

GUIDELINES FOR APPROPRIATION APPLICATIONS

Name of Entity: HOPE Connections, Inc.

		following guidelines for funding and initial indicating you have read and understand applying:
CP	1.	Appropriations are made on an annual basis; receiving funding one year does not guarantee that the organization will receive funds in the same amount, or at all during the next year.
<u>CP</u>	2.	Funds are appropriated for specific programs that an organization sponsors and cannot be used for the day-to-day operating expenses of the organization (i.e. salaries, office expenses, rent).
<u>CP</u>	3.	The program for which an appropriation is requested must provide services to unskilled poor, low-income persons, unemployed persons or students from those families; alternatively, the program must provide a measurable means of economic development for Caddo Parish.
<u>P</u>	4.	 Funds cannot be used for the following: a. Capital purchases/improvements such as building repairs/renovations, playground equipment (even if for the parish-funded program) of an organization; b. Equipment used in any other program other than the one the Parish is funding; c. To benefit non-Caddo citizens. d. Payments to organizational board members and employees.
CP	5.	Funds cannot be used directly or indirectly in any trade or business carried on by any person or entity other than Grantee.
P	6.	 An organization receiving monies through the Caddo Parish Commission's appropriation process must give two reports detailing the use of those funds: a. A report detailing the use of the funds from January 1st - June 30th of the appropriation year (due July 31st), and b. A report detailing the use of the funds from July 1st - December 31st of the appropriation year (due January 31st of the year following the appropriation).
		A subsequent appropriation application will <u>not</u> be considered if the July 31st report has not been timely submitted; an approved appropriation will <u>not</u> be funded if the January 31st report has not been timely submitted.

These reports **must** include a detailed expense ledger with invoices, receipts cancelled checks and any other documents related to the expenditure of Parish funds, and the Parish reserves the right to audit all organization records related to the appropriation at any time. The organization will also complete an Outcome Report for the program (due January 31st of the year following the appropriation).

GUIDELINES FOR APPROPRIATION APPLICATIONS (continued)

_CP	7.	No funds will be paid until all required reports have been received and approved by
		the Parish of Caddo.

8. Funds must be spent in accordance with the provisions outlined in the Cooperative Endeavor Agreement (CEA). Listing items in the detailed budget does not make them eligible for reimbursement; the items <u>must</u> be covered in the CEA.

I acknowledge that I have read and fully understand the guidelines listed above.

Signature: <u>Unista Pazzaglia</u>

Title: Executive Director

Date: 7/21/2023

SECTION I: INTRODUCTION AND FUNDING PURPOSE

Each section of this request must be completed in order to be considered for funding.

elect one:				
RECUR	RING REQUEST X	NON-RECURRING (ON	E-TIME REQ	QUEST)
. Name of	Entity: HOPE Connections			
Commissi	ion District: 5			
Address:	2350 Levy Street			
	Shreveport, LA 71103			
	Is this the mailing address of the	organization?	□ Yes	🛭 No
	If not, please list mailing address:	P.O. Box 37148		
	Shrevepor		133	
Does you	Is this the address of the organiza If not, please list headquarter address r organization provide services in n	dress:		□No
If yes, ple	ease list below or attach list of other	districts served and addr	Yes esses (if availa	11
District _		District	.,	·
Address _		Address		
Title: Di	Person: Yulonda Lane rector of Operations umber: 318-670-4591	Fax: 318-673-102	25	
	ane@nwlahope.org	1 ax		
Email: yi	une C 11 11 10110 pc. 015	Past Grant Recipies	nt: 🗠 res	□ No

	☐ Economic Development * ☐ Education ☐ Social Welfare
	HOPE Connections serves very low income individuals living unhoused or in emergency shelters. Our primary purpose is to assist those individuals with obtaining permanent housing. We are apply for funds related to our low-restrictions safe have, Solid Ground. Solid Ground is a 37-bed shelter for those who are unhoused and also have physical disabilities, mental illness, addiction, chronic health conditions, criminal records, no income or anything else that keeps them from accessing the other shelters in our area.
	* Economic Impact Study required with applications for Economic Development (page 12).
3.	Amount of this funding request: 40,000
4.	During what time period will the funds be used: 01/01/2024 through 12/31/2024
5.	Are audited financial statements available? Yes No
	Please furnish most recent financial statement period covered:
P	01/01/2021 through 12/31/2021
	If no, who prepares the financial statements for your organization?
6.	Are you exempt from Federal Income Tax? Yes No
	Under IRS Code Section: 501c3
」 7.	Have you filed Form 990 (Return of Organization Exempt from Income Tax)? □ Yes □
	Date of last time filed: 11/01/2022
$\rfloor_{8.}$	Semi-annual drawdowns are agreed to be acceptable: $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
9.	Does the organization have any outstanding tax claims (City, Parish, State or Federal)? \[\textstyle \text{Yes} \textstyle \text{No} \text{(If so, please explain claim)} \]

- 10. Are you in good standing with the State of Louisiana? $\hfill \boxtimes \hfill Yes \hfill \square \hfill No$ Click here to attach a copy of your Certificate of Good Standing.
- 11. Please click here to attach Outcomes of prior year programs. An Outcome Report template is located at www.caddo.org.
- 12. Click below to attach any other information that you wish to submit in support of your application. (Optional)

SECTION II: PROPOSAL NARRATIVE

The proposal narrative must be formatted as outlined below. Proposals that are not submitted in the following format will not be reviewed. This section shall not exceed three pages, double spaced in 12-font. The application outline must address all of the following items below:

A. Description of Project and Soundness of Project

This summary should provide an overview of entire project(s), including project location and how this project will benefit the Parish. This project must be clearly understood, well planned, and ready to proceed.

