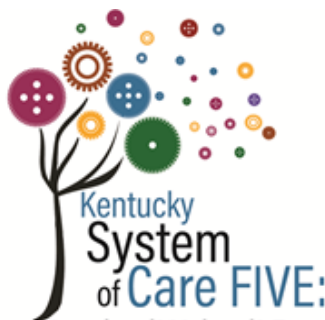


System of Care FIVE Partner Funding Request Form

To submit a request for System of Care funds, respond to the following. Limit: 5 pages

Expectations and Obligations

- ✓ Any organization providing services and supports to children and youth who meet criteria for having a Severe Emotional Disability (SED) and their families and who have child welfare involvement is eligible to request funding for projects, resources, activities, and/or co-sponsorship of training, professional development, and conferences.
- ✓ Technical Assistance is available to organizations requesting SOC funding. This includes consultation regarding training, cultural/linguistic responsiveness, family and youth engagement, and evaluation.
- ✓ SOC staff will assist with promotion of co-sponsored events via website, distribution lists, and community networking.
- ✓ Copies of materials will be provided to SOC FIVE Training Coordinator.
- ✓ Any funds awarded must be used to “supplement” **not** “supplant”! In other words, these funds may not free up state or local dollars for other purposes but should create or augment programs to an extent not possible without these dollars.
- ✓ Per cost-sharing guidelines, the budget report will include total in-kind and cash contributions (e.g., other partner sponsorships, meeting room space, staff time, handouts, supplies, etc.) which can contribute to SOC FIVE requirements. Match resources are non-federal public or private funds that are not being used as match for any other federal program.
- ✓ Proposals must be submitted to Maxine.Reid@ky.gov by **March 31st, 2023**.
- ✓ Proposals will be reviewed by an interagency team in April 2023.
- ✓ Awardees will be notified in May 2023.
- ✓ Upon notice of award, the awardee will submit a single invoice within **one week** to Maxine.Reid@ky.gov for approval and will be processed by the Kentucky Partnership for Families and Children, Inc. (sample invoice will be included).
- ✓ A **final report** including a summary of activity and/or participant evaluations will be submitted to the Maxine.Reid@ky.gov **within 60 days of event conclusion or no later than September 15th, 2023**. This report will include match requirements as described above.



Families - Involved! Valued! Empowered!
Supported with funds from SAMHSA grant # 1H79M082203

1. Organization Information

Name:

Contact Person:

Address:

Telephone Number:

Email Address:

Amount Request:

Project Name (should be less than 10 words):

2. Abstract – ensure all items below are discussed

1. Provide concise summary of the proposed project or activity.
2. How will this activity enhance services and supports to children and youth who meet criteria for having a Severe Emotional Disability (SED) and their families and who have child welfare involvement?
3. How will this activity or event support one or more of the core values and guiding principles of System of Care (listed below)?

System of Care Values

- ✚ Community-Based
- ✚ Family- and Youth-Driven
- ✚ Culturally- & Linguistically-Responsive
- ✚ Trauma-Informed

System of Care Principles

- ✚ Comprehensive array of effective, community-based services and supports
- ✚ Strength-based, individualized service planning
- ✚ Evidence-informed and promising practices
- ✚ Services and supports delivered in the least restrictive, most normative environments possible
- ✚ Partnerships with families, youth
- ✚ Effective care management support
- ✚ Developmentally appropriate services
- ✚ Incorporate mental health promotion, prevention, early identification, intervention, and recovery services and supports
- ✚ Accountability and quality improvement tracking
- ✚ Protect the rights of children and families
- ✚ Provide services without discrimination

Abstract

3. Goals, Objectives, Outcomes, and Timeline of Activity

Describe the anticipated outcome(s) of the proposed project or activity. Provide objectives that are Specific, Measurable, Attainable, Relevant, and Time-based (SMART).

Example:

GOAL 1: Increase access to preventive services and supports for families who have or are at risk of child welfare involvement.

Objective 1: Develop/provide social-emotional learning activities in 3 after-school or out-of-school programs for 25 children age 5-12 during May and June 2021.

Objective 2: Increase by 5% the availability of books and other materials for children, youth, and families that focus on healthy families, relationships, and wellness at local libraries (public or school) by August 2021.

4. Evaluation

Describe how you will evaluate the effectiveness of the project or activity.

5. Budget

In addition to a detailed budget (see sample below), please identify collaborating organizations and their contribution to this activity.

An example of a project budget:

Direct Costs <i>(Item/Description)</i>	Requested Cost	Cash and In-kind or Contributions <i>(Provided by donor/donation)</i>
Speaker Honorarium and Travel	\$500	
Workshop Supplies	\$1000	\$500 from Agency ABC
Conference materials 50 x \$2.00 each	\$100	
Meeting Space		\$200 from Agency ZYX
Total	\$1600	\$700

Direct Costs <i>(Item/Description)</i>	Requested Cost	Cash and In-kind or Contributions <i>(Provided by donor/donation)</i>
Total		

6. Sustainability

Describe a sustainability plan that documents how the project will continue beyond start-up period, including sources of cash and in-kind match and how those will be used to support ongoing implementation.