

#### MicroGrant 6.0

2021 Application Packet



#### REQUIREMENTS FOR A COMPLETE APPLICATION

- 1. AH vendor ID number recorded on MicroGrant application (Must register as an AH Vendor at <a href="https://www.atlantahousing.org">www.atlantahousing.org</a>)
- 2. Attendance at one of the two MicroGrant 6.0 program Information Sessions:
  - a. Wednesday, March 17, 2021 6:00 p.m. 7:30 p.m. Online Zoom session
  - b. Wednesday, March 24, 2021 6:00 7:30 p.m. Online Zoom Session
- 3. Ensure your project is physically located within the University Choice Neighborhood boundaries, and that this information is listed on the application. (Use the UCN Map provided)
- 4. Application Requirements please be sure that each of the items below is included in 1 or more of the application responses to best demonstrate:
  - a. MicroGrant Category: (Choose 1, then elaborate how your project meets this category requirement)
    - Capacity Building
    - 2. Crisis Management
    - 3. Urban Farming/Community Gardens
    - 4. Healthy Living
    - 5. Early Childhood Development
    - 6. Financial Empowerment/Higher Education
    - 7. Arts
    - 8. Small Business Development
  - b. Demonstrated capacity of organization and organization members
  - c. Impact of proposal on UCN residents/former University Homes residents and NTP/CNIG strategies
  - d. Detailed work plan that provides information on tasks, activities, deliverables, schedule and budget
  - e. Leverage amount(s) and source(s)
- 5. Scoring review scoring criteria in MicroGrant guidelines and ensure that responses align with scoring criteria including bonus points, if applicable
- 6. Attachments
  - a. Organization documents evidence of current organizational status of Applicant (bylaws, business license, non-profit status, articles of incorporation
  - b. Resumes/bios
  - c. Additional typed pages referring to application questions
  - d. Completed budget form and budget narrative
  - e. Completed schedule form and schedule narrative
  - f. Detailed Covid-19 social distancing plan
- 7. Make sure your project application is complete, **typed**, with all questions answered, and it is signed. Unsigned applications may not be considered.



I. APPLICANT INFORMATION			
Organization Name:		AH Vendor Number:	
Address:			
CU			
City:	State: Zip:		Zip:
Primary Contact Name:	Title:		
Telephone Number:	E-mail Address:		
Date Information Session Attended:		authorized representative from your organization attend the sday, March 31, 2021 <b>Technical Assistance Session</b> ?	
☐ Wednesday, March 17, 2021		,,	
		Yes	No
☐ Wednesday, March 24, 2021	If so, ple	ease state name(s) of re	epresentative(s):
Previous MicroGrant Awardee:	Previous I	MicroGrant Award Cycle	e:
Yes No	/ Y	/ear: N//	Α
	ı		
II. PROJECT INFORMATION			
Project Name:		Requested Funding A	mount:
MicroGrant Category (Choose One): Ca	pacity Bui	lding Urb	an Farming / Community Gardens
Cri	sis Manag	ement Earl	y Childhood Development
He	althy Livin	g Fina	ncial Empowerment/Higher Education
Art	cs .	Sma	all Business Development
UCN Project Address:			
Which neighborhood does this project impact?	' (select or	ne below):	
Vine City Atlanta Universit		•	Heights (incl. Booker T, Just Us)
·			
Project's scheduled Starting Date:		Ending Date ( <b>No later th</b> a	an Friday, November 12, 2021):



Final Project Deliverable (500 words max):  Note: Response should be in narrative form.	



