



Application Questions

I. Contact Information

Provide the names and contact information for key staff members associated with the proposed project.

1. Executive Director

Name:

Organization:

Title:

Address:

Phone:

Email:

2. LEAP Project Lead

Name:

Organization:

Title:

Address:

Phone:

Email:

3. Fiscal Director

Name:

Organization:

Title:

Address:

Phone:

Email:

II. Proposal

1. Organizational Qualifications (Part One)

In this section, describe the following for your organization and proposed partners:

- experience working with youth transitioning from the foster care and/or juvenile justice systems to employment, postsecondary education and/or adulthood, including specific results achieved over the past 12 months;
- experience working with public systems with a special focus on youth transitioning out of foster care and/or the juvenile justice system;
- experience or commitment to promoting authentic youth engagement and leadership;
- experience working in low-income or rural communities;
- ability to provide supplemental services to participating youth, including access to financial education and asset-building opportunities;
- experience or commitment to providing trauma-informed services; and
- your access to youth transitioning from foster care or the juvenile justice system and experience engaging these youth in new program opportunities.

2. Organizational Qualifications (Part Two)

In this section, describe your ability to launch new programs quickly, sustain them and effectively bring them to scale, including the following:

- your capacity to maintain quality educational and employment programming while continuing to grow and serve more youth;
- the potential, with collaborating organizations and stakeholders, for significantly increasing the number of youth within your geographic service area who are able to connect to employment and educational opportunities, prepare for and secure employment, and work toward postsecondary credentials; and
- your access to public and private funding that can be leveraged to help sustain the interventions during the program and after LEAP funding has ended; and
- your ability to effectively manage federal grants (e.g., fiscal stability, ability to manage complex funding streams, contracts and federal requirements, including a) producing quarterly financial reports and adhering to federal cost principles and procedures and b) performing criminal history checks for all staff supported with federal funds and all volunteers in SIF-funded programs with recurring access to children younger than 18).

3. Organizational Qualifications (Part Three)

The Foundation encourages organizations operating in rural or philanthropically underserved communities, both of which are priorities for the Social Innovation Fund, to apply. The Corporation for National and Community Service considers communities to be philanthropically underserved if they have considerably less than the average number of active philanthropic institutions or investments as similarly populated communities in their state or region.

If applicable, applicants should briefly describe, using data and statistics, whether they serve a rural community or if their community is philanthropically underserved. **If not applicable, please type "N/A" into the field.**

4. Implementation Plan (Part One)

Describe your plan for implementing one or both of the Jobs for the Future and Jobs for America's Graduates models. Explain which model(s) you will implement (JAG, JFF's Back on Track or both).

If you plan to implement the JAG model, describe whether you will implement one or more of these three JAG programs: Alternative Education, Out of School or College Success — and provide the name of the state or national JAG representative with whom you are coordinating. If

you choose the Back on Track model, explain how you will implement the Postsecondary Bridging and First-Year Supports phases of the model — and how participants will receive the services associated both phases.

Please also include:

- which model(s) you will implement (JAG, JFF or both), including which JAG program(s) or Back on Track phase(s) you will implement;
- the rationale for your choice, supported by a demographic analysis of the youth involved in the child welfare or juvenile justice system (or who are homeless) with whom you will work, assessment of their educational and employment needs and description of local employer demand for youth and young adult employees;
- a description of your target geographic area; and
- a description of other existing services for youth transitioning from the child welfare or juvenile justice system, as well as the local gaps, challenges and opportunities in addressing their employment and educational needs.

5. Implementation Plan (Part Two)

Provide a detailed plan for the successful implementation and scaling up of the identified model(s), including:

- which specific services and opportunities will be core to the new program;
- changes to organizational policy and practices to create an environment conducive to implementing the models;
- annual enrollment, by race, and completion targets for participants served and performance to be achieved (using the target worksheet template), including the number of youth who will be served and the outcomes expected in one, two and three years; and
- an implementation timeline setting out key start-up activities and milestones.

6. Engagement With Key Partners and Youth

In this section, describe the following:

- existing or new partnerships, as demonstrated by letters of agreement and memoranda of understanding, that include the key organizations working with youth in the child welfare and/or juvenile justice systems and detail their roles in implementing or scaling the program model(s)*; and
- the involvement of youth who have experienced the child welfare or the juvenile justice system as leaders in your organization OR your commitment to securing and sustaining authentic youth input and decision making as part of, and throughout, the LEAP initiative.

** Note: Local partnerships must include the child welfare or juvenile justice system AND should include youth with experience in child welfare or juvenile justice system; the K-12 system; postsecondary education or workforce development programs; employers; local philanthropy; community-based organizations that serve youth you plan to focus on; local colleges; and technical schools.*

7. Data Collection, Analysis and Management

In this section, describe your capacity to collect, analyze and manage data including:

- your access data to support effective project management and decision making;
- your ability to regularly collect and use data to report on participation, program management and outcomes, using measures similar to the sample performance measures;
- your ability to regularly collect and use data to report on demographics of participants, including race and ethnicity;
- your ability to engage in continuous improvement; and
- your ability to participate in an evaluation process, as demonstrated by experience with collecting and using data, and applying research, setting goals, tracking performance and using data to analyze and improve initiatives.

