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Building Community Capacity to Address Local Health Inequities

INTRODUCTION

The Center for Health Equity

Established in June 2006 by Dr. Adewale Troutman, the Director of Louisville Metro Department of Public Health and Wellness. The Center for Health Equity works to address the root causes of health disparities by supporting projects, policies and research working to change the correlation between health and longevity and socioeconomic status.

Our Mission is to eliminate social and economic barriers to good health, reshape the public health landscape, serve as a catalyst for collaboration between communities, organizations, and government entities through capacity building, policy change and evidence-based initiatives.

Low-income populations and communities of color disproportionately experience worse health and safety outcomes across a broad spectrum of illnesses, injuries, and treatments. When elements of racism, poverty, and problematic community environments converge, greater overall threats to health develop. The most powerful factors shaping both health and health inequities are social and economic determinants, or the community conditions for health.

Community Health: A Critical Approach to Addressing Chronic Diseases, 2007

Excerpted from Preventing Chronic Disease: Public Health Research, Practice and Policy

By Lissette M. Flores, MPH, Rachel Davis, MSW, Patti Culross, MD, MPH

Thinking about health as a function of environmental influences in our communities shifts the focus from individual behaviors to health needs and barriers that can be addressed through broad strategies such as policy change. Good health is a cornerstone of community members' quality of life and productivity and the community's economy.

Most people understand the prevention of poor health as an individual issue. So, many solutions focus on individual and lifestyle changes: eating healthier, increasing physical activity and reducing or quitting smoking. Community conditions can make modifying unhealthy behaviors challenging. Poor environmental quality; inadequate access to affordable, nutritious food; and safety issues often make healthy living impractical, particularly in low-income communities and communities of color. Addressing community conditions is an essential strategy to supporting behavioral change. To impact chronic disease, community environments must support and encourage healthy habits.

For example, environments supportive of reducing asthma, lung cancer, and cardiovascular disease would address the availability of tobacco, safe and affordable access to healthy food, safe access to physical activity, social cohesion and environmental design that encourage physical activity, and social and behavioral norms that encourage healthy habits and discourage unhealthy ones.

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To address these issues, the Louisville Metro Department of Public Health and Wellness, Center for Health Equity (CHE) began a series of dialogues within Louisville In 2008 to engage residents in discussions about local health inequities and elements of the social and community environment that can be addressed to enhance quality of life and improve health behaviors and outcomes.

To support this effort, CHE will provide **five, 12-month grants** for up to **\$10,000** for local non-profits to actively engage neighborhood residents both in holding these dialogues and developing action plans to address identified issues. Please select only *one* of the five neighborhoods listed in the section on eligibility requirements (page 11) to work in. The organization or project must show evidence of working for social change through one or more of the following:

- ✓ Organizing and action led by people working to control their own lives.
- ✓ Educating communities about the root causes of oppression and injustice.
- ✓ Eliminating barriers to full participation in society (i.e. racism, sexism, classism, homophobia, ageism, able-ism, and exclusion from decision-making processes).
- ✓ Focusing on efforts to change cultural, social and economic systems.
- ✓ Connecting local issues with national and global concerns.
- ✓ Networking, collaborating, and cooperating with other change agents working toward similar goals.

The funds, which will be provided in two installments, can be used to pay for staff, administrative overhead, stipends, transportation, childcare or other costs directly associated with this work. Those awarded the grants will also receive free training and on-going one-on-one technical assistance in health equity, assets-based community assessments, collaboration, resource development, action planning and sustainability at no cost to the organization.

In addition, those who receive these awards and successfully complete an action-planning process will be eligible to apply for implementation funding for up to two years,¹ as well as grant writing assistance to apply for non-Metro Louisville funds to implement their projects. Only the organizations who receive this grant will be eligible to apply for implementation money.

Those applying for this funding must commit to completing the following activities over a one-year period beginning November 2009.

