



AARP COMMUNITY CHALLENGE

Grants to make communities livable for people of all ages
aarp.org/CommunityChallenge

ATTACHMENT A: APPLICATION

AARP Community Challenge 2019

Grants to make communities more livable for people of all ages

SAMPLE APPLICATION AND BUDGET OUTLINE

All applications must be submitted through the online application at www.aarp.org/communitychallenge by April 17, 2019, 11:59 p.m. ET

NOTE: All fields must be filled out completely in order for the application to be accepted. Please use "n/a" for "not applicable" where appropriate.

BASIC INFORMATION

1. Date: _____

2. Name of Applicant Organization: _____

If unit of government, please provide a detailed description of your agency.

3. 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.

4. Organization Address:

Address: _____

City: _____ State: _____ Zip: _____

5. Organization 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) _____

Learn more at AARP.org/CommunityChallenge

Questions? Email CommunityChallenge@AARP.org

6. Organization Twitter Handle: _____

(if none, enter n/a)

7. Organization Facebook Name: _____

(if none, enter n/a)

8. Did your organization apply for a grant in 2018?

- Yes – Selected
- Yes – Not Selected
- No

9. Did your organization apply for a grant in 2017?

- Yes – Selected
- Yes – Not Selected
- 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: _____

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: _____

20. 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 enhancing public safety by improving pedestrian accessibility for area residents and older adults. Please see additional examples in Attachment D.

21. Project Deliverables.

Please specify the individual deliverables. Provide as much detail as you can about any physical structures (such as benches, lighting, signage, etc.), dates, addresses and communications within 300 characters for each deliverable. See examples in Attachment D.

Deliverable 1: _____

Deliverable 2: _____

Deliverable 3: _____

Deliverable 4: _____

Deliverable 5: _____

Add more as necessary

For example:

- i. Provide suitable lighting in the public space located at (ADDRESS) between Street X and Street Y.
- i. Commission and install ten (10) structures with LED lighting with custom side panels.
- ii. Install four (4) benches at (ADDRESS).
- iii. Install signage at (ADDRESS)
- iv. Conduct outreach to the community through local media and social platforms owned by the City, Main Street Organization and the Chamber of Commerce and will include at least three (3) published communications promoting the public space improvements.

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

- Demonstrate the tangible value of “Smart Cities.”** This new category will encourage communities to develop and implement innovative programs that engage residents in accessing, understanding, and using data to increase quality of life for all. The intention with this category is to encourage applicants to demonstrate new ways to engage in decision-making about housing, transportation, economic development, placemaking, infrastructure, or other community aspect.
- 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, repair, 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)

23. 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 31)

24. 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.

25. 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? How will this project have a lasting impact in the community?

26. 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

27. Community Engagement. Please describe how residents and local organizations been engaged in the area's livable communities activities to date. How will you engage the community and involve older adults in the process as you execute this grant?

28. 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 mid-August.]

Estimated Project Start Date: _____

Estimated Project Completion Date: _____

Notes about Timeline: _____

29. Metrics. Fill in the table with the estimated 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.

Metric	Goal
Example: Number of People Served	50
(text)	
(text)	
(text)	
(text)	
(text)	

30. 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.

	Matching Funds (\$)	In-Kind Support
Non-Profit		
Private		
Public		

31. 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.) Add explanations if necessary.

	Expense	Additional information
Contracted services costs		
Staff costs, if any		
Office materials & supplies, if any		
Travel expenses, if any		
TOTAL REQUESTED		
Are there matching funds or services planned? What is their value?		

32. How will you use AARP branding?

33. AARP might be contacted by other potential funders that could be interested in funding projects that were not funded through the AARP Community Challenge. The potential funders may have additional process steps and funding requirements than those of the AARP Community Challenge. If requested, AARP would like to send your contact information, organization name and a short description of the proposal including the community where the project would take place (“Project Information”). Please note that these projects will be subject to any potential funder’s own terms, conditions and review. Please indicate in your application whether or not you give permission to AARP to share your contact information and a description of your proposal. If you select “yes” you agree on behalf of yourself and your organization to release AARP from all liability associated with sharing the Project Information with potential funders. We will alert you before this information is given to potential funders. **Do you give AARP permission to share this information with other organizations that might be interested in funding your project?**

YES

NO

NOTIFICATION

Successful applicants will be notified by email. In order to receive funding, selected applicants must execute and return a binding Memorandum of Understanding and completed financial forms to the AARP National office to lbos@aarp.org and communitychallenge@aarp.org by 11:59 p.m. ET, July 15, 2019. 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 Community Challenge 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.

ADDITIONAL TERMS AND CONDITIONS (continued)

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 11:59 p.m. ET, December 6, 2019. 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 lbs@aarp.org and communitychallenge@aarp.org.