



SOUTHEAST NEBRASKA RESPITE NETWORK

Fiscal Year 2012/2013

SPECIAL PROJECTS FUNDS Application Kit

Contact Information:

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SE Nebraska Respite Network
YWCA Lincoln
2620 O Street
Lincoln, NE 68510

RESPIRE NETWORK – SOUTHEAST AREA

Program Purpose: In 1999, the Nebraska legislature established the Nebraska LifeSpan Respite Program (LB 148). Based on this legislation, the Department of Health and Human Services established six LifeSpan Respite Services Areas to coordinate resources across Nebraska. The LifeSpan Respite Network was established to:

- a. Create a single point of contact within the Service Area to provide information and referral regarding respite resources.
- b. Increase the public's awareness of respite and provide community outreach by involving interested stakeholders and building on existing resources.
- c. Increase in access to respite resources by recruiting appropriate providers and promoting the expansion of respite services.
- d. Ensuring training is available for both consumers and providers by coordinating existing training resources and recruiting additional resources to meet the training needs across the lifespan.
- e. Implement ongoing evaluation of providers, caregivers, and the respite system to determine unmet needs.

2012/2013 Special Projects Funds Grant Guidelines

Amount Available: A total of \$20,000 is available for special projects.

Funding Period: Funds must be used for projects and activities before **December 31, 2013**

Funding Objective: Special project funds must be used to develop new respite resources or enhance existing ones within the Southeast Area.

Funding Eligibility and Limitations:

- a. Application must be from an agency or organization that supports the goals of the Nebraska Respite Network.
- b. Funds may be requested for personnel, consultants, suppliers, and operation costs directly related to the proposed project.
- c. Funds cannot be used for indirect costs.
- d. Funds shall not be used to replace or supplant any funds currently being used to support existing programs.

Grant Application Process:

All applications must be submitted to the Southeast Nebraska Respite Office at the YWCA Lincoln no later than 5:00 p.m. on **Friday, January 11, 2013** in order to be considered for funding.

Grant Timelines:

Submission Deadline:
January 11, 2013

Award Announcement Date:
February 1, 2013

Applicants will be sent a confirmation application receipt within one week of their receipt.

Applications will be reviewed by Grants Committee made up by members of the Southeast Nebraska Respite Network Advisory Committee.

Awards will be made based on the merit of the application and available funding at the time awards are made.

Criteria:

Each project that is considered for funding should meet the following criteria:

- a. Address the special project funding objective – to develop new or enhance existing respite resources in the Southeast Area.
- b. Benefits the community and its residents.
- c. Demonstrates a concrete plan of action.
- d. Provides a detailed budget and time line.
- e. Involves other community members and organizations.
- f. Displays adequate accountability and capacity.

Submission Requirements:

Applications must be typewritten and follow the exact application format provided for special project funds.

An original copy application must be submitted. Faxed or emailed copies will not be accepted. (Please submit 1 original and 3 complete sets of the grant application.)

Submission Deadline:

January 11, 2013

Submit to:

Misti McInteer
Southeast Nebraska Respite Network
YWCA Lincoln
2620 O Street
Lincoln, NE 68510
misti@ywcalincoln.org

RESPITE NETWORK - SOUTHEAST AREA

APPLICATION FOR SPECIAL PROJECT FUNDS

I. ORGANIZATIONAL INFORMATION

A. Organization Name _____

(List fiscal agent for collaborations)

B. Address/9-digit Zip Code _____

C. Website _____

D. Chief Executive Officer _____

D.1. Telephone number _____ D.2. Fax _____

D.3. Email address _____

E. Contact Person and Title _____

(If other than the Chief Executive)

E.1. Telephone number _____

E.2. Fax _____

E.3. Email address _____

F. Purpose of Request:

A brief summary of the amount requested and its purpose.

G. Describe your agency and capacity to do this project.

A. FUNDING REQUEST – Please address the following – clarity and brevity are encouraged.

1. *Amount Requested*
2. *Objective* (State the objective(s) and the underlying need, problem or opportunity).
3. *Population Served* (Include as much information as possible, such as numbers, location, socio-economic status, ethnicity, gender, age, physical ability and language).
4. *Effect* (State your project Outcomes (state the anticipated effect on the need, problem or opportunity).
5. *Partnerships* (Discuss partnerships with other agencies, if applicable).
6. *Work Plan/Time Line* (Include key dates and actions (How will you accomplish your objectives?).
7. *Evaluation Plan* (State how proposed objective(s), activities and outcome(s) will be evaluated. (How will you know if it's successful?)
8. *Leadership* (List those who will direct and evaluate the project and their qualifications).

B. FINANCIAL PLAN

1. *Project Budget* (.List expenses, sources & amounts of income, including this request, and their Status).
2. *Development Plan* (Outline your plan for funding this proposal now and in the future)
3. *Timing* (.State when funding would be needed).

Submit To:	Misti McInteer Southeast Nebraska Respite Network YWCA Lincoln 2620 O Street Lincoln, NE 68510 misti@ywcalincoln.org
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