GOVERNMENT OF THE
DISTRICT OF COLUMBIA
MURIEL BOWSER, MAYOR

FISCAL YEAR 2019 REQUEST FOR APPLICATIONS FORM

NEIGHBORHOOD BASED ACTIVITIES SMALL BUSINESS TECHNICAL ASSISTANCE PROGRAM

Issue Date: **July 16, 2018**

Closing Date: **4:00 p.m. EST August 13, 2018**

EQUAL HOUSING OPPORTUNITY

The District Department of Housing and Community Development pledges to foster the letter and spirit of the law for achieving equal housing opportunity in the District of Columbia.

LATE APPLICATIONS WILL NOT BE FORWARDED TO THE REVIEW PANEL.

This application is a Fillable PDF. The completed PDF and all required attachments must be emailed to nba.rfa@dc.gov.

Brian Kenner
Deputy Mayor for Planning and Economic Development

Polly Donaldson, Director
Department of Housing and Community Development

TABLE OF CONTENTS

Organization Overview and Application Confirmation 3
Proposed Service Areas 4
PART 1: Organizational and Financial Capacity 5
Staff Capacity (20 points) 5
Board Capacity (15 points) 6
Management and Financial Capacity (35 points) 8
Performance Capacity and Experience (30 points) 12
PART 2: Proposed Small Business Technical Assistance 17
Executive Summary (5 points) 17
Target Population and Marketing (15 points) 18
Proposed SBTA (35 points) 20
Proposed Grant Work Plan (25 points) 22
Proposed Budget (20 points) 23
FINAL INSTRUCTIONS AND APPLICATION CHECKLIST 25
Final Instructions 25
Application Checklist 25

ORGANIZATION OVERVIEW AND APPLICATION CONFIRMATION

Provide Basic Information About Your Organization			
Name of Organization			
Year Established			
Overall Organizational Service Area			
Primary Contact Person/Title			
Site Physical Address			
Website	https://		
Organization Mission			
Signature of Authorized Representative (staff)		**Date:**	____/_____/_____
Signature of Governing Board President or Chair		**Date:**	____/_____/_____

Proposed Service Areas

1. Please select the Ward(s) you propose to serve:

❒ Ward 1
❒ Ward 2
❒ Ward 3
❒ Ward 4
❒ Ward 5
❒ Ward 6
❒ Ward 7
❒ Ward 8

2. Please select the targeted commercial corridors you propose to serve:

❒ 7th Street – Georgia Avenue NW (Mount Vernon Square to Eastern Avenue)
❒ H Street NE (North Capitol Street to 17th Street NE)
❒ Benning Road NE and SE (Bladensburg Road to Southern Avenue)
❒ Martin Luther King Jr. Avenue SE + South Capitol Street (Good Hope Road to Southern Avenue)
❒ Pennsylvania Avenue SE (2nd Street SE to Southern Avenue)
❒ Minnesota Avenue NE and SE (Good Hope Road to Sheriff Road)
❒ Nannie Helen Burroughs Avenue NE (Minnesota Avenue to Eastern Avenue)
❒ Rhode Island Avenue NE (North Capitol Street to Eastern Avenue)
❒ North Capitol Street (Massachusetts Avenue to New Hampshire Avenue)
❒ Kennedy Street NW (North Capitol Street to Georgia Avenue)
❒ Martin Luther King Jr. Avenue SE (St. Elizabeth's East/Congress Heights)
❒ Other:_____

3. Please provide the address for the physical sites where you propose to deliver services on a regular basis.

PART 1: ORGANIZATIONAL AND FINANCIAL CAPACITY

In this section of the application we ask a number of questions on your organization's existing capacity and resources. This part of the Application is worth 100 points.

Staff Capacity (20 points)

1. Provide information about the key staff at your organization or your partners, who will have responsibility for this grant. Please ensure to provide an organizational chart in the required attachments that reflects your proposed key staff. If you are partnering with another organization to execute some of the grant activities, please include them in this table and include a letter of intent or Memorandum of Understanding in the required attachments. Please consider guidance in sections 2 and 3 of the RFA. [15 points]

Name	Title	Job Responsibilities As They Relate To The Grant	Years With Organization	Years of Experience/ Skill With Current Responsibilities

Name	Title	Job Responsibilities As They Relate To The Grant	Years With Organization	Years of Experience/ Skill With Current Responsibilities

2. Provide information on your organization's staff capacity over the last three years. Please consider section 2 in the RFA. [5 points]

