



Wayne Metropolitan  
Community Action Agency  
Established 1971

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# Seeding Wayne County Grant 2023

## Application & Budget



### NOTE:

\*\*For personal reference ONLY.

\*\*Please submit all completed applications online at  
[https://caspio.wmcaa.us/orgs\\_portal/](https://caspio.wmcaa.us/orgs_portal/)

**Thank you for your interest in Wayne Metro's FY2022 Seeding Wayne County Grant Application!**

**Directions:** Please review the FY2022 Seeding Wayne County Grant Guidelines and complete this online application in its entirety. Please submit any questions to [seedinggrant@waynemetrol.org](mailto:seedinggrant@waynemetrol.org) by 5pm on Friday, December 17, 2022.

**Grant applications are due by 4:00 p.m. on Thursday, December 29, 2022. No late applications will be accepted. Incomplete applications will not be considered.**

## Section 1: Organization Information

### Organization

Name of Organization

Phone Number

Fax Number

Street Address

City

Zip Code

Website (If Applicable)

### Head of Organization

Name

Phone Number

Email

### Contact Person for Proposal

Name

Phone Number

Email

### Tax Status and Annual Operating Budget

Organization's Annual Operating Budget

Is your Organization a 501(c)(3)?

Please enter your Employer/Tax Identification number. You will need to upload your 501(c)(3) tax-exempt letter in the attachment upload section of this application.

You will need to include a copy of your fiduciary's 501(c)(3) tax exempt letter in the attachment upload section. Please enter the Fiduciary's Employer Identification/Tax Identification number below.

**Do you have liability insurance?**

If yes, you will need to **upload your Liability Insurance Certification** in the attachment upload section. In order to receive funding, you will be required to obtain liability insurance and add Wayne Metro as a certificate holder if awarded. Your organization will remain the policy holder during the grant period of April 1, 2023-August 31, 2023.

**Did your organization received Seeding Grant funds in 2022?**

**Did you receive a financial sponsorship from Wayne Metro in 2022?**

**How did you hear about the Seeding Wayne County Grant? \***

**If other, please specify:**

**Previous Seeding Grant (2022) Information:**

**Amount Received: \***

**Project Name: \***

**Purpose of Last Year's Project \***



Did you succeed in spending all of last year's grant money? If not, what were the challenges and what steps did you take to address those challenges? \*

  
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## Section 2: FY 2023 Seeding Wayne County Project Request

Project Name

Grant Amount Requested (Maximum \$8750)

What Wayne Metro impact area(s) will your project focus on? Your project may impact more than one focus area. Please check all that apply.

What Wayne Metro impact area will your project focus on? \*

Please provide a brief description of your project.

A large, empty rectangular box intended for the user to provide a brief description of their project.

**Provide a description of any previous experience with implementing a project of this kind.**

**Describe your experience with receiving and implementing grant funds.**

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**What day(s) of the week will your project be operating?**

**Monday**

**Tuesday**

**Wednesday**

**Thursday**

**Friday**

**Saturday**

**Sunday**

**What will be your project's hours of operation?**

**Address of where activities will take place:**

**Do you have permission to operate your project at this location?**

*Please note: You must have permission to use the premises where you will be conducting your project activities. Prior to award, you must provide Wayne Metro with proof that you are allowed to use the property by submitting an authorization form to our Grants Administration staff.*

**Does your project involve improvements to land or lots?**

**Does your organization own the property?**

*Please note: If you own the land, you are required to **attach a valid deed (must be in the name of the applicant organization)** in the document upload section. Failure to include the deed may result in your organization being declined for funding.*

**How many people do you plan to serve with this project during the grant period of March 23, 2022-August 31, 2022? Please use the demographics below and put "0" in any section that is not applicable to your project.**

**Children Under 18 years old**

**Young adults ages 18-24**



**Adults ages 25-64**

**Seniors 65 and older**

*Communities are organized by Wayne Metro CAA Regional Advisory Councils (RAC). All RAC communities are listed below. If awarded, a representative of your organization will be required to attend a minimum of two (2) RAC meetings during the period of April 1, 2022 through December 31, 2022.*

**RAC 1** (Harper Woods, Hamtramck, Highland Park, Grosse Pointe, Grosse Pointe Woods, Grosse Pointe Park, Grosse Pointe Farms, Grosse Pointe Shores)

**RAC 2** (Detroit Zip Codes: 48201, 48202, 48203, 48205, 48207, 48211, 48212, 48213, 48214, 48215, 48224, 48226, 48234)

**RAC 3** (Detroit Zip Codes: 48219, 48221, 48223, 48239, 48227, 48228, 48235, 48236, 48204, 48210, 48209, 48217, 48216, 48208, 48206)

**RAC 4** (Dearborn, Dearborn Heights, Garden City, Inkster, Livonia, Northville (City & Township), Plymouth (City & Township), Redford Township)

**RAC 5** (Belleville, Canton Township, Huron Township, Romulus, Sumpter Township, Van Buren Township, Wayne, Westland)

**RAC 6** (Allen Park, Brownstown Township, Ecorse, Flat Rock, Gibraltar, Grosse Ile, Lincoln Park, Melvindale, River Rouge, Riverview, Rockwood, Southgate, Taylor, Trenton, Woodhaven, Wyandotte)

**Please select the RAC region where your project will take place.**

## Section 3: Outcomes

**Directions:** Wayne Metro CAA's mission is to help people and communities become strong, healthy and thriving. Based on the impact area (Employment/Job Readiness, Health and Nutrition, Education, Neighborhood Improvements) you selected in Section 2, your project description and the mission of Wayne Metro CAA, please choose the project outcomes most applicable to your project.

