



## 2017 Economic Development Agency / Vendor Service Agency Funding Application

Applications for 2017 funding must be **complete and submitted electronically to the City Manager's Office at [ctoomay@lawrenceks.org](mailto:ctoomay@lawrenceks.org) by 5:00 pm on Tuesday, May 31, 2016.**

Please note that funds will be disbursed according to the following schedule unless otherwise agreed to in writing:

- o First half of funds will not be disbursed before April 1
- o Second half of funds will not be disbursed before October 1

Contact Casey Toomay, Assistant City Manager at [ctoomay@lawrenceks.org](mailto:ctoomay@lawrenceks.org) or at 785-832-3409 with questions.

### SECTION 1. APPLICANT INFORMATION

Legal Name of Agency: \_\_\_\_\_  
Contact Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

### SECTION 2. REQUEST INFORMATION

- A. Program Name: \_\_\_\_\_
- B. Amount of funds requested from the City for this program for calendar year 2017: \_\_\_\_\_
- C. Did you receive City funding for this program in calendar year 2016? If so, how much? \_\_\_\_\_
1. How would a reduction in city funding in 2017 impact the ability of your agency to provide services to/on behalf of the City?
  2. If you are requesting an increase in funding over 2016, please provide a justification for the increase.

### SECTION 3. PROGRAM BUDGET INFORMATION

- A. Provide a detailed budget for the proposed program using the following categories: personnel (list each staff position individually and note if new or existing), fringe benefits, travel, office space, supplies, equipment, other.
- B. What percent of 2017 program costs are being requested from the City?
- C. Provide a list of all anticipated sources of funding and funding amounts for this program in 2017.

### SECTION 4. STATEMENT OF PROBLEM / NEED TO BE ADDRESSED BY PROGRAM

- A. Provide a brief statement of the problem or need your agency proposes to address with the requested funding and/or the impact of not funding this program. If possible, include statistical data to document this need.
- B. How was the need for this program determined?
- C. Why should this problem/need be addressed by the City? If applying for vendor funding, explain why the City would have to otherwise provide the service your agency provides.
- D. How does the program align with the City Commission Goals (Affordable Housing, Economic Development, Infrastructure, Transit and Non-Motorized Transportation, Public Safety, Mental Health)?

### SECTION 5. PROGRAM OBJECTIVES

Please provide three specific program objectives for 2017. Objectives should demonstrate the purpose of the program and measure the amount of service delivered or the effectiveness of the services delivered. A time frame and numerical goal should also be included. Examples include, "75% of clients receiving job training will retain their job one year after being hired," "increased fundraising efforts will result in a 15% increase in donations in 2017," "credit counseling services will be provided to 600 clients in 2017," "new digital arts program will serve 275 students in 2017," etc. **Applicants will be expected to report their progress toward meeting these objectives in their six-month and annual reports to the City.**