8. Evaluation Readiness

Describe your experience working with evaluators on implementation and impact studies including:

- your experience using informed consent procedures and confidentiality protections;
- identification of data system(s) you use and the system(s) ability to track individual participants, support data transfer and add and modify fields; and

- your experience, if any, in implementing evidence-based and evidence-informed programs.

9. Matching Funds

Describe your plan for securing, within a year, at least a 1:1 committed match of unrestricted nonfederal funds, including:

- your initial funding targets and commitments for reaching the first-year matching fund requirements of the initiative
- your commitment and ability to secure at least 25 percent of the first-year match upon receiving the award;
- initial funding commitments that show your organization's ability to garner required matching funds beyond the first year;
- strategies for meeting the match requirements;
- previous success raising matching funds for other initiatives;
- your understanding of the local and regional funder landscape and any letters of commitment or interest from funders; and
- goals and benchmarks for raising the matching funds.

Please include any letters of commitment reflecting the above in the Supporting Documents section at the end of this application. See Frequently Asked Questions for more on the matching funds requirement.

III. Budget

1. Proposed Budget

Using the budget worksheet template, provide detailed one-, two-, and three-year spending plans for the initiative. Upload the completed worksheet in the Supporting Documents section at the end of this application.

2. Budget Narrative

In this section, describe your total budget, the amount of LEAP SIF funds requested, matching funds, how the LEAP and matching funds will be used and how you calculated each line item.

Briefly describe the budgetary controls and grant allocation procedures your organization plans to follow, as well as any experience you have with financial oversight of federal grants. Please note any challenges you anticipate in providing detailed quarterly reports on the use of this grant.

IV. Financial Management

1. Basic Information

Name of financial management representative:

Title:

Phone:

Fax:

Email:

Year your organization was established:

Employer Identification Number:

DUNS number (Don't have one? Budget worksheet has instructions on how to get):

Approximate number of employees:

Full Time _____ Part Time _____

2. Financial Statement Audit Data

Date of last financial statement audit:

Fiscal period audited:

Audit agency/firm:

If qualified opinion, state the reason:

Date of last Office of Management and Budget A-133 audit:

Fiscal period audited:

Audit agency/firm:

If findings were reported, please explain:

3. Accounting System Data (Part One)

If you answer "no" to any of the following questions, please complete Question 4.

A. Does your accounting system provide for the recording of grant or contract costs according to categories of the approved budget? YES NO

B. Does your system identify the receipt and expenditure of funds separately for each grant or contract? YES NO

C. Does the system allow for the recording of cost sharing/matching for each project and ensure that documentation is available to support recorded cost sharing/matching? YES NO

D. Does the system allow for the recording of participant support costs as a separate cost category? YES NO

4. Accounting System Data (Part Two)

We understand that some nonprofits may not have required systems and practices in place to meet federal requirements. If you answered no to any of the above questions, briefly explain how you would change your practices to meet these requirements if selected as a subrecipient?

5. Timekeeping System Data (Part One)

If you answer "no" to any of the following questions, please complete Question 6.

A. Are time distribution records maintained for each employee to account for his/her TOTAL effort (100 percent)? YES NO

B. Is your organization familiar with the time and effort reporting requirements related to federal awards made to your type of organization? YES NO

6. Timekeeping System (Part Two)

We understand that some nonprofits may not have required systems and practices in place to meet federal requirements. If you answered no to any of the above questions, briefly explain how you would change your practices to meet these requirements if selected as a subrecipient?

7. Purchasing System (Part One)

If you answer "no" to any of the following questions, please complete Question 8.

A. Do you maintain asset inventory records? YES NO

B. Does your organization have policies relating to buy/lease analysis and competitive purchases greater than \$25,000? YES NO

8. Purchasing System (Part Two)

We understand that some nonprofits may not have required systems and practices in place to meet federal requirements. If you answered no to any of the above questions, briefly explain how you would change your practices to meet these requirements if selected as a subrecipient?

9. Funds Management (Part One)

If you answer "no" to any of the following questions, please complete Question 10.

A. Do you maintain a separate bank account for federal grant or contract funds? YES NO

B. Does your organization have procedures in place to minimize the time elapsing between the transfer of funds to your organization by a federal agency and your expenditure of such funds?
YES NO

10. Funds Management (Part Two)

We understand that many nonprofits do not have required systems and practices in place to meet federal requirements. If you answered no to any of the above questions, briefly explain how you would change your practices to meet these requirements if selected as a subrecipient?

11. Assurances

A. My organization has a process in place to maintain an active registration with the Central Contractor Registration. YES NO

B. Neither my organization nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in this transaction by any federal department or agency. YES NO

12. Certification

I certify that the information stated above is true and accurate.

13. Evidence of Nonprofit Status

You must provide evidence that your organization meets the requirements of section 501(c)(3) or 170(c)(2) of the Internal Revenue Code and submit a copy of your 501(c)(3) determination letter in the supporting documents section of this application (see next section).

V. Supporting Documents

- Copy of your organization's 501(c)(3) determination letter
- Letters of commitment or intent and/or memoranda of understanding documenting required matching funds
- Letters of support and memoranda of understanding from partners supporting the proposal
- Completed Target Worksheet
- Your organization's most recently audited financial statement, including the auditor's report to management
- Completed budget worksheet
- IRS Form 990
- Indirect cost rate agreement (if applicable)
- Resumes for the lead project and fiscal directors

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