**Content and Form of Application Submission**

**Program Plan Narrative Content**

Applicants must submit a program plan narrative that contains the information outlined below. Each section must have a heading that corresponds to the headings in bold type listed below. The narrative portion must follow the page guidelines set for each section and must be in the order requested. The narrative must be in Arial 12-point font, single-spaced, with 1-inch margins on all sides using 8 1/2 x 11 paper. The total narrative is not to exceed 25 pages. See allowable page breakout below. The attachments do not have to conform to the format requirements above.

**DO NOT COPY AND PASTE PROGRAM MATERIAL FROM THE WEBSITE. ALL INFORMATION SUBMITTED MUST BE SPECFIC AND DETAILED TO THE PROGRAM AND CUSTOMERS YOU INTEND TO SERVE.**

1. **Executive Summary (2-page maximum) 5 points**

* The Executive Summary will serve as a stand-alone document for the successful applicant that will be shared with various state-level stakeholders and others requesting a brief overview of the funded project. Therefore, applicants should be concise and direct in their description and provide an overview of the services proposed with these funds and the outcomes that will be achieved. The description should provide a clear understanding of how these services will be delivered, the process and how the services will be individualized. Describe services to be provided, need for the services, area to be served, capacity to provide the services and the projected numbers to be served within each program component.

1. **Program Narrative:**

**Need - Description of Need (3 page maximum) 20 points**

* The purpose of this section is for the applicant to provide a clear and accurate picture of the need for these services and benefits gained. State and describe the service area, the target population and the need for services in your community. Information in this section should include, but not necessarily be limited to, the following:
  + ***The most essential component to this program are opportunities catered to match the career interests of the customer.*** Identify proposed or formal and firm established partnerships with other agencies providing services to underserved populations. Describe the nature of the partnership, i.e. subawards, Memorandum of Understanding or linkage agreements and highlight collaborative efforts. Identify the number of referrals from your program that resulted in employment and for how long.
  + The Grantee ***must declare*** which of the 16 industries below that they are connected to in the daily provision of services:

1. Agriculture, Food & Natural Resources (Energy)

2. Architecture & Construction

3. Arts, Audio/Video Technology & Communications

4. Business Management & Administration

5. Education & Training

6. Finance

7. Government & Public Administration

8. Health Science

9. Hospitality & Tourism

10. Information & Technology

11. Human Services

12. Law, Public Safety, Corrections & security

13. Marketing, Sales & Service

14. Manufacturing

15. Science, Technology, Engineering

16. Transportation, Distribution & Logistics

* + Identification of underserved or inadequately served populations and any special needs in the catchment area. This is ***an essential component of the program*** to cater to the specific needs of what the customer goals are based on career interests. These individuals include returning citizens, veterans and individuals who speak other languages outside of English such as Spanish, Polish, Arabic, Russian, Vietnamese, Mandarin; sign language, et cetera.
  + Identification of catchment area. Include description and demographics of communities served.
  + Description of accessibility and availability of services that reflect customer and community needs.
  + Describe current trends or issues, service gaps or unmet needs in the community or target population

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| **# of SNAP Grantees Sought** | **County Area** | **Region** |
| **1** | **Cook** | **1** |
| **2** | **Kane/Aurora**  **Will County** | **2** |
| **1** | **Peoria** | **3** |
| **1** | **Macon** | **4** |
| **5 Total** |  |  |

1. **Program Narrative: Capacity - Agency Qualifications/Organizational Capacity (8 pages maximum-attachments do not count toward page maximum) 35 points**

* The purpose of this section is for the applicant to present an accurate picture of the agency's capacity, qualifications and ability to provide the program as described in this Funding Notice. Information in this section should include, but not necessarily be limited to, the following:
  + Convincing evidence that the applicant agency is capable of carrying out the proposed program, including fiscal, administrative and programmatic ability to manage grant. This should include experience, staffing patterns and qualifications to comply with GATA fiscal and administrative requirements and the Provider Manual. Highlight any recent changes in policies and procedures to improve fiscal, administrative or programmatic capacity.
  + An organizational chart of the applicant organization, showing where the program and its staff will be placed. If subawards will be used, include the relationship with those organizations in the chart. **Label Attachment B**.
  + Identify key staff positions that will be responsible for the program and their qualifications to implement the program deliverables. Complete Contact Information template - **Attachment C**
  + A description of your agency's current programs and activities relevant to the services described in this NOFO.
  + Describe the capacity of your program to meet the needs of the target populations you will be serving and respond to emerging community needs.
  + Identify service locations, hours of operation, service type and staffing. **Complete Attachment E** Service Locations
  + Detail service provision numbers.
  + Describe agency oversight by Board of Directors and available resources for fiscal, administrative and programmatic areas.
  + Describe the agency capacity to provide a welcoming, safe, accessible and inclusive environment.

