**VIP GRANTS PROPOSAL NARRATIVE TEMPLATE**

**VIP TRACK 1 (EXPANSION/ENHANCEMENT) APPLICANTS**

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| **Instructions: Applicants seeking** [**VIP Grant funding**](https://www.pccd.pa.gov/Funding/Documents/Funding%20Announcement%20Q-A%20PDFs/FY23-24%20VIP%20Competitive%20Grants%20Funding%20Announcement_Final.pdf) **under Track 1 (Expansion/Enhancement for Existing Programs) are required to complete and upload a Proposal Narrative as part of their online SurveyMonkey request form submission in order to be considered for funding.** This template provides the necessary elements that must be included in an applicant’s VIP Grants Track 1 Proposal Narrative. All sections are required. Submitted Proposal Narratives must be no more than 15-pages in length in total (12-point font, double-spaced, 1-inch margins). If needed, applicants can submit additional attachments and supporting content to complement their proposal. Note: The Budget Tables & Narrative will not count against the 15-page total; however, applicants should limit this information to no more than 3-pages (not including any Budget Tables). *(Applicants are strongly encouraged to follow the format and page limits as this may impact your application score.)*  The attachment must be submitted in either PDF or Word (DOC/DOCX) file formats using the designated section of the online SurveyMonkey request form. You may copy and paste the questions to use your own document format OR you can download this template to build your Proposal Narrative using this format. Please SAVE THIS DOCUMENT TO YOUR COMPUTER prior to uploading into SurveyMonkey. If your organization does not use Microsoft or Adobe software, applicants are encouraged to use Google Docs (or similar platforms) then export into a PDF or Word format for upload.  **Please Note:** As you work on completing this template, please ensure you are as detailed as possible in your responses as best you can given the page limit. The goal is to provide a comprehensive project plan as well as address requirements and any relevant priority criteria identified in the written funding announcement. |

1. **Organization Background.** Within this section, please provide the following:
   * A brief overview of your organization, when you were founded, what your organization does, and the individuals or communities you serve.
   * Describe your organization’s experience, current staffing, community support, and capabilities related to violence intervention or prevention programming, including the specific program that would be enhanced/expanded with VIP Grant funding.
   * Outline any key partners in your proposal or key individuals (staff, consultants, contractors, project partners, volunteers) involved in your organization’s efforts.

Click or tap here to enter text.

1. **Community Need.** Within this section, describe the location and need(s) of the proposed project’s geographic area(s)/communities and/or target population(s). This description should:

* Briefly describe the history and current state of violence within the community and geographic area(s) your organization’s program serves. Has community violence increased in recent years? If possible, include any data or sources that support your description.
* What type(s) of violence does your organization/program primarily focus on addressing (e.g., gun violence, group/gang violence, domestic violence) and why is this focus important to the community you serve?
* How does the proposed project’s design address the community need you previously described? How do the funds you are requesting contribute to the overarching goal of reducing gun and/or community violence within the places and/or populations your project would serve?

Click or tap here to enter text.

1. **Program Information.** Within this section, please provide the following:
   * Please provide a brief overview of the program you are seeking to expand or enhance, including its key activities and target population(s).
   * How long has your program been operating, and what progress or milestones have you achieved since it began?
   * Explain any partnerships or collaborations your program has with other organizations or agencies, and describe how these relationships support your program’s work.
   * Does your program serve individuals with highest risk for gun violence involvement (e.g., those most likely to shoot and/or be shot) through evidence-based community violence intervention (CVI) strategies? If so, state that and address how you reach this population.

Click or tap here to enter text.

1. **Program Expansion/Enhancement Details (Project Design).** Within this section, please provide the following information:

* Describe the specific ways in which you plan to expand or enhance your current program. What are the primary goals for this expansion/enhancement, and how will it benefit your target population(s)?
* How will grant funds support your expansion or enhancement efforts? Please outline specific uses of funds, such as staffing, program materials, participant/client supports, outreach/communications, data collection, etc.
* Provide a detailed description of the outreach, engagement, and referral process(es) your organization (or your partners) will use and/or the method(s) that will be used to make programming or services available and accessible for potential participants.
* Describe the steps you will take to implement the project, including the specific activities, the timeframes for those activities, and the person(s) responsible for the activity for the full length of the project (i.e., first three months, 3-6 months, 6-12 months, 12-18 months, 18-24 months, etc.).
* What steps will your organization take to ensure the expanded/enhanced program meets the goals set out in this proposal?
* How will your organization, partners, and the overall program stay accountable to the individuals and community you serve during this process?

