



NEW MEXICO COALITION FOR LITERACY

3209 MERCANTILE COURT STE. B ♦ SANTA FE, NM 87507 ♦ 1-800-233-7587 ♦ FAX: 505-982-4095 ♦ INFO@NMCL.ORG

OPERATING ASSISTANCE GRANT APPLICATION FOR THE 2011-2012 PROGRAM YEAR

Please note: All applications must be received by July 20, 2011, 5:00 pm. There will be no exceptions. You must send one original and one copy of your grant application. **DO NOT ALTER THE CONTENT, STRUCTURE, OR FORMAT OF THIS APPLICATION IF COMPLETING IT ELECTRONICALLY FOR PAPER SUBMISSION.** Merely fill in the blanks where indicated. No special bindings, paperclips, or covers will be accepted; no electronic or faxed copies will be accepted. We will accept single staple only for each copy and all applications will be rejected that do not meet the specifications outlined herein, the cover letter, and the guidelines. You are encouraged to use certified mail, return receipt requested.

I. ORGANIZATIONAL INFORMATION:

Legal Name of Organization: _____

Mailing Address: _____

Physical Address (if different): _____

Does your organization have 501(c)(3) status? ____ yes ____ no

If not, list the name of the sponsoring organization. _____

Mailing Address of Sponsor: _____

Year the literacy program was founded (not the fiscal agent): _____

Program or Project Contact Person's Name and Title:

Contact Phone: _____ Contact Fax: _____

Contact E-Mail: _____

Amount Requested (Round to the nearest WHOLE DOLLAR AMOUNT): _____

This request is for (check one)

____ Start-up of a new program

____ Continuation of an existing program

Legislative districts in which your program is located and that your program will serve:

State House District(s) # _____

State Senate District(s) # _____

US Congressional District(s) # _____

II. PROGRAM INFORMATION:

(Check the projected focus if a new program and the information is not available at this time.)

1. Please check up to three¹ categories that best describe the focus of your program:

- Basic adult literacy²
- Pre-GED
- ESL
- Family Literacy
- Workplace Literacy
- Civics Literacy
- Special Populations (learning disabled, immigrants, etc.)
- Computer literacy
- Other (please specify): _____

2. Does your program serve members of the community who are not receiving WIA assistance and/or community members who are not enrolled in community college, aside from participation in a literacy program? _____

If not, state the reason: _____

3. What percentage of the students you serve fall into each of these age groups? (approximations are OK)

- below age 16 (must be part of a family literacy program or project)
- age 16 - 18 and in school
- age 16 - 25 and not in school
- age 25 and older

4. How many students are enrolled in your program *at this time*? _____

5. What is the total number of students you served during your last program year? _____

6. What percentage of the students you serve come from the following sources:

- Referred from an ABE program
- Referred from other organizations or agencies
- Recruited in response to promotional efforts by your _____ organization or the
- NMCL

7. Do you have a waiting list of students to be matched with tutors? yes no

If so, how many students are on the list? _____

8. How would you describe the extent to which your program utilizes the services of volunteer tutors?

- not at all...our instructional staff are all paid (must use volunteers in order to qualify for funding)
- occasionally, when the need arises
- volunteers are an integral part of our program

¹ Your program must serve students who are functioning between the first and sixth grade levels, and adults must be served who are functioning between the first and third grade levels at minimum.

² Serving this population is required.

9. How many volunteer tutors are currently active in your program? (i.e. are matched with students and actively working with them) _____

10. The budget for your last program year was approximately:

- _____ N/A
- _____ less than \$2,000
- _____ \$2,000 – 5,000
- _____ \$5,000 – 10,000
- _____ 10,000 – 20,000
- _____ greater than \$20,000

11. Which of the following do you rely upon for funding for your program? (check all that apply)

- _____ NMCL grant
- _____ Local city/county funds
- _____ Local Workforce Investment Board funds
- _____ ABE funds (state or federal)
- _____ Other state or federal funds
- _____ Local fundraising events
- _____ Financial contributions from the local community (individuals and businesses)
- _____ Other (please specify):

12. Does your local city government provide any in-kind support for your program?

_____ yes _____ no

If so, what kind (for example, free space in a government office or library)?

