

**CITY OF BENICIA
BENICIA HUMAN SERVICES BOARD
FY 2017-2019 GRANT APPLICATION**

TITLE PAGE

PART A

1. **Project/Program Name: Families in Transition of Benicia**
2. **Amount of Funding Request: Annual: \$ 34,650.00 Grant period (2 years): \$69,300.00**
3. **Organization Submitting Proposal: Families in Transition**

Organization Data:

Name: Families in Transition
 Address: P O Box 321
Benicia, CA 94510
 Phone: 645-3000
 Fax: _____
 Fed. ID #: 94-3152270

Contact Person:

Name: Melody Seymour
 Title: President
 Phone: 747-0282
 Email: drmedseymour@gmail.com
 Fax: _____

4. **Year organization legally established: 1989 State: CA**

5. **Project or Program Category (check applicable categories and subcategories):**

<input checked="" type="checkbox"/> Safety Net	<input type="checkbox"/> Health & Wellbeing	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> Rent	<input type="checkbox"/> Counseling	<input type="checkbox"/> Affordable Housing
<input type="checkbox"/> Food	<input type="checkbox"/> Suicide Prevention	<input type="checkbox"/> Job Skills
<input checked="" type="checkbox"/> Utilities	<input type="checkbox"/> Domestic Violence	<input type="checkbox"/> Literacy
<input type="checkbox"/> Transportation	<input type="checkbox"/> Child Abuse Prevention	<input type="checkbox"/> Parenting
<input type="checkbox"/> Childcare	<input type="checkbox"/> Substance Abuse	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/> Mental Health	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. **Serving clients (check all that apply):**

<input checked="" type="checkbox"/> Children Under 5	<input checked="" type="checkbox"/> Youth (5-18)	<input checked="" type="checkbox"/> Adults (19 to 59)	<input checked="" type="checkbox"/> Seniors Over 60	<input checked="" type="checkbox"/> Family Unit
<input checked="" type="checkbox"/> Low-Income	<input checked="" type="checkbox"/> Disabled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. **Anticipated Number of Unduplicated Benicia Residents to be Served: 60**

ORGANIZATION CERTIFICATION: I hereby certify that all information contained in this application and any attachments is true and accurate.

NO CITY EMPLOYEE SHALL BE A SIGNATORY ON BEHALF OF AN ORGANIZATION REQUESTING FUNDS FROM THE BENICIA HUMAN SERVICES BOARD.

Melody Seymour
 Melody Seymour Authorizing Signature

President
 Title

23 January 2017
 Date

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Part B – BUDGET INFORMATION

8. Provide a budget for the project. (Expenses listed in this document should be consistent with the Project Description.) This budget is only for the project utilizing grant monies.

PROJECT EXPENSES	TOTAL PROJECT COST (A)	AMOUNT OF GRANT REQUEST (B)	APPLICANT'S COST (C)
DIRECT COSTS			
Personnel (Direct ¹)	\$	\$	\$
Benefits (Direct ¹)			
Personnel (Support ¹)			
Benefits (Direct ¹)			
Contract Services			
Client Rent & Deposits	37,890	34,650	3,240
<u>Client Utilities</u>	2900		2,900
Project-Supplies			
Project Equipment			
Transportation (e.g. gas costs, rental)			
Other Direct Costs			
<u>SUBTOTAL</u>	40,790	34,650	6,140
INDIRECT COSTS			
(Administrative ¹) Personnel			
Benefits			
D & O Insurance	1100		1100.
61406			
Telephone	182		182
Office Supplies			
Printing	250		250
Filing Fees	45		45
P O Box Rental	78		78
<u>SUBTOTAL</u>	1655		1655
TOTAL COSTS	\$ 42,445	\$ 34,650	\$ 7,795

Column A = Total cost of the proposed project. \$42,445

Column B = Amount you are requesting in this grant application.

Column C = The difference between Column A and Column B, or the costs of the project that are not included in this grant request, if any.