III. DESCRIPTION OF APPLICANT'S ORGANIZATIONAL STRUCTURE AND CAPACITY Briefly describe your organization's history, mission, structure; the geographic boundaries it serves; length of time you've been in business, and your organization's work within the University Choice Neighborhood area (UCN). Describe members of your organization, with title, who will play a role in your project delivery. Attach resume(s) or short bio(s) that demonstrate experience, role in organization and capacity to achieve the proposed activity. Prior MicroGrant awardees should describe prior grant activity, long-term impact and sustainability. [Note: You may upload supporting documents]



IV. DESCRIPTION OF THE UCN PROJECT SCOPE AND MICROGRANT CATEGORY
Provide a detailed description of the project or activities your organization will undertake per the requested funding
category. Describe which of the categories the project supports (Capacity Building, Crisis Management, Urban
Farming/Community Gardens, Small Business Development, Healthy Living, Early Childhood Development, Financial
Empowerment/Higher Education, or Arts) and how this funding will help bring the project fruition? Describe the project
activities, tasks, and final deliverable. Please attach additional sheet(s) if this space is not sufficient. [Note: Response to this question should be limited to the space provided]
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V DESIDENTS AND COMMUNITY ENGAGEMENT
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. IMPACT AND LONG-TERM SUSTAINABILITY
scribe how this project will be sustainable with the help of the Choice Atlanta MicroGrant 6.0 and/or other funding sources.
stainable is defined as an activity and program that will be on-going beyond the life of the MicroGrant, or will build
pacity to ensure the organization's continued operation and/or service within the UCN area. [Note: Response to this
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VIII. PROJECT BUDGET FORM (High Level)			
CATEGORY (LIST EXPENSES FIRST, THEN LIST ANY LEVERAGE)	DESCRIPTION OF ACTIVITY  (SALARIES ARE NOT AN ALLOWABLE EXPENSE. AWARDEES MAY ENGAGE THIRD PARTIES THROUGH CONTRACTURAL AGREEMENTS. STIPENDS ARE PERMITTED, BUT LIMITED TO 20% OF TOTAL GRANT AWARD)	AMOUNT	
	TOTAL		
	TOTAL		



BUDGET NARRATIVE  Provide a detailed narrative description of your project budget. Please be sure your response corresponds with your completed Project Budget Form above. [Note: Response to this question should be limited to the space provided]



IX. PROJECT SCHEDULE FORM: July 2 – November 12, 2021 (High Level)			
Responsible Party	Assigned Staff	Detailed Task Expected	Dates
$\vdash$			
		PROJECT END DATE	November 12, 2021



X. DETAILED COVID-19 SOCIAL DISTANCING PLAI All projects should be presented and administered with respective following the guidance from local, state, federal and the Cerorganizations Covid-19 social distancing plan. [Note: Respective for the content of the co	ct to the impending Coronavirus Pandemic environment. nters for Disease Control, please describe in detail your
AUTHORIZED APPLICANT REPRESENTATIVE:  By signing below, I certify that I am a duly authorized rep provided herein is true, accurate and complete. Appli application or withhold, terminate or recapture funding if statements and/or deliberate misrepresentations or omiss	cant agrees that AH has the right to reject this it is determined that this application contains false
Print Name:	Title:
Signature:	Date:



# Mail or email the completed application, along with supporting documentation no later than <u>5:00 p.m. Friday, April 30, 2021</u> to:

#### **Angela Benjamin**

#### Angela.benjamin@atlantahousing.org

Special Projects Manager, MicroGrant Program Choice Atlanta 227 Roach Street SW Atlanta, Georgia 30314

Got questions? Please call 404-817-7285

#### Do you need access to a notary or print/copy/scan services? Below are convenient locations for your business needs:

1. West End Print Shop

964 Ralph David Abernathy Blvd., Suite #C

Atlanta, GA 30310

Phone number: 404-207-1580

Services offered: print, copy, scan to email, notary

2. The UPS Store

541 Tenth St. NW Atlanta, GA 30318

Phone number: 404-733-6797

Services offered: print, copy, scan, fax, notary

3. FedEx Office Print & Ship Center

3515 Camp Creek Pkwy., Suite #140

East Point, GA 30344

Phone number: 404-344-5225

Services offered: print, copy, computer access and Wi-Fi