1. **Program Narrative: Quality -- Description of Program Design and Services (9 pages maximum) 35 points**

* The purpose of this section is for the applicant to provide a comprehensive, clear and accurate picture of its intended program design. At a minimum, the proposal must address each of the following components:
  + Provide an overview of service delivery model or standards for providing transportation services.
  + Provide a description of each required service component in the selected grant type. See Funding Information and Eligibility Information (Other Mandatory Requirements) Sections. Include process for initiating services, eligibility criteria, identification of service needs and service planning.
  + Provide documentation of insurance/liability coverage related to the business and vehicles.
  + Provide the details of your hiring process including drug testing procedures, background checks and attainment of new and existing employees driving records.
  + Identify how often vehicle safety checks, inspections and maintenance occurs and provide documentation. List vehicles, plate numbers, model, make, type and year.
  + Describe outreach, education, and community partnerships that the applicant is aligned with to do the work currently. Attach contracts or work agreements with those entities.
  + Describe how the program design has direct correlation to the needs identified in the needs section of the application. Include how your program provides culturally appropriate and/or linguistic services, staffing, materials, outreach.
  + Describe your program staff's qualifications and training. Include education and/or experience, initial and ongoing training, staff supervision, training budget, certifications.
  + Describe the role of volunteers in your program (if applicable). Describe recruitment and train efforts and identify common tasks or responsibilities of volunteers.
  + Describe how your program will achieve the targeted performance standards. List any additional outcomes your program will target to achieve.
  + Provide a plan for dealing with unusual incident reporting relating to protocols for accidents, injuries, medical emergencies, fights, fire and death as examples.
  + Describe what information technology systems and software programs do you use to track & record customer trips (ie. scanner for QR codes, sign in sheet, ID recognition
  1. **Budget Narrative 5 points**
     1. **The grant award for FY 20 is not based upon FY 19 funding levels**. The applicant must submit a budget narrative which identifies the requested amount of funding and clearly demonstrates the need for the requested funds. Budget should support delivery of Comprehensive Employment & Training Services as defined in Section A Program Description and Section B Funding Information. In this section of the application narrative, provide a detailed, Budget Narrative of the items allocated within your proposed budget. The budget narrative should support applicant proposed activities and established deliverables and expected performance standards in the NOFO. Complete **Attachment F** Budget narrative
     2. This will include **all funds** budgeted for the program, including non-DHS funds. Identify the source of those funds and detail how the specified resources and personnel are being allocated to ensure the tasks, activities, goals and objectives described in your proposal will be implemented. Illustrate the use of state or federal funds, other than grant funds, that will be used to support the program. A sample budget template is provided. List any other local, city, county, state or federal awards currently received.
     3. **Entry of the budget into the CSA system should not be done until after being notified by the Bureau about the amount of the FY 20 grant award**.

Upon receipt of notification of the award amount through the Notice of State Award (NOSA the grantee budget must be submitted electronically in the CSA system. The Budget entered into the CSA system will also include a narrative or detailed description/justification for each line in the budget and will describe why each expenditure is necessary for program implementation and how you arrived at the amount. Please include cost allocations as necessary. This narrative must also clearly identify indirect costs, direct program costs, direct administrative costs, and match within each line item as appropriate. The Budget (including MTDC base exclusions as appropriate) should clearly describe how the specified resources and personnel have been allocated for the tasks and activities described in your plan. If indirect costs are included in the budget, a copy of the approved NICRA must be included with the Application.

* 1. **Priority Points (5 additional points)**

The Applicant should detail a plan to coordinate with the local Family and Community Resource Centers to advertise job vacancies and hire TANF customers into their program. If selected, a quarterly and a year end review of the Grantee’s implementation and actual employment gains for customers will be measured and considered for reallocation of unused dollars and Fiscal Year budget development.

* 1. **OTHER**
     + Please note if you are selected, your FY 2020 contract will not be processed until your budget has been reviewed AND approved in the CSA system. It is critical that the budget submitted is as detailed as possible.
     + The application must be submitted electronically to [DHS.ETBILLING@illinois.gov](mailto:DHS.ETBILLING@illinois.gov).
     + DHS will not be responsible for misdirected email, transposed letters, program plans submitted under the wrong CSFA numbers.