13. What days of the week, and during what hours, is your program open to the public?

14. What is your organization's mission statement? What is your organization's vision statement?

15. In what ways does your organization partner with its local library?

16. Describe the specific ways your program recruits and retains students and tutors (may attach a separate sheet, but limit your response to a single-spaced half-page or less; if a new literacy program, describe your plan in one single-spaced page or less).

17. Describe the partnerships you have formed in your community, or plan to form, concerning the following, as applicable (may attach separate sheet, but limit your response to a single-spaced half-page or less):

Advertising and promoting your program in the community; recruitment of students and tutors by referral; funding; and alliances with formal ABE programs or other post-secondary programs.

18. Does your organization conduct an annual financial audit by an outside accounting firm?

yes no

19. Did your organization complete its annual 990?

yes no (will not qualify for funding if in operation over a year with corporate status)

III. SERVICES PROFILE:

Indicate the number of individuals participating in each type of service *during your last program year*, from July 1, 2010 to June 30, 2011. (This may be a duplicated count in the case of students receiving more than one service and may be "N/A" if your program is new.)

<input type="checkbox"/> Basic Literacy (required)	<input type="checkbox"/> Prevocational Literacy Skills Training
<input type="checkbox"/> ESL/ESOL/ELL	<input type="checkbox"/> Life Skills Literacy Training
<input type="checkbox"/> Pre-GED	<input type="checkbox"/> Math
<input type="checkbox"/> Family/Intergenerational Literacy ³	<input type="checkbox"/> Computer Literacy
<input type="checkbox"/> Workplace Literacy	<input type="checkbox"/> Adult Basic Education ⁴
<input type="checkbox"/> Citizenship/Civics Literacy	<input type="checkbox"/> Prison Literacy (inmate tutors)
<input type="checkbox"/> Homeless Literacy	<input type="checkbox"/> Other (please specify): _____

IV. STUDENT/TUTOR PROFILE

Indicate the actual number of individuals receiving and delivering services for *during your last program year*, from July 1, 2010 to June 30, 2011. (This may be a duplicated count in the case of students receiving more than one service and may be "N/A" if your program is new.)

Students (receiving services):	Tutors/Teachers (delivering services):
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Ethnicity: <input type="checkbox"/> Black <input type="checkbox"/> Hispanic/Latino(a)/Chicano(a) <input type="checkbox"/> White (non-Hispanic) <input type="checkbox"/> Native American/Alaskan <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Other: _____ _____	Ethnicity: <input type="checkbox"/> Black <input type="checkbox"/> Hispanic/Latino(a)/Chicano(a) <input type="checkbox"/> White (non-Hispanic) <input type="checkbox"/> Native American/Alaskan <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Other: _____ _____

³ Must be part of a family literacy program. See: Federal Definition of Family Literacy.

⁴ Enrollment in literacy program is concurrent with enrollment in adult basic education program.

Students (receiving services):

Tutors/Teachers (delivering services):

Age:

____ <16
____ 16-24
____ 25-44
____ 45-59
____ 60+

Age:

____ <16
____ 16-24
____ 25-44
____ 45-59
____ 60+

Duration of participation:

____ <1 month
____ 1-6 months
____ 6 months – 1 year
____ 1 year – 2 years
____ 2 years+ _____

Service Status:

____ Unpaid (volunteer)
____ Paid

Other Volunteers (non-tutoring):

____ Administrative, special projects,
____ Board

V. FUNDING PROFILE:

Indicate amounts derived from any of these sources for *the most recently completed program year*.

