



# AARP COMMUNITY CHALLENGE

Grants to make communities livable for people of all ages  
[aarp.org/CommunityChallenge](http://aarp.org/CommunityChallenge)

## ATTACHMENT A | Application

# AARP Community Challenge 2018

Grants to make communities livable for people of all ages

## SAMPLE Application and Budget Outline



All applications must be submitted through the online application at [AARP.org/CommunityChallenge](http://AARP.org/CommunityChallenge) by 5 PM ET, May 16, 2018.

**NOTE: All fields must be filled out completely in order for the application to be accepted.**

### BASIC INFORMATION

1. **Date:**
2. **Name of Applicant Organization:**  
If unit of government, please provide a detailed description of your agency.
3. **Organization Address:**
4. **Organization's Number of Employees, Full and/or Part Time:**
5. **Organization's Number of Volunteers:**
6. **Organization Organizational/Tax Status**  
Please check the one that best applies:
  - 501(C)(3), 501(C)(4) or 501(C)(6) NON-PROFIT
  - A MUNICIPALITY
  - ANOTHER UNIT OF GOVERNMENT
  - OTHER (PLEASE DESCRIBE)
7. **Organization Twitter Handle** (if none, enter n/a):
8. **Organization Facebook Name**  
(if none, enter n/a):
9. **Did your organization apply for a grant in 2017?**
  - Yes
  - No
10. **How did you hear about this grant opportunity?**
  - The AARP State Office in my state
  - The AARP Livable Communities e-newsletter
  - A conference
  - A community organization
  - A national organization
    - If so, which one \_\_\_\_\_
  - Social Media
  - Other

- 11. Organization Profile** (for non-governmental organizations only):
- Name and brief history of the organization.
  - Short description of the issues the organization is involved in, including issues focused on older adults.
  - Has this organization been involved in other livable communities work in this community? If yes, briefly describe.
  - Please describe your decision-making structure. If you have a steering committee or other similar leadership structure, please provide the names and contact information.

- Is this a membership organization? If yes, how many are dues paying members?
  - Are any members of your organization elected officials?
  - Evidence of 501 (C) (3), 501(C)(4) or 501 (C)(6) non-profit status

**12. If a governmental entity, will this project require approval by a permitting or elected body? If so, please indicate how long you estimate that will take from receiving confirmation that you are awarded the grant.**

## POINTS OF CONTACT

**13. Grant Application Contact:**

- Name
- Title
- Address
- Phone
- Email

**14. Project Implementation/Execution Point of Contact (if different from #13):**

- Name
- Title
- Address
- Phone
- Email

**15. Signatory on Memorandum of Understanding (MOU):**

- Name
- Title
- Address
- Phone
- Email

**16. Signatory on financial forms (W9 and AARP Required Vendor Forms), if different from MOU signatory:**

- Name
- Title
- Address
- Phone
- Email

## COMMUNITY DETAILS

**17. Name of Community Where Project Will Be Physically Located/Delivered:**

**18. Total Population of Municipality Where Project Will Be Physically Located/Delivered:**

**19. Population Age 50 and Over of Municipality Where Project Will Be Physically Located/Delivered:**

## PROJECT DETAILS

### 20. Amount of this Grant Request.

Note: AARP reserves the right to award less funds than requested, so applicants should be prepared to discuss how they would scale down their proposals *if asked*.

### 21. Project Proposal Summary.

Please provide a summary of your project in 2,000 characters or less.

Note: this grant may not be used for the following activities:

- Partisan, political or election related activities
- Planning activities and/or assessments and surveys of communities
- Studies with no follow-up action
- Publication of books or reports
- The acquisition of land and/or buildings
- Solely to sponsor other organizations' events or activities
- Research and development for a for-profit endeavor
- The promotion of a for-profit entity and/or its products and services

### 22. Project Livability Improvement Statement.

Please specify in 350 characters or less the social impact that this grant will bring to the community, especially those 50 plus.

**For example:** *This grant will improve COMMUNITY X by activating new public spaces for people of all ages to engage with each other by purchasing and installing tables and board games in a playground that is under construction to help engage all generations in social activity. Please see additional examples in Attachment E.*

### 23. Project Deliverables.

Please specify the individual deliverables you will deliver with the grant funding. Please provide as much detail

as you can within 300 characters for each deliverable. See examples in Attachment E.