Part B – BUDGET INFORMATION – (continued)

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9. APPLICANT SOURCES: Provide sources of other funds for the project. Total amount should correspond with Total C (previous page). Do not include your entire budget here (it should be attached).

Applicant Sources – Other Funding (be specific)		Amount or Value		Indicate if Cash or In-kind
Donations specifically designated for administrative expenses	\$	295		Cash and In-kind
Community Donations		7,500		Cash
TOTAL	\$	7,795		

10. List any prior City of Benicia grants or loans awarded to your organization and the number of Benicia residents served with the funds.

Fiscal Year	Program July,2016- December 2016		Amount		Benicians Served
2016-17		\$	17,325		21
2015-16			34,650		58
2014-15			33,250		48
2013-14			33,200		70
2012-13			33,200		53
2011-12			33,200		62
2010-11			30,000		64
2009-10			22,500		55
2008-09			20,000		68
TOTALS		\$	257,325		499

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Part C - PROJECT / ORGANIZATION DISCUSSION (Please limit Part C to 5 pages.)

11. Brief Project Summary (Two to three sentences describing the grant proposal):

The mission of Families in Transition (FIT) is to assist Benicia Families who temporarily find themselves in need of assistance with their rent, mortgage payment, or utilities. FIT also assists Benicia residents who need security deposits for Benicia properties. Because our board members and other donors contribute specifically to cover our limited overhead, all the grant funds the City of Benicia provides to FIT go directly to helping Benicians stay in their homes.

12. Describe organization's general purpose and activities:

Founded in 1989, Families in Transition has assisted more than 1000 Benicia families over the years to stay in their homes, keep the utilities on, or secure new the Benicia housing they require. Meeting monthly, the FIT board monitors its financial resources, the assistance extended to specific clients the past month, the interviewers' activities and upcoming schedules, and opportunities for outreach to the community. In addition, the FIT board works at encouraging financial support from Benicia business, civic, social, and faith communities, as well as individual donations, to augment the generous support of the City Human Services Board.

13. List all financial liabilities or pending legal action:

None.

14. Is your organization applying for other grants for fiscal years 2017-2019? If so, list the project, funding source(s), proposed budgets, and requested amount(s).

No.

15. At what location will the proposed project take place and how long has the organization been at this location?

Families in Transition—a program, not a project—requires no physical space other than a donated place to meet and a public place to confer with clients. For some years, FIT has held its monthly meeting at Heritage Presbyterian Church, a site donated by the church to support our mission to Benicians in need. FIT's interviewers prefer to meet with clients in public places such as the Benicia Public Library or various coffee shops. Information about our services and our applications are available on our website www.familiesintransition.org; clients initiate the process by calling our hotline, 707-645-3000.

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Part C - PROJECT / ORGANIZATION DISCUSSION (continued)

16. What are your proposed hours of operations for this project? Please indicate hours that actual services will be provided, and how this may or may not differ from the hours project staff will be available to respond to incoming calls, answer general questions, etc.?

Families in Transition is available to our clients 24 hours a day, seven days a week on our hotline. Rotating interviewers answer each call, determine whether the client meets the criteria, schedule an interview, meet with the client in a public place, verify information, confer with the board if necessary, and request that the treasurer writes a check. The process is intended to be thorough and quickly responsive to the client's needs.

17. Describe the project associated with this grant request. Include the goals to be achieved and the strategy that will be used to meet the goals. Be specific when discussing what will be achieved as a result of your program.

Our goal is to help Benicia families sustain financial stability by reaching out to those who find themselves unable to meet their usual expenses because of a temporary situation; we achieve this goal by providing funds paid directly to their landlords or to Benicia utility companies. By paying security deposits on new rentals the residents have located, we help Benicia residents find a more suitable or more economical dwelling in our town, which permits the children to remain in their Benicia schools and families to find a more desirable place to live.

18. If the proposed project involves direct services to youth, please indicate the number of volunteers providing direct services, how those individuals are screened and trained, specific duties assigned to volunteers, and how volunteers are supervised. If the proposed project does not involve direct services to youth, please indicate "N/A".

