

Alexandria Emergency Support Grant Program: Food Security

ACT for Alexandria

Introduction and Eligibility

Organization Name*

Character Limit: 250

About this Grant and Application

Demand for emergency food resources is increasing given the long tail of the COVID-19 pandemic, food-related pandemic benefit rollbacks, and cost-of-living increases. Based on trends in community need as well as community partner conversations (including an in-person focus group), ACT for Alexandria (ACT) and the City of Alexandria Department of Community and Human Services (DCHS) are leveraging the final \$325,000 of the American Rescue Plan Act-funded Emergency Support grant program to support nonprofit organizations in increasing Alexandrian's food security. These grants aim to:

- Increase culturally sensitive food supply to meet neighborhood need, and
- Leverage community & trusted relationships to serve vulnerable & marginalized Alexandrians experiencing food insecurity (e.g., seniors, youth, those impacted by the expiration of pandemic-related emergency benefits)

Priority will be given to organizations who are successfully carrying out this work in the community and have an existing integrated food security component in their programming. In addition, we are looking to fund organizations with low barriers to accessing food supports and those with service capacity beyond their existing client base. Grant awards may support food-related expenses, personnel, and other program costs (e.g., supplies, telecoms). Grant activities incorporating the distribution of gift cards will require additional data collection.

Although grant activities may run from September 2023 to February 2024, measured spending throughout the grant period is not required as grant funds are meant to address immediate community needs. This program will fund program expansion, not fund new or start-up initiatives.

The grant application deadline is August 24th, 2023 at 11:59 pm.

Current Programming*

Does your organization's *current* programming include food security supports in the City of Alexandria?

Choices

Yes

No

Organizations responding "No" to the Current Programming question will receive the Eligibility Determination notification.

Eligibility Determination

Thank you for your interest in the Food Security Emergency Support grant. Unfortunately, your organization does not meet the eligibility requirements for funding.

Please click "Submit Application" to close this window. You may reach out to Shelley Spacek Miller at shelley.miller@actforalexandria.org if you have any questions.

Organizations responding "Yes" to the Current Programming question will respond to the following questions.

Organization Questions

Project Name*

Name of project.

Character Limit: 100

Point of Contact Name*

Please add the name of the point of contact/responsible party with the authority to process and receive payment information.

Character Limit: 250

Point of Contact Email*

Please add the email of the point of contact/responsible party with the authority to process and receive payment information.

Character Limit: 250

Address Line*

Character Limit: 250

Address Line 2

Character Limit: 250

City, State*

Character Limit: 250

Zip Code*

Character Limit: 250

Phone number*

Character Limit: 250

Do you have a federally negotiated indirect cost rate?*

If yes, please include that information in your project budget.

Choices

Yes

No

Document Upload

Operating Budget*

Please upload your current operating budget.

File Size Limit: 5 MB

Project Budget*

Please visit <https://www.actforalexandria.org/nonprofits/grant-opportunities/> for the required project budget template.

File Size Limit: 5 MB

Grant Activities and Attestation

Question 1*

What is the grant amount requested?

Character Limit: 250

Question 2*

Briefly describe your program or service intervention to address food security and how the emergency support funds will be used.

Character Limit: 5000

Question 3*

Briefly describe how the program/service activities builds on or supports current food-security related programming in your organization

Character Limit: 2500

Question 4*

What is your proposed timeline for grant activities and use of funds?

Character Limit: 500

Question 5*

Please share the outreach strategy that will guide food-security grant activities and note language access capabilities.

Character Limit: 5000

Question 6*

What languages does your organization provide interpretation and translation services for?

Choices

English
Spanish
Amharic
Arabic
Dari
Pashto
Other

Question 7*

Does your organization accept referrals from local agencies and community partners in the City of Alexandria?

Choices

Yes
No

Question 8*

Describe how referrals to or from local agencies and community partners in the City of Alexandria are currently (or will be) handled.