- 1. Attend a four-hour grantees meeting within 2 weeks of award notification**
- 2. Recruit 3-5 residents and/or staff who complete a two-day Health Equity Dialogue Facilitator Training and commit to facilitating at least 2 dialogues after training completion.**

Health Equity Facilitator's Trainings

These 2-day trainings, provided by CHE at least twice a year, help community members increase their capacity to hold discussions about the causes and solutions to health inequities

¹ This is dependent upon the Metro Council Budgeting process.
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with neighbors and other interested folks. This participatory training, using the documentary “Unnatural Causes: is inequity making us sick,” is geared towards folks with all levels of experience with facilitation or health equity. Those completing the training will:

- ✓ Gain a greater understanding of health equity, health outcomes, health disparities and policy advocacy;
- ✓ Be able to use the documentary Unnatural Causes as a tool to facilitate Health Equity Dialogues;
- ✓ Have practiced facilitating topics related to health equity;

UNNATURAL CAUSES DOCUMENTARY

UNNATURAL CAUSES is the acclaimed documentary series broadcast by PBS and now used by thousands of organizations around the country to tackle the root causes of our alarming socio-economic and racial inequities in health. The four-hour series crisscrosses the nation uncovering startling new findings that suggest there is much more to our health than bad habits, health care, or unlucky genes. The social circumstances in which we are born, live, and work can actually get under our skin and disrupt our physiology as much as germs and viruses.

Episodes

In Sickness and In Wealth (56 min.) How does the distribution of power, wealth and resources shape opportunities for health?

When the Bough Breaks (29 min.) Can racism become embedded in the body and affect birth outcomes?

Becoming American (29 min.) Latino immigrants arrive healthy, so why don't they stay that way?

Bad Sugar (29 min.) What are the connections between diabetes, oppression, and empowerment in two Native American communities?

Place Matters (29 min.) Why is your street address such a strong predictor of your health?

Collateral Damage (29 min.) How do Marshall Islanders pay for globalization and U.S. military policy with their health?

Not Just a Paycheck (30 min.) Why do layoffs take such a huge toll in Michigan but cause hardly a ripple in Sweden?

Watch the Trailer: http://www.unnaturalcauses.org/video_clips_detail.php?res_id=80

- ✓ Be objective in conversations about health equity;
- ✓ Feel confident in engaging community members in Health Equity Dialogues;
- ✓ Create tentative plans for up-coming dialogue dates.

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3. Hold 3-5 Health Equity Dialogues in their community with trained facilitators.

Each dialogue lasts approximately 1.5 – 2 hours. Participants view clips of the *Unnatural Causes* documentary to stimulate discussion about the roles of race, economics and neighborhood conditions in shaping behaviors that in turn shape health outcomes. During the dialogue, participants will learn that health inequities are preventable and that social, physical and economic conditions can be changed to support health.

By hearing resident perspectives about what can or should change locally to make communities healthier, facilitators will gain an understanding about the factors in their lives, neighborhoods, workplaces, schools and homes that participants believe are important to health and well-being, as well as gather input about which concerns and issues are amenable to change/influence. The Facilitator's guide, which provides more details about what happens during a dialogue can be accessed at the following web page.

<http://www.louisvilleky.gov/NR/rdonlyres/6D6E092C-27B7-4779-9192-3FDD61019EAF/0/HEDFacilitatorsGuide.pdf>

4. With assistance from CHE, work with neighborhood residents to develop a simple community assessment on a topic directly related to health inequities.

The community dialogues themselves, will start this process for you. After you hold these conversations with community members, you will have an idea of some of the major issues folks are concerned about, as well as local assets that might be able to be used to address these issues. Topics that relate to health equity are diverse and could include: housing, transportation, recreation, planning, health issues, access to health care, violence prevention, as well as cross cutting themes in these areas.

Let's say that dialogue participants consistently talked about heart disease as an issue, CHE could help you work with community members to find out:

- rates of: heart disease, diabetes, stroke, children who are overweight or obese;
- the percentage of folks who eat 3-5 vegetables per day; eat fast food daily, exercise 3-5 times per week;
- concentration of alcohol outlets, alcohol and/or tobacco marketing, fast food restaurants, walking paths, recreation facilities, and parks;
- proximity of fast food stores to schools;
- places residents can access healthy food such as grocery stores, farmers markets or community gardens; and
- access to health providers and nutritionists

After you find out the statistics, you may be curious about what the statistics mean or what they say about your community. CHE staff can also help you find out more by working with you to develop surveys, hold focus groups², complete individual interviews, hold more

² A guided conversation that helps facilitators understand more about an issue and/or solution.
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dialogues about the specific issue that arose or working with folks to create digital stories. This will provide you a full picture of information both in words and numbers. CHE staff will work with you to review the information that you gather and decide what it means.

