**2018 City of Madison SEED Grant Application  
Deadline: Monday, February 26, 2018 (4:30PM)**

**Submit to George Reistad, Food Policy Coordinator:** [**greistad@cityofmadison.com**](mailto:greistad@cityofmadison.com)

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| **COVER LETTER** (300 words or less) |
| Please provide a brief overview of your proposal which includes:   * How the project/program relates to food access in Madison and who is targeted/served * The amount of SEED Grant funding requested and how the funds will be used * Why SEED Grant funding is important to your project/program |

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| **PART I: APPLICANT INFORMATION** |
| Title of Proposal: |
| Amount Requested (max. $10,000): |
| Agency/Organization/Group Name (Please provide the full, legal business name): |
| Address: |
| Contact Person (Name): |
| Telephone number: |
| Email: |
| Is your group a 501 (c)(3)? ☐ YES ☐ NO |
| Is your group Incorporated under Chapter 181 Wisc. Stats.? ☐ YES ☐ NO |
| If no to above, do you have a fiscal agent? ☐ YES \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐ NO |
| **PART II: PROJECT DETAILS (20 POINTS)** |
| *The following questions are about the details of your project/program and your partners. We look to fund focused, innovative projects/programs around a variety of thematic areas. Please answer questions in no more than 150 words.* |
| 1. What is the proposed project/program and what does it seek to accomplish? |
| 2. Which thematic areas will the project/program address? (Check all that apply):   * Employment * Garden/farming * Education * Food pantries/emergency food assistance * Food recovery/waste reduction * Food business and entrepreneurship * Farmers markets/farm stands * Other (please describe): |
| 3. Who are you working with on this project/program? (e.g. funders, potential participants, other organizations or groups offering services in the same area, and/or governmental bodies) |
| **PART III: COMMUNITY IMPACT, RACIAL EQUITY, AND SOCIAL JUSTICE (30 POINTS)** |
| *The following questions are about who your project/program reaches and the potential impacts to individuals and communities (direct, indirect; intended, unintended). Priority is given to projects/programs serving neighborhoods identified as* [*Food Access Improvement*](https://www.cityofmadison.com/mayor/priorities/food/healthy-food-retail-underserved-neighborhoods/food-access-improvement-map) *focus areas and those that impact under-served/under represented communities in Madison. Please answer questions in no more than 150 words* |
| 4. What areas of Madison will the project/program serve? (Check all that apply):   * Specific neighborhood(s), please list: * General areas of Madison:   + South Madison   + East Madison   + North Madison   + West Madison * All of Madison * Dane County (outside Madison) * Outside Dane County * Other (please describe): |
| 5. Please describe how your project/program is serving this area? (e.g. project/program is working within a specific community center, etc) |
| 6. Who (individuals or groups), could be impacted by the issues related to this proposal? |
| 7. How have members of these communities been engaged with the proposed project/program and/or how do you plan on engaging them? |
| 8. Please explain the impacts to Communities of Color and/or low-income communities: |
| **PART IV: EVALUATION (20 POINTS)** |
| *The following section is about the specific goals of your program and how you will measure them to determine the progress/success of your program. We look for projects/programs with clear goals and ways to measure the progress towards those goals. Please answer questions in no more than 150 words* |
| 9. What are the goals of your program? These could be about the quantity (e.g. the number served) and quality (e.g. the number who achieve a positive outcome) of your program. |
| 10. How will you measure the progress towards your goals? Please list at least 3 specific measures and/or project benchmarks that will be used. Ideally these will relate to your program goals listed above. (*NOTE: these measures will be used in the SEED grant follow up evaluation form)* |
| **PART V: FINANCIAL NEED (25 POINTS)** |
| *The following questions are in regards to the use of SEED grant funds and overall project/program budget. We look for proposals that* *illustrate that SEED funding is essential to a project’s feasibility and success (particularly for a short-term funding gap or to help a project /program get off of the ground), where there is a demonstrated expectation that city funds will be matched by another source, and plans for going forward/program sustainability. Please answer questions in no more than 150 words* |
| 11. Please describe specifically how the funds from this grant would be used: |
| 12. SEED grants are often a crucial source of funding for organizations seeking to launch a project/program. Please outline if and how SEED funds are essential to making your project/program a reality: |
| 13. What other funding sources have you sought and/or received to support this project/program? Please describe if any other sources are matching funds contingent on securing city funds. |
| 14. SEED grants are intended to be one-time, one-year grants unless a clear expansion of a previously-funded proposal. How do you anticipate replacing city funds in the future? |

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| **BUDGET SUMMARY (5 POINTS)** | | | | |
| Budget Expenditures | Total Project Costs | Amount of City Dollars Requested | Amount of Other Revenues/In-Kind Support | Remaining Funding Gap (if any) |
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| **PERSONNEL CHART** | | |
| Title of Staff Position | F.T.E. \* | Proposed Hourly Wage^ |
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| **TOTAL** |  |  |

\*F.T E = Full Time Equivalent employee = 2080 hours = 1.00 F.T.E.

^Note:  All employees involved in programs receiving City of Madison funds must be paid the established Living Wage as required under Madison General Ordinance 4.20.  The Madison Living Wage for 2018 is $13.01 per hour.

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| **PART V: DISCLAIMER AND SIGNATURE** |
| *I certify that my answers are true and complete to the best of my knowledge.* |
| Signature: Date: |