Year→	2016	2017	2018
Number of Full Time Staff			
Number of Part-Time Staff			
Number of Staff Departures			

Board Capacity (15 points)

3. Provide information about your organization's Board of Directors. Please consider guidance in section 2 of the RFA. The Department strongly generally prefers that a majority of the organization's Board be stakeholders in the community of low- and moderate-income District households in one of three ways use the following letter code to indicate for each Board member:

   A – Indicates that the member is him/her-self a member of a low-/moderate-income District resident household;
   B – Indicates that the member owns or is a senior officer of private establishment and/or other institution located in and serving the District of Columbia's low-/moderate-income households; and/or
   C – Indicates that the member is a representative of a District neighborhood organization with a proven track record of serving low- and moderate-income residents. [5 points]

Name	Role	Home Address	Stakeholder representation	Profession	Affiliations	Length of Tenure (years)

4. Provide information to demonstrate that your Board possesses: (1) skills and/or experience related to community development, neighborhood revitalization; and (2) legal, business, and management skills required to manage Small Business Technical Assistance or Microenterprise Financing in partnership with the District government. As appropriate, describe key Board initiatives within the past three years that demonstrate these capabilities. *(Word limit 300)* [10 points]

Management and Financial Capacity (35 points)

5. Please provide the following financial information about your organization. [10 points]

Year→	**2016**	**2017**	**2018**
Annual Operating Budget			
Operations Surplus (deficit)			
Total Assets			
Net Assets			

6. Please provide information about your organization's major sources of funding (over $5,000) for the last three years (add rows as needed). Please consider guidance in section 2 of the RFA. [15 points]

2016		2017		2018	
Funder	**Amount**	**Funder**	**Amount**	**Funder**	**Amount**

2016		2017		2018	
Funder	**Amount**	**Funder**	**Amount**	**Funder**	**Amount**

7. Describe your organization's tools and processes for managing finances. Please consider guidance in section 2 of the RFA. *(Word limit: 500)* [10 points]

Performance Capacity and Experience (30 points)

8. Please list your organization's tools for tracking clients and program performance. (Word limit 500) [5 points]

9. Please describe how your organization uses the tools previously listed to track program performance and ensure the services you are providing meet your community's needs and organization's goals. *(Word limit 500)* [10 points]

10. Describe recent challenges faced by your organization and the process used to address those challenges. *(Word limit: 500)* [5 points]

11. Provide information about your organization's recent three activities, demonstrating success in implementing performance-based outcomes.[1] Highlight recent accomplishments related to the proposed services. Please consider guidance in section 2 of the RFA. [10 points]

Activity ONE (title):	
Partner Organizations:	
Budget:	
Target Population:	
Start/End Dates:	
Outcomes/Deliverable Products:	

Activity TWO (title):	
Partner Organizations:	
Budget:	
Target Population:	
Start/End Dates:	
Outcomes/Deliverable Products:	

Activity THREE (title):	
Partner Organizations:	
Budget:	
Target Population:	
Start/End Dates:	
Outcomes/Deliverable Products:	

12. Provide contact information for three references from funding sources or other entities who are well acquainted with your organization's ability to achieve positive outcomes within a budget and who are willing to provide detailed information about your organization's capacity and performance[2].

Organization ONE	
Point of Contact	
Phone Number	
Email Address	

[1] Activities listed should have start dates no earlier than 2013.
[2] DHCD reserves the right to act as its own reference (in addition to those listed) for any applicant.

Organization TWO	
Point of Contact	
Phone Number	
Email Address	

Organization THREE	
Point of Contact	
Phone Number	
Email Address	

PART 2: PROPOSED SMALL BUSINESS TECHNICAL ASSISTANCE

Use Part 2 to demonstrate both your knowledge of the need for this activity and your organization's ability to address those needs. This part of the Application is worth 100 points. Applicants are encouraged to consider the guidance in sections 3 and 4 of the RFA.

