**CENSUS 2020 COMMUNITY OUTREACH PROJECTS**

**FUNDING APPLICATION**

**PROPOSAL COVER SHEET**

|  |  |  |
| --- | --- | --- |
| **Date:** |  |  |
|  |  |  |
| **Applicant:** |  | | **Phone:** |  |
| **Address:** |  | | **Fax:** |  |
|  |  | | **Email:** |  |
|  |  | | **Web:** |  |
| **Project**  **Contact:** |  | | **Title:** |  |
|  |  | |  |  |
| **Amount Being Requested: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Minimum Qualifications Required to Submit Proposal:**  Are you legally authorized to do business in the State of California?  Are you a not for profit or tax-exempt organization?  Are you located in San Mateo County and/or serve San Mateo County residents?  Have you actively and normally been engaged in community outreach and/or service provision for the past 5 years?  You have **not** already been funded for census outreach by the County of San Mateo under RFP#OCA1001. | | | | |

**APPLICATION CHECKLIST**

Use the following checklist to ensure that all documents and forms necessary to respond to this Request for Proposals (RFP) have been included. Submit a copy of this checklist as the second page of your application as indicated below. All documents, unless otherwise specified, are required for a proposal to be considered complete. Incomplete proposals will not be accepted.

|  |  |  |
| --- | --- | --- |
|  |  | **Cover Sheet** |
|  |  | **Application Checklist** (this page) |
|  |  | **Application** (following pages) Includes: *Proposal Narrative*, *Organizational Capacity and Experience Statement*, with all sections accurately and fully completed. Applicants must submit the required information detailed in Section IV.2 of the Request for Proposals regarding experience and proposed staff. |
|  |  | **Financial Statement**  Each applicant must submit a scanned copy of the most recent and complete annual financial statement or balance sheet (within past 12 months). |
|  |  | **Insurance Certificate and Endorsement Letters**  Applicants must provide proof of insurance coverage that meets the County of San Mateo’s insurance requirements. Specifically, applicants must possess General Liability, Automobile Liability, and Workers’ Compensation Coverage. Applicants must provide the following documents to demonstrate appropriate coverage:   * ***Certificate(s) of Liability Insurance*** listing Count of San Mateo as the certificate holder. * ***Endorsement Letter(s)*** listing “County of San Mateo, its officers, agents and employees” as additional insured on the policy. |
|  |  | **Proof of not for profit/tax-exempt status**  Applicants must provide proof of not for profit or tax-exempt status, such as 501(3)(c) Determination Letter, 990, 990 EZ, or 990-N |

**APPLICATION FORM**

|  |  |  |
| --- | --- | --- |
| **Date:** |  |  |
|  |  |  |
| **Applicant:** |  | | **Phone:** |  |
| **Address:** |  | | **Email:** |  |
|  |  | | **Web:** |  |
| **Project**  **Contact:** |  | | **Title:** |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Fed EIN:** |  | **IRS Code:** |  | **Year**  **Incorporated:** |  | **Date of Last**  **Annual Audit:** | |  | |
|  |  |  |  |  |  |  | | |  |
| **Annual Operating Budget: $** |  | **Total Project**  **Budget: $** |  | **Amount Being Requested: $** |  |  |  | |

|  |  |  |
| --- | --- | --- |
| **REGIONS TO BE COVERED (Check all that apply)** | **HARD TO COUNT/LEAST LIKELY TO RESPOND**  **POPULATIONS TARGETED (Check all that apply)** | |
|  |  | |
| Daly City + Unincorp.  South SF, San Bruno + Unincorp.  Millbrae, Burlingame + Unincorp.  San Mateo, Foster City, Belmont  Redwood City, North Fair Oaks  East Palo Alto, Menlo Park  Half Moon Bay + Unincorp.  Pacifica + Unincorp.  \*See map in RFP Section III | African American  Asian/Pacific Islander  Children (0-5)  Disabled  Hispanic/Latinx  Homeless  Immigrants/ Refugees  LGBTQ+  Limited English Proficient  Limited/No Internet Access | Low Income  Native American  Public Benefits Recipients  Public Housing Residents  Renters  SRO Residents  Seniors (65+)  Veterans  Young Adults (17-25)  Other­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Short Project Description**:

**PROPOSAL QUESTIONS**

**1. Project Description -** please provide a one-page description of your proposed plan for your Census 2020 project, including your approach and specific strategies for implementation. Indicate how your proposal will achieve the overall objectives and outcomes outlined in the RFP.

**2. Hard to Count / Least Likely to Respond Populations**

**2A.** Clearly describe the target HTC/LLTR populations that will be served through the proposed efforts, including estimated number of people to be reached.

**2B.** For each HTC/LLTR population, detail your proposed strategies for outreach/support as well as expected challenges to outreach/support and how they will be addressed.

**3. Outreach Plan –** Describe proposed activities, timeline, and intended outcomes to meet the objectives and milestones in the scope of work outlined in the RFP**.** Please detail any areas in which you will be leveraging existing programs and activities.

**4. Milestone and Deliverables –** Indicate your ability to meet the milestones and deliverables outlined in the RFP for your contract category. If you foresee any challenges, explain them and propose a revised timeline.

**5. References** - Provide at least three references from successfully completed projects of similar nature to that described in this solicitation, including the name of the organization for which work was performed, and the name, phone number, and e-mail address of an individual at the organization who was responsible for managing and accepting the work.

**6. Exceptions** – Please list any exceptions to the final solicitation, if any.

**ORGANIZATIONAL CAPACITY AND EXPERIENCE**

Provide all the following regarding the prime proposer.

1. Organizational Capacity:
   1. Titles and names of staff members who will be on the team responsible for the project, as well as their:
      1. Language skills
      2. Experience in community outreach and education
   2. Resume of dedicated project manager
   3. Two examples of similar projects that were successfully completed with details on:
      1. Strategies and tactics used
      2. Lessons learned
2. Experience
   1. The number of years providing services to Hard to Count / Least Likely to Respond Residents (specify which groups)
   2. The number of years conducting outreach and education to Hard to Count / Least Likely to Respond Residents (specify which groups)

**REFERENCES**

Provide at least three references from successfully completed projects of similar nature to that described in this solicitation, including the name of the organization for which work was performed, and the name, phone number, and email address of an individual at the organizations who was responsible for managing and accepting the work. Ensure that contact information is current. If the County cannot contact the reference because of incorrect or out-of-date information, the reference will be deemed not to have been provided.