Federal grants _____ State grants _____ City/County grants _____
NMCL grant _____ Foundations _____ WIA/DOL _____
Businesses _____ Individuals _____ Other _____
Rotary Club _____ Other civic organizations _____

Total funding amount from all sources above: _____

VI. QUALITY INDICATORS FOR LITERACY PROGRAMS:

Training Needs: Indicate your most pressing training needs by ranking the following items in order of importance to your program:

Volunteer Recruitment _____ Workplace Literacy _____
Student Recruitment _____ Family Literacy _____
Tutor Training _____ Program Management _____
Board Training _____ Computer Assisted Instruction _____
Distance Learning/Internet/Technology _____
Other (please specify and rank) _____

Tutor Training Activities⁵:

Number of NMCL sponsored tutor trainings held during the past program year _____

Number of non-NMCL sponsored tutor trainings held during the past program year _____

Number of new tutors trained during the past program year _____

Does your program regularly provide certified ProLiteracy training to volunteers through the NMCL?

Yes _____ No _____

IF NO: List Source: _____

⁵ Your literacy program or project must provide certified training to instructional volunteers through the NMCL or another source to ensure high-quality instruction to adult students.

In-service Training and Workshop Activities:

Number of in-service workshops held for staff during the past program year _____

Number of tutors receiving in-service training during the past program year _____

Did your volunteers (tutors and board) and/or staff attend the NMCL Annual Meeting during the past year?

Yes _____ No _____

If so, how many attended? _____

If not, why?

Indicate how your program measures learning gains (check all applicable):

_____ Standardized test scores _____ Teacher/tutor assessment

_____ Student self assessment _____ Advancement to other training

_____ Attainment of personal goals _____ Portfolio

_____ Other _____

Program Planning Tools:

Indicate which of the following are employed by your program:

_____ Planning document that outlines the program’s mission, goals, and objectives that is updated at least once a year

_____ Community needs assessment conducted at least once a year

_____ Student goal setting process

_____ Process for identifying and addressing other student needs (e.g. child care, transportation, social services, etc.)

_____ Process for identifying and addressing staff development needs

_____ Tutor and student recruitment plan

_____ Financial plan

_____ Conflict of interest policy for board members and staff

Accreditation:

Was your program accredited by ProLiteracy America during the last program year?

Yes _____ No _____

Does your program plan on seeking accreditation from ProLiteracy America during the upcoming program year?

Yes _____ No _____

If not, why?

VII. PROJECT INFORMATION

Please respond to one of the following:

- If you are requesting funds for general operating support for a new or existing literacy program, please attach a brief narrative (a maximum length of *two* pages, single-spaced) explaining each of the following:
 - 1) The need for literacy services in your particular community;
 - 2) The characteristics of the population you serve or will serve;
 - 3) The basic structural components of your program (including what services you offer or will offer, your intake process, the basic data you collect and track on students, what assessment tools you use, when you do testing of students, whether or not you do an instructional plan with students, and how you determine success with students and of your overall program);
 - 4) If you are seeking funds to expand a program to serve more students, explain how you

will do this, including the number of students you expect to serve and how you will recruit them. Keep in mind that your funding request should reflect the number of students you intend to serve. For example, if you currently serve 50 students with a grant of \$5,000 from the NMCL and you propose to serve only an additional 10 students, asking for \$10,000 would not be appropriate.

- If you are requesting funds for a particular project within your overall program, such as a Workplace Literacy project or Family Literacy project, please attach a narrative (a maximum length of two pages, single-spaced) explaining each of the following:
 - 1) The need for the project;
 - 2) The characteristics of the population you propose to serve and the number of students you intend to enroll in the program;
 - 3) The overall goal of the project and any specific objectives that you will use as benchmarks in achieving that goal;
 - 4) How you will structure the project, including recruitment, intake, services to be delivered, expected outcomes, and staffing plan;
 - 5) How you will serve Basic Literacy students, as specified in Section II, Item 1.

