APPENDIX II

Department of Workforce Services – TANF County Poverty Mitigation Grant **Grant Application Narrative**

Program Name:

Directions: Narrative must be in the default size, font, spacing and space provided. Additional narrative attachments are not allowed.

- 1. PROGRAM and SERVICES: Describe your program and what services will be offered.
 - A. Describe how your program will provide and utilize resource integration coaches to assist families in attaining financial self-sufficiency.
 - B. Describe the services you will offer. Services should:
 - a. Be tailored to meet the specific needs of the family with a focus on children by connecting them to resources and services available to them.
 - b. Utilize a person-centered approach to build social capital and reduce bureaucratic hurdles and inefficiencies.
 - c. Promote the goal of attaining financial self-sufficiency.

for A.	TCOMES AND METRICS: Describe how you will track and meet the required outcomes this grant opportunity. Provide an integrated system of support and serve TANF eligible participants experiencing poverty for the 3 years of this contract. a. Identify the # of participants that your program will serve. Increase the annual income of 25% of families in the program to above 150% of the current Federal Poverty Limit. Identify at least one additional outcome that you would like to achieve to measure the success of your program.

3.	А. В.	If you are receiving other TANF grants, explain how the services in this grant are different from what you are already receiving funding for. Describe your process to ensure that funding and services are not duplicated. If your organization is currently not receiving a TANF grant, enter N/A in the space below.

 BUDGET and STAFFING: Justify the program's financial need and how it aligns with Appendix IV. Budget Narrative & Itemization.
 A. Provide a summary of how the funds will be utilized over the three-year period of the grant.
B. Describe the organizational positions supporting the grant proposal. Include any
required provider qualifications, licenses, and/or certifications. <u>Note</u> : Do not include
specific employee information. C. Identify key financial staff that will be involved with invoice preparation and fiscal
management of the program.