**List at least three project activities you will conduct during the grant period to achieve your outcomes.**

1.

2.

3.

**How will you measure your project's success? Please check all that apply.**

Sign-in sheets / registration

Participant pre and post surveys

Client testimonials

Other

Since you selected "other" above, please explain how you will measure your project's success.

How will you use Seeding Grant funding to advance your mission?

## Section 4. Program Assistant Liaison (PAL)

The Program Assistant Liaison (PAL) Initiative is a relationship-based capacity building program of the Seeding Wayne County Grant. Organizations who are receiving Seeding funding for the first time are paired with a Wayne Metro Staff person- a "Program Assistant Liaison" (PAL). This is not mandatory for Legacy Grantees, however they will still have the opportunity to be paired with a PAL. The PAL will act as a collaborator, peer, support and brainstorming partner to the funded organizations. If awarded, organizations commit to spending at least five hours a month on PAL related activities which may include: meetings, site visits, working sessions, and goal setting activities.

I have read the description of the PAL Program and understand my participation is mandatory if awarded.

Do you wish to be paired with a PAL?

Check for Completion?

UPDATE

## Section 6: Attachments

**Directions:** All attachments must be submitted in order for your application to be reviewed.

IRS 501(c)(3) Designation  
Letter.

Financial Statement

Liability Insurance  
Certificate

Deed

Other

Other

Other

## Section 7: Certifications and Signature

Certification

By signing this application electronically, I certify that I am legally permitted to represent the organization and agree to abide by the terms of the Seeding Wayne County application guidelines. I further certify that the organization and its principles are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal, State or local department or agency

I also certify that:

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**We are a 501(c)(3) nonprofit organization and our IRS designation letter is included with the application or we are using a fiduciary and their 501(c)(3) letter is included.**

**The operating budget for my organization is less than \$250,000 and the appropriate financial statement is attached.**

**The proposed budget does not include any disallowable costs as listed on Section 5.**

**If funded, my organization has or will obtain liability insurance and add Wayne Metro CAA as a Certificate Holder on the organization's general liability insurance policy. My organization will remain the policy holder during the grant period of March 23, 2022 through August 31, 2022**

**If funded, my organization will send a representative to a minimum of two Regional Advisory Council meetings during the period of April 1 2022 through December 31, 2022.**

**If funded, documentation of client eligibility, documentation of expenditures, and report of outcomes will be provided to Wayne Metro no later than September 9, 2023.**

**If funded, all expenses will be incurred between March 23 , 2022 through August 31, 2022**

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**The target population served by this project will be at or below 200% of poverty.**

**Activities will serve low-income individuals and align with the budget.**

**Signature (Please type your name)**

**Date**

 

**Check for Completion?**

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## Seeding Wayne County Grant

### DISALLOWABLE Costs

NOTE: Funds can NOT support general agency overhead such as, but not limited to, the following disallowable items/costs:

- Accounting
- Advertising to solely promote the Organization
- Custodial, maintenance, or landscaping services (staff and contractual)
- Equipment exceeding \$500 per item
  - Any and all pieces of equipment purchased with these funds must cost no more than \$500 for each individual item
- Fundraising activities
- Gift cards and/or gas cards
  - This includes any type of gift card/visa card for clients OR staff/volunteers
- Salaries, benefits, or stipends for staff & volunteers
  - These funds can be used for instructor fees but not for staff/volunteers
- Insurance
  - General Liability insurance cannot be paid for or reimbursed with these funds
- Internet, telephone, or copy services
- Fees, including but not limited to: late, environmental, etc.
- Taxes, including but not limited to: sales, property, etc.
  - Please ensure when totalling invoices/receipts, taxes are not included as they will not be reimbursed
- Property rent or lease payments
- Repairs to homes and facilities
- Utilities, internet, telephone, or copy services
- Vehicle repairs or maintenance

Any questions regarding disallowable costs, please reach out via email at [seedinggrant@waynemetro.org](mailto:seedinggrant@waynemetro.org).

**PROJECT BUDGET FORM**

**Contract Period: April 1<sup>st</sup>, 2023- August 31<sup>st</sup>, 2023**

**Organization Name:**

Total Amount Requested: \$

**FUNDS MUST BE USED FOR DIRECT PROJECT SERVICES BENEFITING THE PROJECT.**

LINE ITEM	AMOUNT REQUESTED	DETAILS
<i>Example: City Bus Transportation</i>	\$500	<i>bus rental fees to transport children to field trips</i>

**TOTAL AMOUNT REQUESTED \$**