5. Develop an action planning team and an action plan to address the chosen issue

Action planning is simply developing a “to do” list that would help you solve the problem. It consists of a number of action steps. Each action step should include the following information:

- **What** actions or changes will occur
- **Who** will carry out these changes
- **By when** they will take place, and for how long
- **What resources** (i.e., money, staff) are needed to carry out these changes

The action planning team must have direct community member involvement and cannot just consist of organizational staff. Some members of the community you might consider asking to join the team include:

- Influential people from all the parts of the community affected by your initiative
- People who are directly involved in or interested in the problem
- Members of grassroots organizations
- Members of the various ethnic and cultural groups in your community
- Newcomers or young people in the community who are not yet involved

CHE staff will work with your community team to guide you through the steps of action planning. Another resource you may wish to review related to this work can be seen at the following web page: http://ctb.ku.edu/en/tablecontents/sub_section_main_1089.htm

6. Attend full-day quarterly trainings (3 total) provided by CHE or its designee

CHE will provide quarterly technical assistance and trainings on health equity, assets-based community assessments, collaboration, resource development, action planning, sustainability and other topics as needed. **These trainings are mandatory** and will be scheduled just before each new section of activities to help prepare the grantee to move forward. Any grantee who does not attend these trainings will risk future funding. The specific dates will be provided with sufficient time for grantees to make plans to attend.

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A tentative timeline for major components of the requirements is in the table below.

Action	Tentative Timeline	Responsible Party
Attend Introductory Grantee Meeting	Nov 1- Nov 15, 2009	Grantee
Recruit participants for Health Equity Facilitator Training	Nov 1 – Dec 31, 2009	Grantee
Work with 3-5 residents to complete Health Equity Facilitator Trainings	Tentative Date: Jan 12 & 13, 2010	Grantee CHE runs training
Hold Health Equity Dialogues (CHE will work with the grantee to hold a dialogue in their community in January 2010 using currently trained facilitators. After this, the Grantees will be responsible for holding three dialogues between February 1 and March 31, 2010).	Jan 14, 2010 – Mar 30, 2010	CHE, Grantee
Complete community assessment.	Mar 1 – June 30, 2010	Grantee with assistance from CHE
Develop Action Plan	July 1 – Oct 30, 2010	Grantee w/ assistance from CHE
Turn in Action Plan/ Implementation Proposal to CHE for possible approval.	Nov 15, 2010	Grantee
Participate in technical assistance and training	Quarterly	Grantee attends; CHE provide.
Complete mid-term and final report.	Bi-Annually	Grantee

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Grant Guidelines – Project Narrative

The program narrative consists of 5 sections. Respond to the sections in the given order. Number each section and retype the second headings in bold type. Responses in this section should be typed on one side only, 8.5” x 11”, white paper, single spaced with double spacing between paragraphs, using 12-point type (Times New Roman). **The narrative should be five pages or less.**

I. Community Background (20 points)

Please provide us with a brief background about the neighborhood that you will serve. **Applicant must select only one eligible neighborhoods to work in (page 11).**

- a. Who are the community members (how many folks, what’s their income level, racial/ethnic background, their education level, talents ~ natural leaders, etc.)?
- b. What’s the neighborhood like (what’s the unemployment rate; what are the assets e.g. schools, community organizations, parks; what are some of the issues)? Please do not provide city-wide statistics. Local statistics are encouraged

Comment [s1]: Insert comment in bold about those applying should only submit a proposal to work in one neighborhood. Those submitting applications to work in multiple neighborhoods will not be considered for funding. You can use the same language you used under the eligibility requirements section.

II. Program Background (60 points)

Please provide answers to the following questions about how you would implement the required programming for this grant.

- Recruit 3-5 residents and/or staff to complete a two-day Health Equity Dialogue Facilitator Training and commit to facilitating at least 2 dialogues after training completion.
 - a. Explain how you would recruit your Health Equity Facilitators?
 - b. What incentives, if any, would you provide?
 - c. What characteristics would be important for participants playing this role?
 - d. How would you ensure diverse representation of your community?
 - e. How would you ensure that the participants complete the training and serve as facilitator’s on at least two dialogues?
- Hold 3-5 Health Equity Dialogues in their community with trained facilitators.
 - a. How would you select your locations for the Health Equity Dialogues?
 - b. How does this help your organization move forward other programs or activities currently occurring?
 - c. How would you recruit participants for your Health Equity Dialogues?
 - d. How would you ensure that you have at least 10 participants at each dialogue?
 - e. What do you anticipate will be some of the major issues raised?
 - f. What records will you keep from these meetings?
 - g. How would you follow-up with participants about the results and next steps?

