



PROGRESSIVE LIFE CENTER

FY23 BUILDING BLOCKS DC (BBDC)

SPRING MINI-GRANT APPLICATION

Important Guidelines

1. One application will be accepted per applicant. Only completed applications will be considered.
2. Applications can be submitted at any time up to the deadline through this email address: applications@plcntu.org. The only information to submit is this application form, nothing else will be accepted. **ALL applications are due by 5pm on Friday, March 10th, 2023. NO applications will be accepted after this time.**
3. Award notifications will be made **by Friday, April 14th**, by email. Twenty-five (25) grants will be awarded. Please note, there will be another competition for summer grants.
4. Projects can be implemented as early as Monday, April 24th, 2023, but must complete no later than Sunday, June 11th, 2023.
5. A virtual technical assistance session will be held on **Tuesday, February 28th, 2023, from 6pm-7pm**. To attend this session virtually, send a request to applications@plcntu.org and include "Request to Attend Virtual Session" in the subject line. A link will be sent no later than one hour leading up to the session. Attendance at the sessions is NOT mandatory to apply. The sessions will be recorded and posted on the PLC website within 24 hours.

INTRODUCTION

This Mini-Grant Application announces Progressive Life Center (PLC) in coordination with the Office of Gun Violence Prevention (OGVP) and the Department of Youth Rehabilitation Services (DYRS) intention to invest in the community to provide supports and services. PLC seeks community members or organizations to propose innovative programming or activities to support reductions in gun violence for District of Columbia communities. PLC encourages applicants with unique proposal ideas that promote neighborhood enhancement and rehabilitation as we seek to expand supports and services provided to our communities.

SECTION 1: CONTACT INFORMATION

Organization Name (if applicable):	
Primary Contact Person:	Secondary Contact Person:
Phone:	Phone:
Email:	Email:
Mailing Address:	Mailing Address:
Have you received a mini grant in the past? If so, when:	

****Please use an email that is checked regularly.** If an applicant does not have an email address that is checked regularly, please provide the best possible contact phone number:

SECTION 2: PROJECT INFORMATION

Name of Program:	
Ward(s) where program will take place (list all)	
Neighborhood(s) where project will take place (list all):	
Date(s) of program (if multiple, list all):	
Program/Event Time:	
Has a program/event space been secured (yes/no), if "yes" please identify:	
Amount Requested (up to \$5,000):	

SECTION 3: PROJECT DESCRIPTION

Describe how your proposal aligns with the goals and objectives of this grant. If your proposal consists of separate/different events, please provide the requested information for each.

Choose one or more categories that best describes your program:

Community Wealth

- Skills Building
- Leadership Development
- Community Cohesion &Engagement
- Providing support ofbasic needs

Community Revitalization

- Community organizing activities
- Neighborhood outreach
- Providing activities in a safespace
- Murals, block cleaning,community gardens

Community Healing

- Community Responses to Violence Restorative JusticeSupports
- Direct intervention activities
- Healing/Mental Health Wellness

A. Description

1. Describe the components of your proposed program that directly support the category(s) selected.

2. Describe the community you hope to reach.

3. List three (3) goals for this program. What do you hope to accomplish?

4. Why do you feel your program is necessary?

5. Provide a plan to complete the program (tasks, steps that demonstrate the how project will be facilitated).

B. Impact

1. What impact will the program have on the participants and community as a whole?

2. What do you anticipate will be key takeaways at the completion of this program?

3. How will the program help the community reduce gun violence?

c. **Coordination and Planning** (Demonstrate how you will implement the program).

1. How will you promote and gain community support for the program?

2. How many staff/volunteers will assist with this program?

3. Create a work plan and timeline of tasks needed to complete this program successfully.

Task (describe if necessary)	Completion Date

4. List your community partnerships for this program and their expected roles.

Partner	Expected Roles

D. Budget

Budget must be aligned with the proposal described above. Note: All budgeted items will be reviewed and assessed during the evaluation of your proposal. Be as accurate as possible. Donated items may be reflected on this budget as well.

Item (short description)	Cost per item	Quantity	Total

SECTION 4: GENERAL INFORMATION

1. How did you hear about this grant?
 Progressive Life Center
 Family Success Centers

OGVP Staff

DYRS Staff

Community Event

Community Based Organization

Friend or Community Member

Other:

******Congratulations, you have completed the application!!******

*******Please note submission of an application does not guarantee funding. *******

*******All complete applications will be reviewed by a panel of reviewers*******

*******Please send questions to applications@plctu.org. Questions will be accepted until 5pm on Thursday, March 2nd and posted on the PLC website by Friday, March 3rd*******

*******All awarded grantees MUST submit proof of expenditures totaling the amount awarded no later than Friday, June 16th, 2023*******

*******All awarded grantees will participate in site visits coordinated by OGVP and should be prepared to respond to data requests in the form of surveys and post grant meetings*******