

PROGRESSIVE LIFE CENTER

FY22 BUILDING BLOCKS DC (BBDC)

SUMMER MINI-GRANT APPLICATION

Important Guidelines

1. One application will be accepted per applicant. Only completed applications will be considered.
2. Applications can be submitted at any time by email to applications@plcntu.org. DO NOT mail applications. The only document to submit is this application form, nothing else will be accepted. **ALL applications are due by 5pm on Thursday, June 30th. NO applications will be accepted after this time.**
3. Award notifications will be made **by Friday, July 29th** by email. Thirty-Five (35) grants will be awarded.
4. Projects can be implemented starting Monday, August 8, 2022, and must conclude by Friday, September 30, 2022.
5. Virtual technical assistance sessions will be held on **Tuesday, June 14th from 6pm-7pm** and **Thursday, June 16th from 1pm-2pm**. To attend this session virtually, send a request to applications@plcntu.org and include "Request to Attend Virtual Session" in the subject line. Please specify the date of the session you want to attend. All requests must be received **by 12pm on Tuesday, June 14th**. A link will be sent no later than one hour leading up to the session. Attendance at the sessions is NOT mandatory to apply. The sessions will be recorded and posted on the PLC website within 24 hours.

INTRODUCTION

This Mini-Grant Application announces Progressive Life Center (PLC) in coordination with the Office of Gun Violence Prevention (OGVP) and the Department of Youth Rehabilitation Services (DYRS) intention to invest in the community to provide supports and services. PLC seeks community members or organizations to propose innovative programming or activities to support reductions in gun violence for District of Columbia communities. PLC encourages applicants with unique proposal ideas that promote neighborhood enhancement and rehabilitation as we seek to expand supports and services provided to our communities.

SECTION 1: CONTACT INFORMATION

Primary Contact Person:	Secondary Contact Person:
Phone:	Phone:
Email:	Email:
Mailing Address:	Mailing Address:
Neighborhood (s) to be served:	
Have you received a mini grant in the past? If so, when:	

****Please use an email that is checked regularly.** If an applicant does not have an email address that is

checked regularly, please provide the best possible contact phone number:

Phone:

Does the organization have a 501(c)(3) status? (Note: Organizations are not required to have this status to receive a grant. If status is pending, please check box.)

Yes

No

Pending

SECTION 2: PROJECT INFORMATION

Name of Project:	
Neighborhood(s) where project will take place (list all):	
Date(s) of Project (if multiple, list all):	
Event Time:	
Amount Requested (up to \$5,000):	

1. Does this project or event require a permit, special clearance/permission? (ex. street closure permit, park permit, clearance from a principal or community center director, structural work permit, etc.)

Yes

Type of permit / clearance required

No

2. Please identify the location this project will take place

Name

SECTION 3: PROJECT DESCRIPTION

Describe how your proposal aligns with the goals and objectives of this grant. If your proposal consists of separate/different events, please provide the requested information for each.

Choose one or more categories that best describes your project:

Community Wealth

- Skills Building
- Leadership Development
- Community Cohesion & Engagement
- Providing support of basic needs

Community Revitalization

- Community organizing activities
- Neighborhood outreach
- Providing activities in a safe space
- Murals, block cleaning, community gardens

Community Healing

- Community Responses to Violence Restorative Justice Supports
- Direct intervention activities
- Healing/Mental Health Wellness

A. Description

1. Describe the components of your proposed project that directly support the category(s) selected.

2. Describe the community you hope to reach?

3. List three (3) goals for this project? What do you hope to accomplish?

4. Why do you feel your project is necessary?

5. Provide a plan to complete the project (tasks, steps that demonstrate the how project will be facilitated)

B. Impact

1. What impact will the project have on the participants and community as a whole?

2. What do you anticipate will be key takeaways at the completion of this project?

3. How will the project help the community reduce gun violence?

c. Coordination and Planning (Demonstrate how you will implement the project).

1. How will you promote and gain community support for the project?

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2. How many staff/volunteers will assist with this project?

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3. Create a work plan and timeline of tasks needed to complete this project successfully.

Task (describe if necessary)	Completion Date

4. List your community partnerships for this project and their expected roles.

Partner	Expected Roles

D. Budget

Budget must be aligned with the proposal described above. Note: All budgeted items will be reviewed and assessed during the evaluation of your proposal. Be as accurate as possible. Donated items may be reflected on this budget as well.

Item (short description)	Cost per item	Quantity	Total

SECTION 4: GENERAL INFORMATION

1. How did you hear about this grant?

Progressive Life Center

Family Success Centers

OGVP Staff

DYRS Staff

Community Event

Community Based Organization

Friend or Community Member

Other:

******Congratulations, you have completed the application!!******

******Please note submission of an application does not guarantee funding. ******
 ****All complete applications will be reviewed by a panel of reviewers****
 ****Please send questions to applications@plcntu.org. Questions will be accepted until 5pm on Thursday, June 23rd and posted on the PLC website on Friday, June 24th ****

All awarded grantees MUST submit proof of expenditures totaling the amount awarded no later than Friday, October 7th, 2022