

2024 URJGENT GRANT APPLICATION REVIEW FORM

Thank you for your commitment to serve and support the residents of Santa Clara County. The following questions and information are required for the 2024 URJGENT Grant applications - [Click HERE for the 2024 Application](#) - [Click HERE to return the main URJGENT Grant webpage](#).

NOTE: There are FOUR sections of this section to complete:

- 1) Organization Identification & Verification Documents
- 2) Organization Eligibility (Requested Funding & County Funding History)
- 3) Application - Document Submission
- 4) Levine Act Forms - SIGNED for all applicable organizations

⇒ **Please plan on completing this application in one sitting as there is NOT a way to save an application that is in progress.** [Click HERE for application link](#)

⇒ **Failure to complete all sections will disqualify your application from being considered.**

APPLICATION DEADLINE: WED., APRIL 10, 2024 at 5:00 PM

You must submit your application through this online form. Additionally, as a potential recipient of a Board grant or sponsorship, you are required to do the following:

- Complete and sign the Levine Act Contractor Form - [APPLICANT LA FORM LINK](#)
- If you have a fiscal sponsor, please also have them complete, sign, and submit to you a separate Levine Act Contractor Form - [FISCAL AGENT LA FORM LINK](#)
- If you named any subcontractors in your grant/sponsorship proposal or have otherwise identified to our office any subcontractors that will perform work on the project or activities to be funded with the Board grant or sponsorship, you must also ensure the subcontractor completes, signs, and submits the Levine Act Subcontractor Form - [SUBCONTRACTORS LA FORM LINK](#). If you have not identified any subcontractors for this grant/sponsorship to our office, you can disregard the subcontractor forms.
- You are responsible for collecting and returning all completed Levine Act Identification Forms for your grant/sponsorship request. [Click HERE to learn more about the Levine Act](#)

⇒ If you need an accommodation to submit your form, please email grantsD3@bos.sccgov.org

⇒ If you have questions, [please visit our website](#) before submitting your grant application

Application key:

*Indicates required question

^Indicates answer with required follow-up

SECTION 1 OF 4

ORGANIZATION IDENTIFICATION

Name of Organization*

Organization Address*

Name of Primary Contact*

(This is the person who is tasked with communicating with District 3 and County Staff):

Primary Contact Email Address*

Primary Contact Direct Phone Number*

If you use a fiscal agent, please indicate the name below*

Please provide 501(c)3 number* [*Upload document*]

(or provide fiscal agent's if applicable)

Please upload supporting documents of 501(c)3 status (e.g. IRS determination letter)* [*Upload document*]

Please upload proof of certificate of status of good standing with the California Secretary of State (or provide fiscal agent's if applicable)* [*Upload document*]

[You may check your organization's status HERE](#)

SECTION 2 OF 4

ORGANIZATION ELIGIBILITY

Requested Funding & County Funding History - The amount of funding that your organization can apply for is determined by the size of your annual budget. Please note the eligibility requirements here:

Tier One

- \$5,000 Microgrants- Annual budget of no more than \$100,000

Tier Two

- \$15,000 Grants- Annual budget of no more than \$250,000

Tier Three

- \$25,000 Grants- Annual budget of no more than \$500,000

NOTE: Please read instructions for submission carefully as there are different application requirements for different grant tiers. Applicants may be awarded funding amounts that are lower than what was requested initially. If you have questions, [please visit our website](#) before submitting your grant application.

Which grant tier are you applying for?*

- Tier One - \$5,000 Microgrants
- Tier Two - \$15,000 Grants
- Tier Three - \$25,000 Grants
- Other:

If the answer to the prior question was "OTHER", please explain other funding request below (e.g. organization with an annual budget greater than \$500,000):

What is the geographic reach of the program or activity to be funded?*

(check all that apply)

[Please reference the County Supervisorial District Map if needed - Link](#)

- Countywide
- District 1
- District 2
- District 3
- District 4
- District 5

What is the proposed duration for the program or activities (specify dates)?*

Is this a multi-year request?*

- Yes
- No

Which Board of Supervisors strategic priorities, if any, are supported by the proposed programs or activities? (check all that apply)*

- Expanding access to behavioral health services
- Increasing access to housing
- Strengthening community safety and reforming the criminal justice system
- Enhancing support for children and families

- Promoting sustainability
- Other:

Is the Entity/Individual a current or past recipient of County funding for the same or similar programs/activities?*

- Yes ^please answer the next question
- No

^If "YES", please provide dates, type of funding, and amounts below:

Does the Entity/Individual have current contracts, grant agreements, sponsorships, or other funding from the County?*

- Yes ^please describe how in the next question
- No

^If YES, please provide dates, type of funding and amount. Also, how would the proposed programs or activities proposed to be funded here be distinguishable?

