



# American Rescue Plan Act (ARPA):

## 2024 Equity Grant Fund Question Worksheet

This document is provided as a guide and reference for what questions are asked on the grant application. It is recommended to write your answers in a Word document first so you can easily copy and paste them into the online application. When completing your application, please also refer to the attached application guide.

If you have questions about the application or qualifications to apply, please contact Claudia Menendez [cmenendez@fcgov.com](mailto:cmenendez@fcgov.com).

### Organization Information

1. Name of Organization
2. Organization Mailing Address
3. Application Contact Person:
4. Email
5. Phone Number
6. Grant Manager Name and email:
7. **Type of Organization**

Select the following organization type that best fits the organization for which you are requesting funding. Documentation of your organization type will be required if funding is awarded.

- ☐ Nonprofit, IRS-designated 501(c)(3) agencies in good standing
- ☐ Cooperative groups of organizations with an IRS-designated 501(c)(3) agency serving as its fiscal host
- ☐ Libraries, museums, educational centers that offer services for K-12 students
- ☐ Limited Liability Companies (LLC) with a social justice mission
- ☐ Individuals with social justice advancing ideas and mission
- ☐ Other (Write In)

### Program Information

8. Provide a brief description of your organization. Be sure to include the following in your response:

- What is your mission and objectives?
- What types of programming or services do you provide?
- How many employees do you have and what are their primary roles?
- Which communities do you serve?

9. Select the focus areas you wish to use funding for (select all that apply):

- ☐ Technical Training and Assistance
- ☐ Revenue Loss, funding replacement
- ☐ Workforce Training
- ☐ Employee Salaries

☐ Other: Write In

10. Describe how the program advances equity, inclusion, and belonging.
11. How was your organization impacted by COVID-19 pandemic? How will this grant help reduce the impacts of the pandemic for your organization? (i.e., revenue loss, technical assistance, workforce training, employee salaries)? Please be as specific as possible.
12. Please name and describe any other groups or non-profits you will be collaborating with to implement this program:
13. Describe two measurable outcomes that you will use to determine the success of the program. These should be achievable by December 31, 2024.  
**Examples of outcomes include:** salaries paid, training for staff, equipment enhancement, facilitate 5 workshops on youth and older adults' mental health resiliency; document number of attendees at events; complete pre and post assessments; document testimonials and impacts.
14. Is there any additional information about the proposed program that would be helpful for the review panel to know?

#### Funding Information

15. If awarded, can the funding be fully spent by December 31, 2024?
  - ☐ Yes
  - ☐ No
16. Will the requested funding be used for:
  - ☐ Previously incurred expenses (January-December 2023)
  - ☐ Upcoming expenses (January-December 2024)
  - ☐ Combination of both prior and upcoming expenses
17. Briefly summarize the expense(s) to be paid with the requested funding. For each category include a description and the total anticipated expense up to \$25,000 total.
  - Please upload a budget document or use the categories below to describe your budget needs. Please review the attached Application Guide closely to ensure the project costs are eligible.

Examples:

  - 1) Staffing - direct service salaries and benefits - **total \$**
  - 2) Direct Client Assistance (gift cards, financial assistance) **total \$**
  - 3) Materials or supplies - **total \$**
  - 4) Equipment costs (computers, printers, other media tools) – **total \$**
  - 5) Rent or venue rental- **total \$**
  - 6) Marketing, promotion, social media, website costs- **total \$**
  - 7) Language Justice costs (interpretation, translation) - **total \$**
  - 8) Transportation costs (vehicle rental or mileage reimbursement)- **total \$**
  - 9) Training and development costs (conference registration and travel, or mileage reimbursement)- **total \$**
  - 10) Staff training, technical assistance or workforce development costs- **total \$**

18. Since January 2023, has your organization received other financial assistance (local, state, federal, community) to cover the expenses for this program? If yes, please describe.
19. Do you currently have other proposals out for review to cover expenses for this program? If yes, please describe.

#### Additional Information

20. Please acknowledge that your organization understands the funding guidelines for this assistance provided by the City of Fort Collins. To indicate acknowledgement, please check each box.
- ☐ Recipient will use the assistance provided to mitigate the impacts of the COVID-19 pandemic.
  - ☐ Recipient understands the assistance has restricted use as outlined in the ARPA terms and conditions.
  - ☐ Recipient will need to specifically document use of the financial assistance as related to the ARPA regulations and City Grant Agreement.
  - ☐ Recipient understands that regular quarterly reporting will be required to be submitted detailing the results of the project or program.
  - ☐ Recipient understands and agrees to the guidelines as outlined by the ARPA regulations and supporting documentation provided by the City of Fort Collins.
  - ☐ Recipient understands that they may be subject to a federal Single Audit.
10. Please review and indicate that your organization has the capacity to administer federal funds. Check all that your organization is prepared to accomplish:
- ☐ Read, understand, and comply with ALL requirements outlined in the grant agreement.
  - ☐ Submit accurate financial documentation as requested.
  - ☐ Track and submit relevant data and outcome metrics on a quarterly basis.
  - ☐ Maintain clear and organized records of all eligible expenses, including timekeeping and payroll records for program staff and receipts for grant-related expenditures.
  - ☐ Ensure all program beneficiaries are an eligible population and provide required documentation based on focus area requirements listed in the grant guide.
  - ☐ Record demographic information for all program beneficiaries.
  - ☐ Participate in any necessary program audits for compliance with federal regulations and grant agreement requirements.

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Thank you for your application!

If you do not receive an email confirmation within 24 hours of submitting it, please contact us to make sure it was received.

Applicants will be notified of an award within two weeks of submitting their application. Funds will be awarded four to six weeks after application approval via check.

If you have questions about this application, please contact both **Melanie Clark** [mclark@fcgov.com](mailto:mclark@fcgov.com) and **Claudia Menendez** at [cmenendez@fcgov.com](mailto:cmenendez@fcgov.com).