



**Community Development Block Grant—Program Year 2024 (July 1, 2024-June 30, 2025)
Public Service Programs—Request/Application for Funding**

Part One

1. Organization Name: _____
2. Project/Activity Name: _____
(If different from above)
3. Organization Address: _____
4. Organization's UEI Number: _____ (see Notice of Funding Availability for instructions)
5. Brief description of project (examples: employment program, educational enrichment program, childcare program, healthcare program, homeless assistance program, etc.):

6. Location where program services are to be provided (if different from #3 above):

7. Contact Person: _____ Title: _____

Daytime Telephone: _____ FAX: _____

E-Mail: _____
8. Official(s) authorized to sign agreement (particularly important if DIFFERENT from person indicated in #7 above):

Name: _____ Title: _____

Name: _____ Title: _____

9. Amount of CDBG funds requested for the 2024 Program Year: \$ _____
10. How many unduplicated (counting each person only once, not the number of times served) City of Carson residents do you anticipate serving in PY 2024 using the CDBG funds requested? _____
11. How many City of Carson residents (counting all visits or contacts) do you anticipate serving in PY 2024 using the CDBG funds requested? _____
12. How many persons did your program serve during the period July 1, 2022 through June 30, 2023? _____
13. How many persons do you anticipate your program will serve during the period July 1, 2023 through June 30, 2024? _____
14. Have you previously received City of Carson CDBG funding? Yes ___ No ___
15. If "yes", identify the amounts received in the space below:

<u>2021-2022</u>	<u>2022-2023</u>	<u>2023-2024</u>
\$ _____	\$ _____	\$ _____

Part Two

Please include the following with your proposal. (Please indicate by checking below which items are included.) If any of the listed items are missing, please explain why the items are not or could not be included:

___ Description of how the need was determined (including any supporting data) and how the program will meet the need.

___ Description of the target population and the setting in which it is anticipated that the service will be provided.

___ Description of how your program will track and verify the income status of program beneficiaries.

___ An example of the documentation your program will obtain from program beneficiaries to verify their income status.

__Description of program goals and objectives, as well as your method for evaluating the performance and success of your program.

__If your organization does not operate within this City's boundaries, please explain how your program will benefit City of Carson residents.

__Brief resume noting the expertise or background of the organization (including how long the organization has been in existence) and of the senior staff responsible for the program.

__List of the organization's officers (such as a board of directors) and of local program and supervisory employees, along with a summary of the background of those individuals.

__Organization by-laws or charter.

__City business license.

__Federal non-profit status determination letter [IRS Code 501 (c) (3)].

__State non-profit status determination letter [State Code 23701 (d)].

__A full line-item budget detailing the use of CDBG funds requested for the 2024 program year (including a listing of other funding sources your program receives).

__Full line-item budget of the organization for the 2023 (current) PY (including a listing of other funding sources your program receives).

__Most recent IRS Form 990.

__**Audited financial statements** for the previous two (2) years. (Programs that have not previously received or applied for CDBG funds from the City are welcome to apply. However, it is the City Council's policy not to fund **startup** organizations or programs.)

__Sources of funds from other entities.

Questions about this application or the program proposal should be addressed to Keith Bennett in the City's Housing Division, at (310) 830-7600, ext. 1319, or via e-mail at kbennett@carsonca.gov. Submittal of this application, descriptive proposal, and related documentation must be done in accordance with the procedure outlined in the accompanying NOFA. Application packages must be received no later than Monday, March 4, 2024, 5:00 PM. Application packages may be submitted electronically via e-mail to kbennett@carsonca.gov.

Late and/or substantially incomplete proposals and applications will be rejected. There will be no exceptions.