Would the Entity/Individual be able to effectively use partial funding for the proposed program or activities if the full amount requested is not awarded?*

- Yes ^please answer follow-up requirement
- No

^If "YES", please describe how:

Have you requested funding for your organization for this proposal from any other County Supervisor?*

- Yes ^please answer follow-up requirement
- No

^If the answer to the prior question was "YES," please identify the Supervisor(s) from whom you have requested funding:

SECTION 3 OF 4

APPLICATION - DOCUMENT SUBMISSION

In this section, please upload all the required documents that are indicated below. All applications that are submitted are required to meet the following formatting.

Application Format

Document must be:

- Times New Roman
- Size 12 font
- Double-spaced
- One inch margins
- PDF format
- Titled: “[Tier] [Organization name] Application”

There will be different page limits for the different tiers because the amount of information requested will be greater for Tiers that request more funding. But FOR ALL TIERS, all applicants must provide the following information:

- A. Introductory Narrative of the Organization (maximum two pages);
- B. Project Proposal or Project Narrative (maximum three pages);
- C. Potential impacts on (1) youth, meaning under 18 years old, (2) seniors, meaning 65 and older, and (3) sustainability (maximum two page);
- D. Social media handles/website (if any);
- E. Primary contacts and references; and
- F. Verification under penalty of perjury that the applicant meets the eligibility requirements to apply for the grants, including annual budget caps.

Page Caps

Tier One - \$5,000 Microgrants

- Applications will be no more than three (3) pages

Tier Two - \$15,000 Grants

- Applications will be no more than five (5) pages, and must include a proposal budget to show how grant funds will be used and if the proposal is being funded from other Santa Clara County sources. Applicants will also commit to submitting a year-end report.

Tier Three - \$25,000 Grants

- Applications will be no more than seven (7) pages and must include a budget showing how the grant funds will be used and if there the proposal is being funded from other Santa Clara County sources. Applicants will commit to submitting a year-end report.

Please note that the maximum page count for each section must be tailored by the applicant to fit into the page caps that are imposed in each tier. For example, though the maximum page count for each section is greater than the maximum number of pages allowed for a Tier One

Microgrant, the applicant is empowered to determine how to use the space that they are allotted to supply all of the information that is required in the application.

For Tier Two and Tier Three applicants, your proposed budget should be included with the one (1) file you upload.

Cover pages, photos, information brochures, and other supplemental information will NOT count against maximum page counts.

Supplemental Documents

- Please upload all supplemental information in PDF format as well, in ONE file. Title the file as “[Tier] [Organization] Application Supplemental”

Non-Qualified/Other Category Applications

- If you do not qualify for URJGENT Grants, you may still submit a request for funding by uploading your documents above
- Please conform to all other funding requirements to the Tier Three status
- If you are applying for "other funding request," submit the same information required for a Tier Three Grant
- Please title your document “Non-qualified [Organization] Application”

If you have questions, [please visit our website](#) before submitting your grant application.

Which policy priority is your application addressing?*

For a description of the policy areas, [please visit the website](#). If you are not able to check off at least one of these boxes, your application will not be considered (Check all that apply)

- Unhoused
- Racial Justice
- Green
- Equity
- Neighborhoods
- Transparency

Please upload your application AND supporting documentation here [*Upload document*]

SECTION 4 of 4

SIGNED LEVINE ACT FORMS - REQUIRED

California Government Code section 84308 (“Levine Act”) requires a party to a proceeding involving a license, permit, or other entitlement, including all contracts other than competitively bid, labor, or personal employment contracts, to disclose any contribution of more than \$250 that the party (or their agent) has made to a member of the Board of Supervisors or any Other Elected County Officer within the prior 12 months. The Levine Act also prohibits, during the proceeding and for 12 months following a final decision, a party (or their agent) from making a contribution of more than \$250 to any member of the Board of Supervisors or to any Other Elected County Officer who may participate in the proceeding. [Click HERE for more information.](#)

⇒ Applicants **MUST** complete and sign the Levine Act Contractor Form **AND** so **MUST** the fiscal agent/sponsor **AND/OR** any subcontractors in your grant/sponsorship proposal or have otherwise identified to our office any subcontractors that will perform work on the project or activities to be funded by the grant.

⇒ **Applicants are responsible for collecting and returning all completed Levine Act Identification Forms for your grant/sponsorship request.**

Please upload your (Applicant) Levine Act Form*

⇒ **LEVINE ACT FORM - APPLICANTS (IDENTIFICATION OF SUBCONTRACTORS & AGENTS) - PDF** [LINK](#)

Please upload Fiscal Agent Levine Act Form(s) (if applicable)

⇒ **LEVINE ACT FORM - FISCAL AGENT (IDENTIFICATION OF SUBCONTRACTORS & AGENTS) - PDF** [LINK](#)

Please upload Contractors/Subcontractors Levine Act Form(s) (If applicable)

⇒ **LEVINE ACT FORM - SUBCONTRACTORS (IDENTIFICATION OF AGENTS) - PDF** [LINK](#)