

Emergency Contract Support Grant Application Instructions

Definitions

Emergency Contract Support grants are available to offset the unanticipated consequences of an emergency situation. Emergency contract support grants may be requested for general operating expenses for the organization. These grants are available on a **one-time per year basis**. **The maximum award will be \$25,000 and is subject to the availability of funds.**

Who may apply?

Any organization that currently receives mental health funding through the Hanover Township Mental Health Board. Priority consideration will be given to:

- Organizations with the longest history of service to residents of Hanover Township
- Organizations serving a larger percentage of Hanover Township residents
- Organizations that provide direct service to persons with mental illness, developmental disabilities or addictions
- Organizations that provide crisis intervention or emergency services
- Organizations that anticipate cutting services to, or establishing waiting lists for the first time for, residents of Hanover Township.

Application Time Line

Applications may be submitted at anytime throughout the fiscal year. Consideration of the application proposal will occur during a regularly scheduled meeting of the Hanover Township Mental Health Board. Awards become available upon authorization by the members of the Hanover Township Mental Health Board.

How to apply

Applications may be obtained online: www.agencyreports.hanover-township.org. Click on Grant Application. For more information, please contact the offices of the Hanover Township Mental Health Board at (630) 837-0301.

Instructions

I. Cover Page (page 1)

A. Agency Contact Information

- i. List name of Organization along with:
 - a. Complete Address
 - b. Telephone
 - c. Contact information for the Executive Director
- ii. Contact Information for the person completing the grant application including:
 - a. Name
 - b. Title
 - c. Email Address
- iii. Indicate if the organization currently receives Hanover Township Mental Health Board funds by checking the appropriate box.
- iv. Indicate whether or not this is a first time application for an emergency contract support grant by checking the appropriate box.

B. Indicate the Amount of the Grant Request.

II. Narrative (page 2)

- A. Describe the emergency need for which funds are being requested. Describe how the funds will be used. Provide documentation of emergency

B. Use Only the Space Allotted.

III. Budget Page (page 3)

A. Revenue

- i. Indicate the revenue received in FY10
- ii. Indicate the projected revenue for FY 11 Budget
- iii. Please use a "0" rather than leave a space blank

B. Expense

- i. Indicate actual expenses for FY 10

- ii. Indicate projected expense for FY 11 Budget
- iii. Please use a "0" rather than leave a space blank

IV. Staff and Service Capacity (page 4)

A. Staffing

- i. Indicate the actual direct service FTE (Full time equivalent) staff and the administrative/support FTE (full time equivalent) staff for the total agency for FY 10
- ii. Indicate the projected direct service FTE (Full time equivalent) staff and the administrative/support FTE (full time equivalent) staff for the total agency for FY 11

B. Service Capacity

- i. Indicate the actual number of new clients served along with units of service provided in FY 10
- ii. Indicate the projected number of new clients served along with projected units of service in FY 11.

V. If possible, please provide documentation of the emergency.

VI. Final Notes

- A. Submit original grant application (pages 1-3) plus 7 copies to the Hanover Township Mental Health Board. Use only the space allotted for the narrative and do not include any attachments other than those requested.
- B. Do not leave any spaces blank in the budget.
- C. Application forms may be submitted at anytime and will be considered at the next regularly scheduled meeting of the Hanover Township Mental Health Board.
- D. If you have any questions, please call the Mental Health Board Coordinator @ (630) 837-0301 or send to spowers@hanover-township.org .