



City of Springdale
Community Development Block Grant Program
201 Spring Street
Springdale, Arkansas 72764
Phone (479) 750-8175



Community Development Block Grant Program
Application for Public Service Funds
2024 Program Year: July 1, 2024 – June 30, 2025

The City anticipates having a maximum of \$117,031 available for non-profit agencies.

The last day to submit an Application for Funding is February 1, 2024.

1. Agency's Name: _____

2. Director's Name: _____

3. Director's e-mail address: _____

4. Mailing Address: _____

5. Physical Address: _____

6. Telephone #: _____

7. Organization's Duns Number (required): _____

8. Federal Tax Identification Number (required): _____

Activity Title: _____

Activity Director's Name: _____

Activity Director's Email: _____

Amount of Community Development Block Grant Funds requested? _____

Briefly describe the history of your organization, including number of years in operation and type of services provided.

Briefly describe the mission of your agency:

Briefly describe your funding sources:

Other sources of funding and/or donations:

Provide the number of clients served in the last 12 months.

Provide the number of Springdale clients served in the last 12 months.

Activity Summary

Please provide a brief description of the activity that includes the following components:

Brief description of the activity:

Need for the activity:

Goals and objectives of the activity:

Describe the persons or groups that will benefit from the activity, including the estimated number of low-to-moderate-income Springdale residents:

Describe how the activity will be evaluated:

Described the personnel required to administer the activity:

Describe the method of implementation and the framework for documenting compliance with the National Objectives of the Community Development Block Grant Program including, a discussion of how units of service will be measured and indicators of accomplishments.

Estimated Activity Budget

Proposed funding period (from) _____ to _____

Cash from Applicant _____ \$ _____

In-Kind _____ \$ _____

Cash from other sources _____ \$ _____

Community Development Block Grant funds requested _____ \$ _____

Total estimated activity funding _____ \$ _____

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Estimated Activity Expenses

Direct Benefits _____ \$ _____

Salaries _____ \$ _____

Materials and supplies _____ \$ _____

Rent/utilities _____ \$ _____

Printing/postage _____ \$ _____

Advertising _____ \$ _____

Other _____ \$ _____

Total Activity Cost _____ \$ _____

Certifications

Applicant agrees to comply with all State & City purchasing policies & procedures (available from City of Springdale Purchasing Officer)

Applicant certifies that project will comply with all federal, state, and local rules, laws and regulations governing the administration of the CDBG funds

Name of Applicant _____ Date _____

Signature of Applicant _____

Title _____ Agency _____

If awarded funding, provide the name and title of the person authorized to sign an agreement with the City of Springdale.

If awarded funding, provide the name and title of the person that will be the primary contact and required to submit quarterly reports to the City of Springdale.

Financial Audit Requirements

Include a breakdown by category of your agency's operating budget, commitments for ongoing funding, and a description of fiscal management systems currently in place.

Please attach a copy of the most recent financial statement and audit of your organization.

Additional Information Required

Please submit these documents with your request (all that apply).

- 1. Articles of Incorporation
- 2. Non-profit determination
- 3. List of Board of Directors
- 4. Authorization to request funds
- 5. Resume or Qualifications of Activity Administrator

Additional Comments or Explanation
