation within the local community, including its collaborative efforts with other agencies and committees. If project serves homeless populations, does the agency participate in the Homeless Intervention Task Force or other related activities?

0 = Provided no information about collaboration with other agencies or participation in consortiums or committees.

1 = Indicated they were involved with collaborative efforts but did not list those efforts; indicated that agency participates in consortiums or committees but did not specify which ones; if project serves homeless populations, the application does not indicate participation in CoC.

3 = Listed collaborative efforts and committees in which the agency participates but did not explain how those collaborations support the proposed project; if project serves homeless populations, the application indicated no or irregular participation in CoC and related planning efforts (i.e. PIT Count, Project Homeless Connect, Housing Inventory Chart).

5 = Listed collaborative efforts and committees in which the agency participates and described how those collaborations help to support the proposed project; if project serves homeless populations, the application indicated active participation in CoC and related planning efforts (i.e. PIT Count, Project Homeless Connect, Housing Inventory Chart).

Organizational Capacity Points (Max = 25) _____
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FINANCIAL FEASIBILITY

1. Budget

Project budget estimates and costs are reasonable and well supported or justified relative to the number of persons to be served, the services to be provided, and the target population.

0 = No support or justification for project budget estimates.

1 = Budget estimates and costs are not reasonable and justified or budget forms are inconsistent or inaccurate.

5 = Proposed budget estimates and costs appear reasonable; some justification and support for budget estimates were provided; budget forms are accurate.

2. Additional Resources

Project leverages other federal, state, local or private resources.

0 = Did not mention additional funding or resources that had been leveraged.

1 = Vague mention that other funding or resources had been leveraged but no clear evidence that monies or resources were secured.

3 = Partial evidence showing that additional funding or resources were secured.

5 = Evidence clearly shows that additional funding or resources were secured.

3. Sustainability

The agency provided evidence of possible future sources of funding for sustainability.

0 = No mention of sustainability or of future alternative funding possibilities.

1 = Vague mention that future alternative funding would be needed but no clear mention of possible sources.

3 = Mentioned possible sources for future alternative funding but no timeline or plan was provided for requesting funding OR future funding sources provided are not realistic or appropriate.

5 = Clearly identified appropriate future alternative funding sources AND a plan with timelines for requesting future funding.

4. Financial Management Capability

Project sponsor has appropriate financial management capacity as indicated by audited financial statements and management of prior projects. Any audit findings of the organization have been resolved prior to submission of application.

0 = No mention of financial management capacity; agency budget and financial statements not provided.

1 = Mentioned that financial management capacity exists but no evidence provided.

3 = Partially demonstrated that financial management capacity exists; some evidence provided but evidence was not complete.

5 = Provided clear and complete evidence of financial management capacity; all necessary audited financial statements provided.

Financial Feasibility Points (Max = 20) _____
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