

City of San Marcos Human Services Grants FY2025 Applicant Instructions

The City of San Marcos allocates approximately \$550,000 from the City's general fund annually to assist Human Service Agencies. One agency may request funding for multiple programs. A separate Application and program-specific attachments must be submitted for each program for which funding is requested. Please follow the instructions below.

FUNDING REQUIREMENTS:

Funding is for calendar year 2025. Funding is provided on a reimbursement basis except in cases where the program simply cannot function without receiving funding up front.

- 1. Program must have measurable outcomes.
- 2. Funding must be spent on the program that was approved. Proof of expenditures will be required when requesting reimbursement.
- 3. Agency or Organization:
 - a. Must be a Human Services Agency as defined below:
 - A human services agency is an organization that seeks to improve the quality of their clients' lives by providing, facilitating, or recommending support for an array of basic social, physical health, housing, and mental health services to needy clients in the community. (From HSAB Bylaws, Article VIII)
 - b. Must be overseen by a volunteer Board of Directors.
 - c. Must execute an agency agreement with the City of San Marcos.
 - d. Must agree to undergo periodic program evaluations by the Human Services Advisory Board or City of San Marcos staff.
- 4. Funding Restrictions:
 - a. Funding must be spent on San Marcos residents, except for school-based programs, in which case it may be spent within the San Marcos Consolidated Independent School District boundary.
 - b. Funding requested cannot be more than 50% of the total funding for the agency.
 - c. Funding cannot be used to fund more than 20% of a full time position.
 - d. Funding cannot be allocated to brand new agencies. Agency must have been in existence for at least 2 years. (This can include serving communities other than San Marcos.)
 - e. Final Performance Report for 2023 funding must be included with the application. If this report has not been submitted by the first discussion meeting of the HSAB (currently scheduled for October 24, 2024) this application will not be considered for 2025 funding.

SUBMISSION:

One electronic copy of the Human Services Funding Application, Questionnaire, and all attachments must be emailed to cgriffith@sanmarcostx.gov by 5:00 p.m. on Monday, July 29, 2024. Late applications are not accepted.

Submitting a complete application does not guarantee that your request will be funded. Funding allocations are decided by the City Council, based on recommendations by the Human Services Advisory Board.

For more information: Carol Griffith, Housing and Community Development Manager

512.393.8147 cgriffith@sanmarcostx.gov (Email is preferred.) https://sanmarcostx.gov/3051/City-Human-Services-Grants

PRESENTATIONS:

Beginning in September and continuing into October, six applicants will present to the Human Services Advisory Board at each weekly meeting, dates to be determined. All applicants will be contacted to schedule their presentation date.

Presentations will be no more than five minutes, followed by a ten minute question and answer session.

Presentation content CAN repeat information included in the application. Please provide examples of the program proposed for funding in action, either from the agency's past successes with the program or, if the program is new, specific examples of this program's success in other cities. Demonstrate what this funding will accomplish for San Marcos.

The City of San Marcos is committed to compliance with the Americans with Disabilities Act. Reasonable modifications and equal access to communications will be provided upon request. If requiring Sign Language Interpreters or alternative formats, please give notice at least 2 days (48 hours) before the meeting date. Individuals who require auxiliary aids and services for this meeting should contact the City of San Marcos ADA Coordinator at 512-393-8000 (voice) or call Texas Relay Service (TRS) by dialing 7-1-1. Requests can also be faxed to 855-461-6674 or sent by e-mail to ADArequest@sanmarcostx.gov.