N/A

19. Why is this project necessary for the citizens of Benicia? How will recipients benefit from your services?

Once named the best Bay Area town in which to raise children, Benicia seems—at a casual glance—to be an idyllic Norman-Rockwell-like refuge where the “American Dream” prevails. For most of the residents, most of the time, that is the reality. However, many Benicians face needs linked to sudden money demands, health, a fluctuating economy, and uncertain job situations. Some overextend themselves to live in our town because the schools are good, the crime rates are low, and the lifestyle peaceful.

As an example of a problematic factor, FIT monitors the rental rates in Benicia. Housing costs are surging as much as 25%, and even formerly adequate budgets are buckling. Because of the Human Services Board's grant to Families in Transition, the lights stay on, water flows, children are in their Benicia schools, and families are in their homes. The cause/effect is that **simple**.

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20. How will outreach be conducted?

Outreach is crucial to providing information about FIT’s services to potential recipients, landlords, and donors. Participating in city events serves those purposes and, in addition, lets us show our appreciation for the grant support we receive from the Human Services Board.

Specific Outreach activities include the following:

1. Maintaining a website to explain our services and make them easy to access for all residents.
2. Using flyers and a tri-fold display to draw attention to and inform all Benicians about our services.
3. Providing speakers to community groups to raise both awareness and funds.
4. Contacting as many managers and landlords as possible each year to develop a relationship with them, gather information on the rents they are charging, and inform them of our services.
5. Staffing a table at the Farmers’ Market and participating in city parades to promote both our services and the Human Services Board itself.

21. List the specific quantifiable goals of the project.

(Please state your goal in terms of number of individuals, families or groups served. For example, agency will provide X number of individuals counseling services per quarter.)

Report total services provided	Annual goal
Provide monies to help with rent, utilities, or security deposits.	Assist 60 citizens per year, averaging about 15 per quarter

Discuss how your organization will collect, organize and disseminate this data.

Our treasurer monitors all data, including monies spent for clients; vendor recipients of funds; and numbers of clients served, specifying numbers of adults and children. The treasurer maintains a roster of clients assisted within the last three years. Our treasurer reports to our board monthly and is extremely punctual in submitting FIT’s Quarterly Report to the Human Services Board.

22. Is this project an existing program or activity provided by your organization? Please explain.

Families in Transition has served the residents of Benicia since 1989 and values the continued help of the Human Services Board to continue to do so for the foreseeable future.

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23. Identify similar programs in the community and how yours will differ.

The Benicia Family Resource Center, Community Action Council, and St. Vincent de Paul each help Benicians with similar needs. FIT has partnered with these groups in various ways over the years to serve our shared clients, referring clients to and among each other. FIT often assumes the larger part of the client’s need. A major difference among these sister organizations is that FIT and SVDP do not have any paid staff or any real overhead; thus, our assistance is nimble and prompt.

24. Describe previous comparable projects or programs that your organization, has undertaken that demonstrate successful administration and implementation.

As stated in item #22, Families in Transition has helped Benicians with rent, utilities, and security deposits for more than 27 years. We have every hope of continuing to do that, given that we continue to have the generous support of the city and the need, unfortunately, persists.

25. For current grantees, if the amount you are requesting in this funding cycle is higher than what you are receiving now, please explain the reason for the increase.

N/A

26. REQUIRED ATTACHMENTS: Verify and check off confirmation indicating that the following required items are attached to the original application.

Attachment Confirmation	Item No.	Item Description
(√)	1.	IRS Letter of Tax Exempt Status
(√)	2.	Organization’s total budget for the current year
(√)	3.	Copy of most recent audit or financial statement
(√)	4.	Names and addresses of Board of Directors
(n/a)	5.	List of paid principal staff and positions
(n/a)	6.	Job descriptions for principal staff and personnel <u>to be paid partially or in full with grant funding</u>
(√)	7.	Copy of resolution or board meeting minutes indicating organization’s support of the project application.
(n/a)	8.	If a partnership, then of letters of commitment from each organization indicating degree of participation and a budget showing each organization’s financial responsibility are required.

Thank You!