

Received By:

Date _____ Time _____ Initials _____

APPLICATION FOR FUNDING

Emergency Food and Shelter Program Phase 29 FY 2011

Please Check One:

Non Profit Agency*** _____ *** A roster of your volunteer board should be attached with application

Unit of Government _____

Agency Legal Name: _____

Agency Mailing Address: _____

Agency Physical Address: _____

Address Where Services will be Provided: _____

Phone: _____ FAX: _____ Email: _____

Agency Web Site : _____

Agency FEIN Number : _____ DUNS Number : _____

Agency Contact Person: _____ Agency Contact Number: _____

Total Funding Requested: _____ Units of Service: _____

Number of Families and/or individuals to be Served: Families: _____

Individuals: _____

Budget Narrative: Describe expenditures by line item as listed on your budget sheet (see below):

Description of Proposed Services. (Please use second sheet if necessary)

Has your agency been debarred or suspended from receiving funds or doing business with the federal government? _____ Yes _____ No

Signature of Person Authorized to Submit Application

Date

Typed Name and Title

DEADLINE FOR APPLICATION SUBMITTAL IS FRIDAY, SEPTEMBER 2, 2011 @ 5:00 P.M.

**EMERGENCY FOOD AND SHELTER PROGRAM, Phase 29, FY 2011
PROPOSED COSTS BUDGET SHEET**

Organization: _____
Name of organization/applicant

Please list your organization's proposed eligible services by line item. Indicate # of families/individuals to be served, # of units of service, and costs to deliver services. Please also indicate in the "# to be served" column an "F" if service recipients are families or an "I" if service recipients are individuals. Your organization could serve an individual more than once in certain circumstances (for instance a meal, once a day for a month). Cost per unit of service would be your estimated cost (not to exceed allowable maximum amounts) per each unit of service (i.e. per diem rate for food, a month's utility payment, rent for a month, etc.) For planning purposes, those agencies that will be requesting funds for mass shelter meals should plan those meals at a rate of \$2.00 per meal. Those planning to request funds for mass overnight shelter expenses should plan a per diem rate of \$7.50 per day. These are the rates approved last year by the FEMA Board and are subject to change. Multiply "# units" by the cost/unit of service to determine total cost per service. If you anticipate providing multiple services, indicate each service as a separate line. Grand total recipients to be served and total cost.

Service (Rent, food, utilities, other allowable service)	# F or I served	# Units	Cost /Unit of Service	Total Cost of Service
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TOTALS			N/A	