TIMELINE:

Optional Applicant Workshop	4:00 pm Thursday, June 27, 2024 This will be a virtual meeting. To view the meeting and participate please go to https://sanmarcostx.gov/3051/City-Human-Services-Grants for a link on the day of the meeting. Se habla Español.
Applications Due	5:00 pm on Monday, July 29, 2024 Email to cgriffith@sanmarcostx.gov
Presentations to the Human Services Advisory Board	August, September, October Six applicants will present to the Board each week
Council Consideration	December 3, 2024, Board Recommendations will be presented, and City Council will consider the final decision on funding allocations
Contracts Executed	December, 2024 or January, 2025 Funding is for January 2025- December 2025
Reporting	Quarterly Performance Reports are due on the last day of the month following the quarter

CHECKLIST OF REQUIRED ATTACHMENTS

API	PLICATION				
	Completed and signed application				
	Final Performance Report for 2023 Funding				
BU	BUDGETS				
	Agency budget for current fiscal year				
	Agency budget proposed for next fiscal year				
	Program budget for current fiscal year				
	Program budget proposed for next fiscal year				
	NEW: Budget showing the proposed uses of HSAB funding				
ВО	ARD OF DIRECTORS INFORMATION				
	Board of Directors membership roster – NEW must include city of residence for each Board member				
	Board of Directors Meeting Attendance Record for the current fiscal year				
	Board of Directors membership criteria				
OR	GANIZATION INFORMATION				
	Organizational chart with names and titles of staff				
	Current IRS Form 990, pages 1 and 2 (not required for churches)				
	Non-discrimination policy statement				
	Latest audit or CPA signed review, if applicable				
	Policies and Procedures for the proposed Program, if available				
LET	TERS OF SUPPORT				
	Letters of support from members of the San Marcos Community (prefer minimum of 3)				

City of San Marcos Human Services Grants FY 2025 Application

I. SUMMARY INFORMATION

Please spell out organization name and program name completely, without acronyms.

Applicant Organization:					
Contact Name:	Telephone:				
Contact E-Mail Address:	Website:				
Mailing Address:					
San Marcos Service Address for this Program:					
Who is authorized to execute program documents? (Name, Title)					
		_			
Program Name:					
Amount of Funds Requested:					
What percentage of the cost of this program is requested a	as funding through this application?				

II. QUESTIONS

All questions must be answered. Please type your answers.

OVERVIEW

- 1. What is the agency's or organization's mission?
- 2. Briefly summarize the program for which funding is being requested and the services it provides.

COMMUNITY NEED AND JUSTIFICATION - 20 POINTS

- 1. Describe in detail the need for this program in San Marcos.
- 2. Has the need for this program been increasing in recent years?
- 3. Client Information

Definitions:

<u>Direct Client</u> - individuals or families immediately affected or personally served by the helping agency.

Questions:

- a. Describe the direct clients for this program.
- b. How is the program marketed to direct clients? How do you find these clients?
- c. Expected total annual unduplicated direct clients who are City of San Marcos residents:

IMPLEMENTATION - 15 POINTS

- 1. How exactly will these funds be used?
- 2. What specific, measurable outcomes or results do you hope to achieve with this program?
- 3. List the title of each position for which funding is requested and the activities associated with those positions.
- 4. If funding is not available at the requested amount, what is the minimum Human Services Grant funding needed to be able to run this program?

IMPACT AND COST EFFECTIVENESS - 25 POINTS

- 1. Programs can provide value by deeply impacting the lives of a few, with effects that may ripple through generations, or by providing smaller but meaningful impact to a larger group. Describe in detail the impact this program will have on the identified need and on San Marcos residents.
- 2. Discuss the amount of overhead compared to program costs.
- 3. Provide a brief description of other funding sources, volunteers, or in-kind donations that are expected to be used with this program.
- 4. What has your organization done in the past two years to raise different funding for this program?

COMMUNITY SUPPORT – 10 POINTS

- 1. Please submit 3-5 letters of reference that indicate strong local support for the program and the agency's ability to implement it as described in the application.
- 2. How is the Board of Directors selected?
- 3. How often does the Board meet?
- 4. What actions do Board members take to support the programs of the agency or organization?
- 5. How many volunteers does your agency or organization have and how many hours do they spend on the program requesting funding?

