

Instruction Sheet to accompany Agency Application
United Way of Loudon County
www.unitedwayloudoncounty.org
April 1, 2024 – March 31, 2025 Funding Year

General Information

- Please note that you must complete a separate application for **each program** for which you are requesting funding.
- **All proposals are due by Thursday, February 29, 2024 at 5 p.m. No late proposals will be accepted.** If you believe that you cannot turn the application in on the 29th, please make arrangements to submit it earlier.
- Definitions and examples of focus areas(also refer to Section 1):
 - **Education**-help children, youth, and adults achieve their potential by promoting school readiness, academic achievement, productive & engaged youth, and adult literacy & life skills. An example would be a program that seeks to improve a child's achievements in school or promote school readiness for a young child. UWLC focus is toward programs that will increase the graduation rate.
 - **Income**-promotes financial stability and independence by providing stable employment & access to job skills training, maximized income, increased savings, and financial assets for long term stability. An example would be a program that provides job skills training to individuals in order to improve their income and build assets.
 - **Health**-create opportunities to improve people's health such as maternal health & infant well-being, healthy lifestyle behaviors, health care coverage & preventive health and mental health. An example would be a program that provides medical services to low income working persons.
 - **Basic Needs**-resources given through human service networks providing emergency services, food & clothing, critical support services, and shelter & utilities. An example would be a program that provides shelter and emergency services to clients in crisis.
- **Please email the completed application and checklist as a .pdf to: sipek@unitedwayloudoncounty.org**

Funding Application

Cover Sheet (SECTION 2)

- Please remember that applications are not valid without the signatures of the board president/chair and the Director or Executive Director.
- Be sure to choose the focus area (education, health, income, or basic needs) that most closely describes your program. If you believe that your

program fits more than one, please select the focus area that reflects the major part of the work. If you are still unsure, please contact Darcy Welch, UWLC Executive Director, welchd@unitedwayloudoncounty.org or (865) 582-4082.

- **Make sure that the contact phone number and email address is the primary number for whoever can answer questions about the application and for accessing information on a daily basis.**
- **If the information for client services is different than the one for the contact person, please provide that phone number and email also.**

Program Overview & Outcome Measurement

Program Overview (SECTION 3)

- Please provide information as requested. Review questions prior to responding.
- Please keep in mind that results/outcomes and indicators should be formed thoughtfully in a way that can best measure the success of the program on clients’ lives. **If you already report your outcomes please provide a copy.** Just note in the section that a copy of the program outcomes are attached. **Question #5.**
- Be sure to include the appropriate number of outcomes, **question #5B,** for your program based on the level of funding that you are requesting for 2023-2024. The table below can be used as a reference.
- **On question #12 (or # 7 F&R 3A),** please make sure the number you give reflects the number of **Loudon County people served only.** **Do not include** other counties data.

Question #19 (or #11 F&R 3A), Success Story: Please provide a success story from **2023.** This story may be used in the county brochure with agency and client permission. **This MUST be included for consideration.**

- Be sure to include the appropriate number of outcomes, **question #5,** for your program based on the level of funding you are requesting for 2023-2024. The table below can be used as a reference.

| Level of UW funding for the program | Number of indicators required |
|-------------------------------------|-------------------------------|
| \$0-4,999 | 3 |
| \$5,000-9,999 | 4 |
| \$10,000-25,000 | 5 |
| | |

Section 4: Program Budget Form

- Refer to the “Chart of Accounts,” (SECTION 9), for detailed line item definitions.

Section 5: Composite Agency Budget Form

- Refer to the “Chart of Accounts,” (SECTION 9), for detailed line item definitions.

Budget Explanations (SECTION 6)

- Please provide a narrative explanation of all program budget line items (both expense and revenue) that increase/decrease in excess of 10%. **(Note: A variance in excess of 10% but under \$500 does NOT require an explanation).**

Section 7: Checklist for Agencies Submitting United Way Requests

- Red Highlighted items **must** be supplied. *If not provided the application will not be accepted or review and funding will be delayed.*
- Please mark each item included with your proposal on the checklist with an X.
- Note that you may bring extra materials/brochures to the **March** reviews.
- **IMPORTANT: Please check the expiration date on your State of TN Solicitation Permit and make sure it is current.**

Email completed Applications as a .pdf to:

sipek@unitedwayloudoncounty.org