Executive Summary (5 points)

1. Provide an abstract/synopsis/summary of your proposal to provide SBTA services to district residents. Essentially, what is the quick pitch of: (a) who you are serving and why; (b) what you are providing them and how; and (c) how will that achieve the goals mentioned in the RFA? *(Word limit 500)* [5 points]

Target Population and Marketing (15 points)

2. Describe your organization's targeted commercial area. What are its greatest needs? Please reference any relevant data informing your assumptions. Please consider sections 3 and 4 of the RFA. Please also consider DHCD's Action Plan target areas, and as applicable, Great Streets, DC Office of Planning Initiatives and/or other District priorities for data to support the needs documented. Please refer to sections 3 of the RFA. *(Word limit 500)* [10 points]

3. Describe the methods you propose to use to market your services to potential business clients. Please consider DHCD's guidelines in section 3 of the RFA. *(Word limit 500)* [5 points]

Proposed SBTA (35 points)

4. Describe the methods you propose to screen entrepreneurs and business clients to identify their eligibility for services per the CDBG funding guidelines, assess and map or plan the services they need. Please consider guidance in sections 3 and 4 of the RFA. *(Word limit 500)* [10 points]

5. Describe in detail the grant activities, business support and technical assistance your organization proposes to provide through responding to this RFA. Describe any key elements of the program and how proposed services will address the community needs described in question 2. Describe how services and activities will be monitored and tracked and how program performance will be assessed relative to established DHCD metrics and any new metrics proposed. Please consider guidance in sections 3 and 4 of the RFA. *(Word limit 1000)* [25 points]

Proposed Grant Work Plan (25 points)

6. Please provide a work plan using the template below that explains how you will execute your proposed business support and technical assistance in the question 5. Please consider the example in the first row and guidance in sections 3 and 4 of the RFA. [25 points]

SBA Activity	Start Date	End Date	Outcome or Community Impact	Deliverable or Product (if applicable)
2A: Securing required federal and district licenses or certifications: Provide 1 group TA session for 10 businesses on the topic of securing a basic business license from DCRA	12/1/18	5/30/19	7 businesses gain a basic business license.	DCRA training curriculum

Proposed Budget (20 points)

There are two questions in this section: your proposed budget and proposed budget narrative. Please complete both questions.

7. Provide an estimated budget using the following template supporting your proposed SBTA services. Please consider the highlighted examples in the first two rows. Please include other funding sources dedicated to the proposed grant activities. If you are proposing in kind resources, please present their value as a monetary cost and describe the resource in the budget narrative and include the associated agreement to deliver the in-kind services as an attachment. If you have raised funds from another source, please note it in the budget template and add any description in the narrative question which follows. [10 points]

Cost Category	Requested DHCD Funds	Other Funding Source	Total
Personnel			
Business coach	$15,000	$25,000	$40,000
Total Costs			

8. Please describe your proposed budget. Add any details about non-DHCD funding sources or resources you propose to leverage to implement your Work Plan. *(Word limit 500)* [10 points]:

FINAL INSTRUCTIONS AND APPLICATION CHECKLIST

Final Instructions

1. The application has two key parts:
   - Fillable PDF Application Form in two parts: Part 1 Organizational and Financial Capacity and Part 2: Proposed Small Business Support Technical Assistance
     a. Fill out all required fields in the main application form.
     b. Ensure that you observe any specified word limits.
     c. Once complete, save the PDF application form, starting with your organization's name; for example, ABC Company FY2019 SBTA Application Form.
   - Required Attachments in fillable PDF.
     a. Ensure that you have all required attachment files
     b. Ensure all attachments conform to all instructions.
     c. Once complete, save the PDF attachments, starting with your organization's name; for example, ABC Company Articles of Incorporation and Bylaws
2. Email the saved application form and all required attachments to nba.rfa@dc.gov by August 13, 2018.

Application Checklist

- ❑ Filled out all required PDF fields.
- ❑ Observed Word limits.
- ❑ Included the following attachments:
  - ❒ Organizational Chart Noting Key Personnel
  - ❒ Staff Resumes
  - ❒ Board Resumes
  - ❒ Partnership Memorandum of Understanding (MOUs) if Applicable
  - ❒ Articles of Incorporation and Bylaws
  - ❒ Assurances (See RFA Attachment A)
  - ❒ Certifications (Lobbying, Drug-Free, etc.) (Attachment B)
  - ❒ Equal Opportunity Certification Form (Attachment C)
  - ❒ Section 504 Certification Form (Attachment D)
  - ❒ Affirmative Marketing Plan (Attachment E)
  - ❒ Tax-Exempt Status Determination Letter
  - ❒ Certificate of Good Standing from DCRA
  - ❒ Evidence of Required Insurance for Federal Funding

DHCD will not forward unresponsive applications to the review panel. For questions about completing and submitting the application, please contact the NBAP Program at nba.rfa@dc.gov.