COUNCIL PRIORITIES - 30 POINTS

- 1. How long has this program served San Marcos residents? (10 points if at least 2 years)
- 2. Does the agency have an office in San Marcos? (10 points if yes)
- 3. Describe how this funding creates an increase in services or an increase in the number of people served. (10 points)

II. FUNDING RESTRICTIONS

By signing this application I certify the following to be true:

- 1. All Human Services Grant funding will be spent on San Marcos residents, except for school-based programs, in which case it may be spent within the San Marcos Consolidated Independent School District boundary.
- 2. Funding requested is not more than 50% of the total funding for the agency.
- 3. Funding will not be used to fund more than 20% of a full time position.
- 4. Agency has been in existence for at least 2 years. (This can include serving communities other than San Marcos.)

SUBMITTED AND APPROVED BY:				
Signature	Date	_		
Printed Name				
Title				

City of San Marcos Human Services Grants FY2025 EVALUATION CRITERIA

Applications will be evaluated based on, but not necessarily limited to the following criteria:

1. COMMUNITY NEED AND JUSTIFICATION: MAXIMUM OF 20 POINTS

The program will be evaluated on the documentation and justification of the need for the activity in the City of San Marcos.

2. IMPLEMENTATION: MAXIMUM OF 15 POINTS

The program will be evaluated on the following factors:

- The application demonstrates that resources needed to manage the proposed activity are available and ready.
- Applicant has clearly defined objectives focusing on results and measurable outcomes vs. only program activities descriptions and numbers served.
- Past performance of programs funded by Human Services Grants.

3. IMPACT AND COST EFFECTIVENESS: MAXIMUM OF 25 POINTS

The program will be evaluated on:

- amount of overhead compared to program costs
- impact on the identified need
- implementation costs compared to impact
- use of available resources (financial, staff, volunteer)
- Impact compared to other applicants

4. COMMUNITY SUPPORT: MAXIMUM OF 10 POINTS

The program will be evaluated on the following factors:

- Three to five letters of reference that indicate strong local support for the program and the agency's ability to implement it as described in the application.
- Evidence that volunteers play a vital role in the program or agency's operation.
- Evidence that board members are actively involved in and supportive of the agency

5. COUNCIL PRIORITIES: MAXIMUM OF 30 POINTS

- Program has served San Marcos residents at least 2 years. (10 points)
- Agency has an office in San Marcos. (10 points)
- HSAB funding creates an increase in services or an increase in the number of people served. (10 points)
- Completed 2023 Impact report due January 31, 2024, submitted on time. (If this report is not submitted by the first HSAB discussion meeting, currently scheduled for October 24, 2024, this program will not be considered for 2025 funding.)

City of San Marcos Human Services Grants FY2025 RISK ASSESSMENT CRITERIA

Risk Categories: 30 or higher = High, 15-29 = Moderate, 0 - 15 = Low

1. PROGRAM COMPLEXITY: MAXIMUM OF 15 POINTS

Description of program, size of dollar amount requested, requested funding as a percent of Total Program Budget

2. PROGRAM EXPERIENCE: MAXIMUM OF 10 POINTS

Recipient's prior experience with this size and type program

- 0-2 years = 10 points
- 3-5 years = 5 points
- 5 years = 0 points

3. OTHER FUNDING SUPPORT: MAXIMUM OF 10 POINTS

- City funds are greater than 50% of program funding = 10 points
- Other sources of funds indicated, but not committed = 5 points (0 if CPA statement* provided)
- Other funds committed = 0 points

4. CITY FUNDING EXPERIENCE: MAXIMUM OF 5 POINTS

- No prior City funding experience = 5 points
- With prior City funding experience = 0 points

5. Performance History: Maximum of 10 Points

- Outcomes that did not meet expectations = 10 points
- Poorly documented results = 5 points
- Met expectations and provided well documented results = 0 points

^{*}CPA statement that the entity has enough financial capacity to complete the project or program on a reimbursement basis