- Deliverable 1
- Deliverable 2
- Deliverable 3
- Add more as necessary

#### For example:

- *Organization will partner with the CITY DEPARTMENT to purchase and install at least two fully accessible, stainless steel or concrete tables for a playground located, at 555 Sycamore Street, Anytown, Anystate, 55555, that is currently under construction in COMMUNITY X, to help engage all generations by November 5, 2018.*
- *The Organization will also conduct outreach to the community to communicate the new additions to the playground. This outreach will include:*
  - XX
  - YY
  - ZZ

### 24. Project Category.

Please select the category below that best describes your project, along with the primary corresponding sub-category.

- **Deliver a range of transportation and mobility options** through permanent or temporary solutions that increase connectivity, walkability, bikeability, and access to public and private transit.
  - Wayfinding (e.g. signage and markings)
  - Roadway improvements (e.g. temporary bike lanes)
  - Sidewalks/crosswalk improvement and beautification (e.g. improved markings for crosswalks, temporary pop ups at intersections)

- Trails (e.g. completing and connecting trails, signage)
  - Bikeability (e.g. bike sharing options, temporary bike lanes)
  - Public or private transit access (e.g. transit shelters)
  - Access to amenities (e.g. increasing accessibility features of transportation options)
  - Other (please only select if your project does not fit into one of the above categories and please describe in detail)
  - **Create vibrant public places** in the community through permanent or temporary solutions that improve open spaces, parks and access to other amenities.
    - Public space activation (e.g. public plaza improvements, parklets, street trees programs, alleyway activation, seating and games in public spaces, seating along Main Street corridors, signage in neighborhoods)
    - Art installations (e.g. murals and sculptures)
    - Park enhancements (e.g. park equipment improvements, new structures, dog parks)
    - Playgrounds (e.g. intergenerational elements)
    - Community gardening (e.g. building accessible community garden beds)
    - Activities to engage people in vibrant public places (e.g. open streets events)
    - Access to amenities (e.g. increasing accessibility features of park equipment)
    - Public safety (e.g. proper lighting)
    - Other (please only select if your project does not fit into one of the above categories and please describe in detail)
  - **Support the availability of a range of housing** in the community through permanent or temporary solutions that increase accessible and affordable housing options
    - Lifelong housing
    - Accessory dwelling units and tiny homes
    - Co-housing programming and resources
    - Educational programming and resources about housing options
    - Home maintenance and support services
    - Access to amenities (e.g. increasing accessibility features of housing options)
    - Other (please only select if your project does not fit into one of the above categories and please describe in detail)
  - **Other**
    - Community engagement activities
    - Activities that increase access to healthcare services
    - Other (please only select if your project does not fit into one of the above categories and please describe in detail)
- 25. Project Type.** Please select a category for your project below.
- Please note: Proposals for the project types described below will be prioritized over those that support **ongoing** programming or events.*
- Permanent physical fixtures in the community
  - Temporary demonstrations that lead to long-term change
  - New, innovative programming or services

## PROJECT NARRATIVE AND BUDGET

Please complete each section with 2,000 characters or fewer (excluding Question 36)

### 26. The Community's Livable-Communities

**Activities to Date.** Please provide a brief summary of the community policies, programs and services that are targeted toward older adults and how the community plans to become more livable for all ages. Also describe the role your organization/group played in the above livable community plan.

**27. The Community Challenge Project.** What aspect of your livable communities effort will this grant support? What is the community need being addressed with this grant? Why are the items requested under this grant important to your livable communities effort? How will this project have a lasting impact in the community?

**28. Who will be served?** Please outline this project's key beneficiaries and how this grant will serve them.

**29. Multicultural Population.** If the primary beneficiaries of this project are from a population that represents a multicultural perspective, please select the 1 or 2 populations served below. (Please note: This does not carry weight in the scoring criteria).