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- Work with 5-10 residents to develop a simple community assessment on a topic directly related to health inequities.
 - a. How would you determine the priority issue on which you would complete your community assessment?
 - b. What experience do you have with community assessments?
 - c. What assistance would be helpful to you in completing a community assessment?
 - d. How would you ensure diverse community participation with the assessment process?
 - e. What existing information are you familiar with and/or have available to you that could assist with your community assessment? (Examples could include:)
- Develop an action planning team and an action plan to address the chosen issue.
 - a. How would you ensure diverse community participation with the action planning process?
 - How would your organization recruit your team and ensure at least 5-10 active participants?
 - b. What experience does your organization have with action planning?
 - c. What assistance would be helpful to your organization in completing an action plan?

III. Organizational Capacity (20 points)

- a. Please briefly describe the organization's history, social justice vision, and recent achievements and challenges
- b. Explain the organizational and staff capacity to engage diverse community members, facilitate community action, hold community discussions, work collaboratively with other organizations and complete grant requirements including maintaining appropriate fiscal controls.
- c. List and describe the backgrounds, roles and responsibilities of key management and program staff.
- d. Briefly describe the program's process for collecting information that will be tracked to measure program success.

IV. Leveraging and collaboration (20 points)

- a. Describe how you will collaborate with other community organizations to accomplish this project. Briefly describe any existing collaborative relationships your organization has that will help with this project. A **Memorandum of Understanding (MOU) is REQUIRED³** when two or more organizations are applying for these monies, a fiscal agent is being used and/or one of the partners has an operating budget of over \$500,000. This MOU must contain the following:

³ Partnerships requiring an MOU will not be considered without the MOU and will be scored on having the required components.

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- o The organization with a budget under \$500,000 will serve as the program lead on the project.
 - o The organization with that budget under \$500,000 will receive at least 50% of the funding.
 - o Have signatures from both agencies that demonstrate their willingness to collaborate on the project.
- b. Demonstrate how your agency will use Metro funds to leverage additional funds for this project with supporting documentation. A letter of commitment or other appropriate documentation should be attached.
- c. Briefly describe the program's utilization of volunteers or in-kind contributions.
- d. While cash match is not required, in-kind contribution equivalent to the amount requested is strongly encouraged. Please describe any in-kind or cash match you provide.

V. Sustainability (10 points) Explain what you will do to sustain this project without additional Metro dollars.

VI. Budget (10 points) Attach a budget and budget narrative. This does not count in your five-page total. Use **Attachment 2** for this. The budget will be reviewed for completeness, in-kind support and reasonable use of grant dollars towards identified activities.

Budget Limitation

Total grant funds requested from all grant applications combined cannot exceed 50% of the applicant organization's total budget. The maximum grant will be \$10,000.

Unallowable Costs

Grant funds cannot be used to pay for the following:

- o Lobbying
- o Fund-raising
- o Alcoholic Beverages
- o Entertainment Costs (including but not limited to tickets to shows or sports events, lodging, and gratuities).
- o Severance Pay
- o Construction Costs
- o Vehicle Purchases

HOW TO APPLY

RETURN YOUR COMPLETED APPLICATION BY October 7, 2009. Completed applications can be mailed to Darryl Turpin at the following address. Proposals MUST be received no later than 4:00 pm on October 7, 2009.

Send by mail or drop off:

Center for Health Equity,
Louisville Metro Department of Public Health & Wellness
2422 West Chestnut Street
Louisville, KY 40211

Attention: Darryl Turpin

e-mail: darryl.turpin@louisvilleky.gov

Completed applications must reach the above location by 4:00 PM on October 7, 2009. No late applications will be accepted.

**No incomplete applications will be accepted. Those who submit applications by mail are encouraged, but not required to also send a copy via email to:
Darryl.turpin@louisvilleky.gov**

Comment [s2]: Those who submit applications by mail is highly encouraged, but not required, to also send a copy via email to: daryl.....

ELIGIBILITY REQUIREMENTS

NON-PROFIT CORPORATIONS – located in and/or serving the following neighborhood/ communities in Louisville: Portland, Russell, California, Shawnee and Latino Hispanic (call for specific geographic boundaries). Applicant must select only *one* of these eligible neighborhoods to work in.