VIII. PROGRAM BUDGET

Budget Detail: Include in this chart the amounts you are requesting for each item that pertains to *your NMCL funded project or program* (not your agency’s budget if you are a community college or are affiliated with a larger organization). *State how, in the narrative section of this proposal, the funds requested will support your program or project described.* See the Budget Backup section that follows for an explanation of allowable costs and ranges (determined by State and other regulations).

Budget Item	Just Completed Program Year	Grant Request for the Coming Year
Salaries		
Benefits		
Purchased Services (can include PR)		
Supplies and Materials		
Travel (In-State only)		
Overhead		
Total		

Matching Funds:

Describe the amounts and sources of your matching funds below. You need only match the **total** amount of your grant request from the above chart (not individual budget items). **You must match the NMCL grant request at a rate of 100% for cash and in-kind.** Volunteer time can be included under ‘in-kind’ at the rate of \$21.36/hour.

Cash	_____	In-Kind	_____
Sources:	_____	Sources:	_____
	_____		_____
	_____		_____

Budget Backup: The following is a breakdown of each Budget Item from the Budget Detail section above.

1. Salaries – for employees involved with the funded project only. *The NMCL may not pay for teachers' salaries and directors may not be paid to serve as instructors or trainers. Funds used for salaries must be for administration of the program only and must accord with norms for the nonprofit and educational/ literacy sectors in New Mexico in regard to amount of salaries charged to the grant.:*

Position Title	Salary per hour	# of hours per week	# of weeks per year	% of time on this project	Amount requested
Total					

2. Benefits - Employee benefits are limited to a maximum of 22% of total salaries.

Position Title	Salary	Benefit rate (%)	Amount requested
Total			

3. Purchased Services - Include cost of consultants, printing services, graphic design services, public relations, etc. Detail the services you expect to purchase along with the estimated cost. *Keep in mind that the NMCL offers a wide variety of technical assistance and training, including nationally certified tutor training, at no cost to funded programs. Therefore, it is highly unlikely that the NMCL will fund those costs for your program.*

Purchased Service	Justification	Amount requested
Total		

4. Supplies and Materials - \$1,000 maximum. Include office supplies, literacy training materials not covered by the NMCL's materials grants (if available), software, computer equipment, etc. *Please keep in mind that the NMCL offers \$500.00 in Materials Grants as funds allow (two grants per program year as NMCL funding permits) to literacy programs in New Mexico. Therefore, it is highly unlikely that the NMCL will fund those costs for your program if funds are available for that purpose.*

Supplies and Materials	Justification	Amount requested
Total		

5. Travel - Travel budgets cannot exceed \$1,000. Include the purpose of the travel along with the destination. The following are examples of allowable travel expenses: attendance at in-state conferences (such as the NMCL's Annual Meeting), in-service trainings, trips to the NMCL office in Santa Fe, and trips

to other in-state literacy and adult education programs. *Please keep in mind that the NMCL covers the cost of some professional development events for literacy programs that we provide. Therefore, it is unlikely that the NMCL will fund those costs for your program.*

Destination/Purpose	# of miles	x \$.32 per mile	Lodging + Meals	+ Other costs	Amount requested
Total					

6. Overhead/- Rent, telephone, internet, heating, lighting, etc...

Type of Overhead Expense	Amount requested
Total	

IX. ATTACHMENTS

Please include the following attachments with your proposal:

- 501(c)(3) letter from the IRS documenting your nonprofit status or that of your program’s sponsoring agency;
- Financial statement from your most recently completed fiscal year, showing planned and actual expenditures for each item in your budget, explaining any deficits or surpluses if not balanced;
- Board of Directors roster and/or community advisory board, including terms and affiliations; a statement of how the board is involved in supporting the literacy program, demonstrating specifically how the board is a working one and how it is effective in governance; conflict of interest disclosure statement for the board and key personnel; and evidence of an independent board of directors and key personnel;
- Resumes of key personnel listed for funding in your program’s budget request, or the job description(s) of the position or positions if not currently filled.