B. Background and Capacity of Organization

- 1. Briefly describe your organization.
 - (a) How long has the organization been in operation? What is the history of this organization.?
 - (b) List key project staff/volunteers and detail their experience related to this project
- 2. What key components and strategies will this organization use to complete this project successfully?

C. Prior Experience of Organization

- 1. Has the organization completed parish projects similar to this request in the past 3 years? If so, please describe.
- 2. What were the outcomes of the project? How did it benefit the parish?

D. Extent of Neighborhood Involvement

- 1. Does your event/project need volunteers? If so, how many and how do you attract and maintain the volunteers. What services do the volunteers provide?
- 2. Describe how a significant number of people with diverse interests in the neighborhood will be involved in and benefit from this project.

E. Joint Group Application and Collaboration

- 1. Is this a joint application? If yes, list organization and their relevance to the project.
- 2. Will you partner with any other organization to complete this project? If yes, list the organizations and their relevance to the project.
- 3. Will your project require contractual work? If so, what type of services will they perform?

F. Identify Needs and Gaps in Services in Neighborhood

- 1. List the priority needs that the organization has identified in the neighborhood and/or parish.
- 2. Detail any gaps of services to that your organization has identified that relate to this project.
- 3. Detail and explain project and or organizational goals for the future that extend beyond this funding opportunity.



Initial here stating you have read and understand the requirements for proposal narratives.



Click here to attach a separate file for the proposal narrative formatted as outlined above. (This can be a Word document, a scanned PDF document, etc.)



ATTACHMENT A: CONTACT INFORMATION

List the names, addresses of all board members.

Name	Address
Please see the attached listing of all board members.	Please see the attached listing of all board members.



Click here to attach a file for any additional contacts not listed above.

ATTACHMENT B: PROJECT TIMELINE

This summary should provide a written timeline to show benchmarks for project implementation and completion. Describe any recent, relevant and successfully demonstrated experience in undertaking similar projects. Include the knowledge and experience of the proposed day-to-day project team leader.

Date	Milestone		
February 2020	Received a grant from the Louisiana Housing Corporation to build a low-restrictions safe haven on our current property.		
June 2020	Opened a low-restrictions safe haven in our current building at the request of the Louisiana Housing Corporations due to COVID.		
June 2020 to October 2021	Plans for the new safe haven building were delayed due to COVID. Prices of building materials increased and more funding had to be arranged.		
October 2021 to Present	Planning and construction of the safe haven has taken place. Complex building grant requirements and weather have delayed the project, however, we have continued operations of the safe haven in our current building.		
October 2023	New 37 bed facility will be complete and ready for move-in.		

ATTACHMENT C: APPROPRIATION BUDGET FORM

Please provide detailed explanation of each line item. Organization Name HOPE Connections Budget Year 2024				
	FU	INDING AMOUN	Γ	
Line Item Object ¹	Parish Amount ²	Other Amounts ³	In-Kind (Including Food Bank)	Total
Client Supplies	10,000	7,000	5,000	22,000.00
Equipment for Client Use	15,000			15,000.00
Client Furnishings	15,000	5,000		20,000.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
Additional Line Items Total (from attachment)				0.00
Total	40,000.00	12,000.00	5,000.00	57,000

Click here to attach a file for any additional funding line items not listed above <u>and</u> for any required detailed listings (see notes below).

¹ If funding tuition for low-income persons to attend your program, please provide a detailed listing of the items covered by the tuition.

² Items to be charged to Caddo Parish funds must be listed in detail; a general program name is not acceptable as a budget item.

³ Provide a detailed listing of the funding source for other amounts.

AFFIDAVIT

I hereby certify that the information provided in this application and all accompanying forms is true and accurate as of the date of completion.

Signature:	Clivista Pazzaglia
Title:	Executive Director
Date:	7/21/2023



CHECKLIST OF REQUIRED DOCUMENTS

$\overline{\mathbf{X}}$	Guidelines for Appropriation Applications			
X	Application			
\overline{X}	Proposal Narrative (See application outline on pages 6-7)			
$\overline{\mathbf{x}}$	Attachment A: Contact Information			
\overline{X}	Attachment B: Project Timeline			
$\overline{\mathbf{X}}$	Attachment C: A	Appropriation Budget Form		
\overline{X}	Affidavit			
	* Economic Impact Study (required for all applications with Economic Development purpose)			
\sqrt{X}	Copy of Certificate of Good Standing with State of Louisiana			
×	Copy of current IRS 501(c)(3) tax exempt statement indicating that the entity requesting funding is not a private foundation			
	Explanation of any changes in your IRS status (if applicable)			
	Other supporting documents (if applicable)			
FOR OFFICIAL USE ONLY				
Date Receiv	ed:	Application Complete: Yes No	☐ Saved to File	
Date Reviewed:		Reviewed by:	□ Updated Tracking	