

Form 1a

Mail original proposal to:
PLANNING AND COORDINATION
OKLAHOMA COMMISSION ON CHILDREN AND YOUTH
 500 N. Broadway Ave., Suite 300
 Oklahoma City, OK 73102

Request for Special Projects Funds

| | | | |
|-----------------------------|--------------------------------|---|--|
| Partnership Board Name | | Mailing Address (Street, City, Zip) | |
| Chairperson or Contact Name | Daytime telephone (Area / No.) | Email Address | |
| Project Title | | How was the need for the project identified? <input type="checkbox"/> Needs Assessment <input type="checkbox"/> Key Informant Survey <input type="checkbox"/> Community Data <input type="checkbox"/> Other | |
| Grant Request: \$ _____ | | Project Start Date: _____ | |
| Matching Funds: \$ _____ | | Project End Date: _____ | |

Problem Statement, Objectives, Outcomes and Program Plan

Please use addition pages as needed.

| |
|--|
| Problem Statement: |
| List and describe objectives/goals: 1. 2. 3. |
| List and describe desired outcomes: 1. 2. 3. |
| How will the desired outcomes be measured or assessed? 1. 2. 3. |
| List the steps in your program plan: 1. 2. 3. |

Partnership Organization and Verification Form

Each of the undersigned agrees to participate in this project and that the specified obligations and responsibilities in this project will be met.

FISCAL AGENT

| | |
|--|-----------------------------------|
| Organization's or Individual's Name and Contribution Description | FEI Number/Social Security Number |
| Address | Telephone (Area/No.) |

PARTICIPATING ORGANIZATION(S)

| | |
|--|----------------------|
| Organization's or Individual's Name and Contribution Description | Telephone (Area/No.) |
| Address (<i>Street, City, Zip</i>) | |
| Name, Title and <i>Signature</i> | |
| Organization's or Individual's Name and Contribution Description | Telephone (Area/No.) |
| Address (<i>Street, City, Zip</i>) | |
| Name, Title and <i>Signature</i> | |
| Organization's or Individual's Name and Contribution Description | Telephone (Area/No.) |
| Address (<i>Street, City, Zip</i>) | |
| Name, Title and <i>Signature</i> | |
| Organization's or Individual's Name and Contribution Description | Telephone (Area/No.) |
| Address (<i>Street, City, Zip</i>) | |
| Name, Title and <i>Signature</i> | |

Budget Summary

| Budget Category | Project Activity / Expenses | Request Amount | Matching Funds | Matching Fund Type & Source (i.e. monetary, service, supplies, in-kind) |
|---|-----------------------------|----------------|----------------|---|
| Staff (Position) | | | | |
| Program or Project (Name or Event) | | | | |
| Travel, i.e. mileage, lodging, meals | | | | |
| Materials/Supplies | | | | |
| Training / Conference (Name, date, and location) | | | | |
| TOTAL | | \$ | \$ | |

Scoring Sheet

Requests for special project funds will be evaluated on these criteria.

1. **Problem Statement** (5 points) page 1
This section will be evaluated on the applicant's ability to demonstrate the need for the project.
2. **Goals, Objectives and Outcomes** (20 points) page 1
The goals and objectives will be rated on their relevance to the problems identified by the applicant. Goals are expected to be realistically attainable during the program period. Outcomes should be stated in measurable terms (e.g., expanded the number of school based behavioral health professionals).
3. **Program Plan** (10 points) page 1
The Program Plan needs to directly relate to the proposed goals, objectives and outcomes; how it will address the needs identified in the problem statement and impact the target population. The applicant should provide a clear implementation plan of program activities, the timelines, work plan, outcomes, and desired impacts.
4. **Partnership** (10 points) page 2
This section will be rated on the basis of the described plan to collaborate effectively with other organizations. A partnership is critical to the successful outcome of this initiative.
5. **Budget** - (50 points) page 3
Budget must be reasonable and apply directly to attain the outcomes identified in the work plan. The budget plan is worth a total of 25 points. An additional 25 points will be awarded to applicants who have a 100% funding match (can include in kind donations).
6. **Systemic Issue Submission** – (5 points)
An extra 5 points will be awarded to boards who submit a completed Systemic Issue Survey by April 27, 2009.