



# 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

## SPECIAL PROJECT GRANT APPLICATION FOR NEW LITERACY PROGRAMS AND PROJECTS *for the 2009-2010 Program Year*

**Please note:** All applications must be received by February 15, 2010, 5 pm. There will be no exceptions. You must send one original and one copy of your grant application. 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.

LEGAL NAME OF LITERACY PROGRAM OR PROJECT:

SPONSORING ORGANIZATION: (if fiscal agent required)

PROGRAM/PROJECT PHYSICAL ADDRESS:

PROGRAM/PROJECT MAILING ADDRESS:

PROGRAM/PROJECT TELEPHONE & FAX:

PROGRAM/PROJECT E-MAIL:

CONTACT: (name, title, and direct line if different than above)

SERVICE AREA: (city/county)

PROGRAM YEAR: BEGINS March 1, 2010 ENDS June 30, 2010

AMOUNT REQUESTED: \$ \_\_\_\_\_ (\$5,000.00 MAXIMUM)

PLEASE CHECK UP TO THREE CATEGORIES THAT BEST DESCRIBE THE FOCUS OF YOUR NEW PROGRAM:

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

**1. BRIEFLY DESCRIBE YOUR ORGANIZATION AND LITERACY PROGRAM/PROJECT, SUMMARIZING PROGRAM ACTIVITIES AND CHARACTERISTICS OF THE POPULATION TO BE SERVED. ADDITIONALLY, INCLUDE AN EXPLANATION FOR EACH OF THE FOLLOWING:**

- 1) The need for literacy services in your particular community;
- 2) The basic structural components of your program (including what services you will offer, your intake process, the basic data you will collect and track on students, what assessment tools you will use, when you will test students, whether or not you use an instructional plan with students, and how you will determine the overall success of students and your program).

(You may attach a separate page if needed. Limit your response to 1,500 words or less.)

**2. WILL YOUR LOCAL CITY OR COUNTY PROVIDE ANY IN-KIND SUPPORT FOR YOUR PROGRAM?**

\_\_\_\_\_ yes \_\_\_\_\_ no

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

---

**3. IN WHAT WAYS WILL YOU PARTNER WITH YOUR LOCAL LIBRARY?**

---

**4. DESCRIBE THE PARTNERSHIPS YOU HAVE FORMED IN YOUR COMMUNITY, OR PLAN TO FORM, CONCERNING THE FOLLOWING:**

- 1) advertising and promoting your program in the community;
- 2) recruitment of students and tutors by referral;
- 3) funding and alliances with formal ABE programs, other post-secondary programs, and/or social service organizations and other agencies.

(You may attach a separate page if needed. Limit your response to 500 words or less.)

**5. DESCRIBE HOW YOU WILL RECRUIT ADULT PARTICIPANTS AND VOLUNTEER TUTORS INTO YOUR LITERACY PROGRAM OR PROJECT. INDICATE HOW MANY INDIVIDUALS YOU THINK WILL BE ABLE TO RECEIVE TUTORING SERVICES AS A RESULT OF YOUR PROGRAM OR PROJECT.**

(You may attach a separate page if needed. Limit your response to 1,000 words or less.)

**6. 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 _____                  |                                     |

**7. INDICATE WHICH OF THE FOLLOWING WILL BE 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

**8. INDICATE YOUR MOST PRESSING TRAINING AND TECHNICAL ASSISTANCE 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) \_\_\_\_\_

**9. DO YOU CONDUCT AN ANNUAL FINANCIAL AUDIT BY AN OUTSIDE ACCOUNTING FIRM?**

\_\_\_\_ yes \_\_\_\_ no

**10. THE BUDGET FOR YOUR ORGANIZATION IS 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 WILL YOU RELY UPON FOR FUNDING FOR YOUR PROGRAM?** (check all that apply)

- \_\_\_\_ NMCL grant
- \_\_\_\_ Businesses
- \_\_\_\_ Local city/county funds
- \_\_\_\_ Local Workforce Investment Board funds
- \_\_\_\_ Federal grants
- \_\_\_\_ Other state or federal funds
- \_\_\_\_ Local fundraising events
- \_\_\_\_ Financial contributions from the local community (individuals and businesses)
- \_\_\_\_ Civic organizations
- \_\_\_\_ Other (please specify): \_\_\_\_\_

**12. PROVIDE A BUDGET BREAKDOWN FOR THE REQUESTED FUNDING**

Budget Item	Grant Request
Salaries	
Benefits	
Purchased Services	
Supplies and Materials	
Travel (In-State)	
Overhead	
<b>Total</b>	

**13. BUDGET BACKUP:** The following is a breakdown of each budget item from the budget breakdown section above.

**1. Salaries** – for employees involved with the funded project only:

Position Title	Salary per hour	# Of hours per week	# of weeks per year	% of time on this project	Amount requested
<b>Total</b>					

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

Position Title	Salary	Benefit rate (%)	Amount requested
<b>Total</b>			

**3. Purchased Services** - Include cost of consultants, trainers, 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 services, including nationally certified tutor training, at no cost to funded programs.*

Purchased Service	Justification	Amount requested
<b>Total</b>		

**4. Supplies and Materials** - Include office supplies, literacy training materials, software, computer equipment, etc. *Please keep in mind that the NMCL offers \$500.00 in Materials Grants to literacy programs in New Mexico (two grants per program year as funding permits).*

Supplies and Materials	Justification	Amount requested
<b>Total</b>		

**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, regional in-service trainings offered by the NMCL and other organizations, trips to the NMCL office in Santa Fe, and trips to other in-state literacy programs.