- African American/Black
- Hispanic/Latino
- Asian American Pacific Islander
- Native American
- LGBT
- Other, please describe:

**30. Community engagement.** How have residents and local organizations been engaged in the area's livable communities activities to date? Has a steering committee been created? Describe the involvement of community non-profits and other local stakeholders in your community. How will you engage the community and involve older adults in the process as you execute this grant?

**31. Geographic Community.** Is the project for one municipality or neighborhood? If a neighborhood, please describe why the neighborhood was selected. Is the project for multiple towns or for neighborhoods in addition to the main town? If so, how and why where they selected?

**32. Execution.** Describe how the organization will execute the work. Does the organization have experience with fast timelines such as this (noting that the project must be completed by November 5, 2018)?

**33. Timeline.** Please describe the timeline and enter the project completion date in the box below. [Please note: At this point we anticipate that grantees will receive checks from AARP by late August.]

- Timeline:
- Estimated Project Completion Date:

**34. Metrics.** Please describe the metrics you will be able to capture over the course of this grant activity and beyond and include goals for each metric. *For Example: number of people served, number of certifications issued, structures achieving ADA-compliance, etc.*

**35. Matching Funds and In-Kind Support.** Matching funds are not required. However, please detail any matching funds or in-kind support the organization will receive to contribute toward this project.

**36. Project Budget.** Please specify what expenses will be covered by the grant. Itemize anticipated expenses and income (if any) for this proposal. Include in-kind services such as donated materials and/or labor. (See sample template, page 8.) Add explanations if necessary.

## NOTIFICATION

Successful applicants will be notified by email. In order to receive funding, selected applicants must execute and return a binding Memorandum of Understanding to the AARP National office to [Communitychallenge@aarp.org](mailto:Communitychallenge@aarp.org) within fourteen (14) days of notification. Noncompliance with this time period may result in disqualification.

## ADDITIONAL TERMS AND CONDITIONS

By submitting an application to AARP, the applicant agrees that:

- The decisions of AARP regarding the eligibility of participants and the validity of entries shall be final and binding.
- All submissions will be judged by AARP whose decisions and determinations as to the administration of the award and selection of award recipients are final.
- AARP has the right, in its sole discretion, to cancel, or suspend the award.
- All projects and applications shall not violate any third-party rights. Except where prohibited by law, participation in the award constitutes the Applicant's consent to AARP's use of the organization's name and corporate logo, street address, city, state, zip code, county, and names, likenesses, photographs, videos, images, and statements made or provided by the Applicant's representatives regarding the award for promotional purposes in any media without further permission, consent, payment or other consideration.

All promotional materials (such as newsletters, press releases), events and signage related to the funded project will include a statement indicating that support was received from AARP.

The organization is required to capture photos of the project and encouraged to capture video. As the organization captures photos and video of the project, if an identifiable individual appears in the photos and/or videos, the organization is responsible for having him/her sign the AARP General Release (this document will be provided to grantees with the MOU and other required paperwork). In addition the organization should not include any element in photos or videos provided to AARP that may violate third party rights such as artwork and trademarks in text and logo other than those owned by the organization and AARP. The organization should be prepared to send work in progress photos to AARP upon request. Following the grant period, grantees are required to respond to periodic requests for updates from AARP.

The organization will prepare and deliver an after-action report with visuals (photos and/or video) to AARP no later than December 3, 2018. Information on submitting the report to AARP will be shared with grantees once they are selected.

AARP and its affiliated organizations, subsidiaries, agents and employees are not responsible for late, lost, illegible, incomplete, stolen, misdirected, illegitimate, or impermissible submissions or any other error whether human, mechanical or electronic.

Please email questions to [Communitychallenge@aarp.org](mailto:Communitychallenge@aarp.org).

# AARP Community Challenge 2018 Project Budget SAMPLE TEMPLATE

Date: \_\_\_\_\_

Planned completion date (on or before Nov. 5, 2018): \_\_\_\_\_

Name of municipality/organization: \_\_\_\_\_

	<b>Expense</b>	<b>Additional Information</b>
Contracted services costs		
Staff costs, if any		
Office materials & supplies, if any		
Travel expenses, if any		
<b>Total Requested</b>		
Are there matching funds or services planned? What is their value?		