Character Limit: 2500

Question 9*

What are key indicators of successful grant implementation (what does success look like)?

Character Limit: 2500

Question 10*

How many households do you anticipate serving under the proposed grant activities?
(Households may be defined as an "immediate family unit" in recognition that multiple families may reside in the same physical location and not be related or not be sharing food/financial resources)

Character Limit: 20

Question 11*

What City of Alexandria zip codes do you intend on serving through the proposed grant activities?

Choices

22301
22302
22304
22305
22206
22311
22312
22314

Question 12*

What data elements do you currently collect as part of your food-security programming?

Choices

Number of households served
Size of household
Race
Ethnicity
Type of food support
Amount of food support

Please share any other data elements not listed above:

Character Limit: 250

Question 13*

Who will be responsible for executing this work? Check all that apply.

Choices

Current FT Staff
Current PT Staff
Volunteers
Will need to hire additional staff

Question 14*

What support do you anticipate your organization will need from ACT for Alexandria (ACT) and the Department of Community and Human Services (DCHS) to be successful in this endeavor? (examples might include technical assistance on data collection strategies, referral structure, etc.)

Character Limit: 10000

Attestation*

Grantee shall treat grant funds as restricted assets. Grantee shall either maintain awarded funds in a separate bank account that is restricted to the specific charitable project for which this grant is made or through their accounting practices be able to track and account for the award and related expenditures, separate from other operational activities. All expenditures made in furtherance of the purposes of the grant shall be charged off against the grant and shall appear on Grantee's books. Grantee shall keep adequate records to

substantiate its expenditures of grant funds and retain those records for five years.

Grantee will use the funds solely for the purpose listed in this agreement and in accordance with the provisions of Section 501(c)(3) of the Internal Revenue Code of 1986 (the "Code"), which requires that grant funds be expended for charitable, scientific, literary, or educational purposes.

Grantee is prohibited from using grant funds to exclude participation in supported activities because of race, national origin, creed, gender, age, sexual orientation, gender identity, religion, status with respect to public assistance, or disability.

There is no pending proceeding or investigation directed at the Grantee by a federal, state, tribal, or local administrative agency or authority that could have a material adverse impact on the Grantee's ability to perform its obligations under this Agreement.

If at the end of the grant term, any grant funds have not been expended or committed in accordance with this Agreement (whether expended for a purpose not in accordance with this Agreement, or not spent at all), ACT may demand return to it of all or any portion of such funds.

Agreement*

I agree that I will use the funds only for approved purposes as required by federal law. I acknowledge that I cannot charge more than 10% of the grant award for administrative costs, such as salaries, wages, benefits, and supplies related to the project unless my organization has a federally negotiated indirect cost rate. I further agree that I will submit regular program enrollment, data and expenditure reports as required by the City of Alexandria DCHS. By submitting this application, I certify that I will meet the above requirements. I also understand that it is my responsibility to maintain records and other documentation related to the use of the funds I receive under the Alexandria Emergency Support Grant program for at least five years following the end of the grant. I acknowledge that the Commonwealth of Virginia or the federal government may audit my facility at any time during the grant period and for up to five years thereafter. By submitting this application and receiving a grant award, I agree to cooperate to the fullest extent possible with any such audit or investigation. The following signature (typed name and date) affirms that I will adhere to the terms described above.

Signature*

Character Limit: 250

Date:*

Character Limit: 250

Terms and provisions*

By clicking this box, I acknowledge that I have read, understand, and agree to abide by the terms and provisions of the Alexandria Emergency Support Grant Program. I agree that funding from the Alexandria Emergency Support Grant Program will be used for the allowable purposes.

I certify that all information included in this application is accurate to the best of my knowledge or belief.

Choices

I agree

This program is being supported by the Coronavirus State and Local Fiscal Recovery Funds award number 21.027 awarded by the City of Alexandria, Virginia by the U.S. Department of the Treasury.