Click or tap here to enter text.

1. **Program Impact and Evaluation.** Within this section, please provide the following:

* Describe what will change or be different (i.e., expected outcomes) because of the project’s activities in the short-, mid-, and longer-term.
* How many participants does your program currently serve on a monthly or annual basis and how do you expect this number to change with the proposed enhancement or expansion?
* Share any stories, case studies, or testimonials that illustrate the positive impact of your program on individuals or the broader community.
* ***Note:*** Applicants that have previously, or are currently, receiving funding from PCCD to support violence prevention/reduction efforts are required to describe the impact of those initiatives.

Click or tap here to enter text.

1. **Capacity for Program Expansion and Need for Funding.** In this section, applicants should address the following questions:

* What resources and strengths does your organization currently have that will support the successful enhancement or expansion of this program (e.g., staff expertise, community partnerships, funding stability, etc.)?
* What challenges or barriers do you anticipate as you work to expand or enhance your program, and how do you plan to address those challenges?
* What experience does your organization have in managing similar projects or funding opportunities?
* Why is grant funding necessary to support the proposed project activities? If requesting continuation funding, why is additional funding needed to continue services or programming? If not, how will this funding support new activities or expand/enhance current programming?

Click or tap here to enter text.

**TEMPLATE - BUDGET TABLES & NARRATIVE**

***(Budget Tables & Narrative Page Limit: 3 pages or less)***

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| **Instructions for Budget Estimates.** Please input your ‘best estimate’ costs by budget category, year, and total. Please provide a separate table per project partner/subrecipient (for example, if you are planning to use grant funds to support a partner organization, you will need to build a budget table for your organization as well as one for the partner organization describing the types of expenses that grant money would support). To add a new table, click anywhere in the table. Once you do, you will see the table selection symbol and can copy and paste the table.  The page limit is for each Budget Table(s) and related descriptions/justifications. The ‘Grant Total’ dollar amount should equal the total budget request in the SurveyMonkey form.\* If including project partner(s) as proposed subrecipients, the total of all agencies’ budgets cannot exceed the total budget request maximum (e.g., 50% of your organization’s actual operating expenditures for the period of 7/1/2023 to 6/30/2024 or $950,000, whichever is less).  This budget document must be filled out completely and accurately. Applicants are strongly encouraged to double check all entries. A brief description of what is included in the expenses by category is required. These expenses must be clearly justified on how they relate to the project. In your description, please also demonstrate how the amount of grant funds requested is commensurate with the scope of the proposal. |

**BUDGET TABLE – [Organization Name]**

**Project Dates:** Click or tap to enter a date. **to** Click or tap to enter a date.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **By Category** | **Year 1** | **Year 2** | **Year 3** | **Total** |
| **Personnel** | **$0** | **$0** | **$0** | **$0** |
| **Employee Benefits** | **$0** | **$0** | **$0** | **$0** |
| **Travel (Including Training)** | **$0** | **$0** | **$0** | **$0** |
| **Equipment** | **$0** | **$0** | **$0** | **$0** |
| **Supplies & Operating Expenses** | **$0** | **$0** | **$0** | **$0** |
| **Consultants** | **$0** | **$0** | **$0** | **$0** |
| **Other** | **$0** | **$0** | **$0** |  |
| **Total** | **$0** | **$0** | **$0** | **Grant Total**  **$0\*** |

**Proposed Budget Descriptions:** *Applicants should provide detailed descriptions of the activities, personnel, or expenses that make up the estimated costs included in the Budget Table above.*

* Personnel: Click or tap here to enter text.
* Employee Benefits: Click or tap here to enter text.
* Travel (Including Training): Click or tap here to enter text.
* Equipment: Click or tap here to enter text.
* Supplies & Operating Expenses: Click or tap here to enter text.
* Consultants: Click or tap here to enter text.
* Other: Click or tap here to enter text.

**Please Note:** The budget table and narrative are scored; expenses in this section should align with the activities described in your narrative.