Applicants must be incorporated as nonprofit corporations or have a fiscal agent, have budgets less than \$500,000 or be partnering with an agency whose budget is less than \$500,000 and be qualified to do business in the Commonwealth of Kentucky. Non-profits with budgets in excess of \$500,000 may serve as a fiscal agent for those not yet incorporated and should be prepared to work with a small non-profit to apply for these monies, as well as implement the grant. A formal **MOU** delineate the roles of the two organizations.

❖ **501(c)(3) CORPORATIONS.**

- An applicant or its fiscal agent, with annual revenues greater than \$25,000 must have or have applied for 501(c) tax-exempt status with the Internal Revenue Service. A copy of the current IRS 501(c) tax-exempt status determination letter, advanced determination letter or letter of affirmation is required as an attachment to the application.
- If the applicant or its fiscal agent has annual revenues that are less than \$25,000, the applicant will be required to attach the applicant's most recent financial statement, signed by the appropriate corporate officer, to its application.

Requirements

- CORPORATIONS IN GOOD STANDING.** An Applicant or its fiscal agent must be in *good standing* with the Kentucky Secretary of State. This information will be verified at the following website:

[http://apps.sos.ky.gov/business/obdb/\(ntd5c1454bacblew1gxcls45\)/default.aspx](http://apps.sos.ky.gov/business/obdb/(ntd5c1454bacblew1gxcls45)/default.aspx)

- REGISTERED CORPORATIONS.** Applicants are required to be registered with the Louisville/Jefferson County Metro Revenue Commission and be in *good standing* with the Commission. Agencies without paid employees are the exception.
- SERVING THE LOUISVILLE METRO COMMUNITY.** All grant applications must be for requests for funds to be used to serve the residents of the Louisville Metro community.

REQUEST FOR APPLICATION TIMELINE

Q&A / TECHNICAL ASSISTANCE MEETING

August 3, 2009 5:00p.m. – 8:00p.m.

CHE staff will spend an hour fielding questions about the Request for Proposal: Building Community Capacity to Address Local Health Inequities. At the completion of this, staff will provide a two-hour workshop on grant writing that particularly addresses this application process. While not mandatory, this session is highly encouraged particularly for those with limited grant writing experience.

APPLICATION DEADLINE

October 7, 2009

PANEL REVIEW

October, 2009

If the application satisfies all of the requirements for submission, the application will be submitted to the appropriate Review Panel for critical review and recommendations to CHE. Note: Review Panels only recommend funding.

AWARD NOTIFICATION

October 16 - 30, 2009

Notification of grant award status letter will be e-mailed and/or mailed.

SIGNING OF GRANT AGREEMENT

November 15, 2009

The Metro Funding Agency will contact the grant recipients to negotiate and execute a Grant Agreement. The first installment will be made approximately 2-4 weeks after contracts are signed. Grant activities should begin November 1, 2009.

GRANTEE MEETING

November 5, 2009

This is a mandatory meeting of all funded grantees. This will occur at CHE. Those who do not attend or send a representative to attend will not receive their grant award.

Comment [s3]: send

DEADLINE TO SPEND ALL GRANT FUNDS

November 30, 2010

OTHER GRANT INFORMATION

REVIEW AND SELECTION PROCESS

The Mini-grant applications will be read, evaluated, reviewed, discussed and decided upon by a selection committee. The selection committee will be made up of activists, community members and CHE staff. The maximum grant award will be \$10,000. The reading and review process takes several days. Notices will be sent as soon as decisions are final. No appeals will be accepted or considered.

GRANT REQUIREMENTS

Every grant recipient will be required to comply with the following grant conditions. Recipients that fail to comply with these conditions may cause their grant awards to be withheld or terminated.

Lobbying is prohibited

For the purposes of this application, lobbying means any oral or written communications by an Applicant and/or representative(s) employed or retained by them, with members of the Louisville Metro Council and/or staff, Louisville Metro Government Officials and/or staff, in order to attempt to influence the outcome of the grant award process. The process begins when Louisville Metro Government notifies the Applicant of the External Agency Funding.

Grant Agreement

To receive an grant, a grant recipient will execute a Grant Agreement with Louisville Metro Government by November 30, 2009 or as determined by the Department responsible for the administration of the specific grant.

Recordkeeping

To maintain and retain not less than five years after completion of the selected program, complete and accurate records of all the grant recipient's costs chargeable to Metro Government as well as all other funding sources for the selected program. To grant Metro Government the right, at any reasonable time, to inspect and audit these records by authorized representatives of its own or any public accounting firm selected by it.

The records to be maintained and retained will include:

- All payroll records
- Invoices for purchases, receiving and issuing documents, and all the inventory records for stores, stock or capital items;
- Paid invoices and cancelled checks for materials purchased and for subcontractors; and any other third party charges; and
- Program participant and statistical records
- The curriculum and schedule of classes for any educational programs or training provided by the grant recipient.

Financial and Progress Reports

- o To submit financial and progress reports, showing all funds received and spent by the grant recipient for the selected program, including funding from other sources (these reports will be similar to the information provided by the recipient in the “Budget” section of the Metro Funding Agency Grant Application Forms);
- o To not materially deviate from the selected program without the prior written agreement of Metro Government; and
- o To spend all grant funds by November 30, 2010 (unspent funds must be returned to Metro Government by August 31, 2010). The final program report is due no later than December 15, 2010.

Legal Compliance

- o To implement and administer the selected program in compliance with all applicable laws, regulations and codes of the federal, state and local governments (Specific laws and regulations are identified in the “Certifications and Assurances” section of the Metro Funding Agency Grant Application Forms).
- o To not unlawfully discriminate against any person by reason of race, religion, color, sex, national origin, because the person is a qualified individual with a disability, age 40 or over, familial status, sexual orientation, gender identity, is a smoker or non-smoker, or because of the person's Vietnam-era Veteran status (Specific discrimination and affirmative action laws and regulations are identified in the “Certifications and Assurances” section of the Metro Funding Agency Grant Application Forms).

Public Acknowledgement

- o To publicly acknowledge that Louisville Metro Government has provided partial funding for the project. Examples of public acknowledgement include:

- Holding a press conference to announce the award of a grant from Louisville Metro Government;
- Sending out a press release that your organization received a grant from Louisville Metro Government;
- Posting a sign in your organization that announces that your organization is funded by a grant from Louisville Metro Government;
- Including a story in your organization's newsletter announcing the receipt of a grant from Louisville Metro Government;
- Mentioning that your organization is a grant recipient during interviews with the media (newspaper, morning shows, etc...);
- Acknowledging the Louisville Metro Government in your organization's brochures, flyers, and/or other publications.

Indemnification

- o To indemnify, hold harmless, and defend the Louisville Metro Government from all claims, damages, losses and expenses resulting, directly or indirectly, from the grant recipient's performance or actions.

Use of Grant Funds for Local Travel.

- o If awarded grant funds are to be used for local travel, local travel is limited to travel within a twenty-five (25)-mile radius of the program site location where the majority of funds are utilized.

Grant Policies & Procedures.

- o Grant recipients must comply with current External Agency Fund Grants policies and procedures (a copy of the External Agency Fund Grants Manual will be provided to each recipient).

QUESTIONS AND ANSWERS

Q: When are the grant applications due?

A: The deadline date: **October 7, 2009**. No late applications will be accepted.

Q: Where is the designated location for receipt of grant applications?

A: By 4:00 PM, October 7, 2009
Center for Health Equity
2422 West Chestnut Street
Louisville, KY 40211

Q: When will an Agency know if it is approved for any funding?

A: October 30, 2009

Q: What does 50% of Agency total budget mean?

A: Total grant funds requested from all grant applications combined must not exceed 50% of the Applicant's total budget. This means that to apply for this funding, your agency or fiscal agent's budget must be at least \$20,000.

Q: What if my application is not approved for the amount requested?

A: Prior to the signing of the Grant Agreement, the grant recipient and the designated representative from the appropriate Metro Government Funding Agency will discuss changes to the budget and/or selected program.

Q: What if an applicant has questions about the application process?

A: The following Louisville Metro Government staff should be contacted:

Darryl Turpin, 574-6616 (office) or darryl.turpin@louisvilleky.gov

Q: How do I appeal a decision if I am not funded?

A: No appeals will be considered.

APPLICATION CHECK OFF LIST

- Cover Sheet**
- Grant Guidelines – Project Narrative – five pages**
- Program Budget Summary**
- Budget Narrative**
- Certificates and Assurances**
- MOU (if applicable) must contain**
 - Have signatures from both agencies that demonstrate their willingness to collaborate on the project.
 - Contain language that the organization with a budget under \$500,000 will serve as the program lead on the project.
 - Contain language that the organization with that budget under \$500,000 will receive at least 50% of the funding.