

The intent of this application and subsequent contract is for all organizations to present a set of opportunities within the umbrella of one contracted program for each service area, i.e. Case Management services, Culturally Relevant services, Information, Outreach and Referral services and Independent Living Support services. Only programs that involve different participants for that service area, separate staff, a different schedule and are not an activity occurring during or as part of another program should be considered a stand-alone program with a separate application.

Responses to this RFP should be complete but succinct. Materials submitted in addition to Part 1 - Organization Narrative, Part 2 - Program Narrative(s) and Part 3 - Budget Narrative will not be considered in the evaluation of this proposal. Do not attempt to unlock/alter this form. Font should be no less than 11 pt.

If you need assistance related to the content of the application or are unclear about how to respond to any questions, please contact CDD staff: Yolanda Shelton-Morris, Community Resources Manager yshelton-morris@cityofmadison.com or Garrett Tusler, Community Development Specialist gtusler@cityofmadison.com. We are committed to assisting interested organizations understand and work through this application and funding process.

If you have any questions or concerns that are related to technical aspects of this document, including difficulties with text boxes or auto fill functions, please contact Garrett Tusler, gtusler@cityofmadison.com

## A NOTE REGARDING APPLICANT TYPE

Every agency applying for funding must submit an organizational history narrative per program detailing their agency's background, mission, and vision. If your agency is applying for multiple programs, each program application must be submitted separately with all the required submission documents (See RFP Guidelines 1.2 Required Information and Content of Proposals)

## Joint/Multi-agency Applicants

For those choosing to submit a joint/multi-agency proposal, only the designated 'lead agency' is required to complete and submit responses to questions 5-9 pertaining to partnership history, rationale for partner selection, division of roles and responsibilities, anticipated challenges, and any previous collaborations or partnerships. All other agencies participating in the joint application, listed in application as 'joint/partner agency', are still required to submit their organizational history narrative, as stated above.

| Legal Name of Organization: | Bridge Lake Point Waunona Neighborhood | nter | Total A Reques | \$ 13 |
| :---: | :---: | :---: | :---: | :---: |
| All program(s) connected to your organization: | Program Name: FRC Older Adult Program <br> Applicant Type: Single Agency Application <br> Program Type: Case Management Services <br> List Program Partner(s) (if applicable): <br> Choose an item., <br> Choose an item. |  | Amount Requested: \$30,400 <br> , Choose an item., |  |
|  | Program Name: Older Adult Resource and Referral Program <br> Applicant Type: Single Agency Application <br> Program Type: Information, Outreach, and Referral Services <br> List Program Partner(s) (if applicable): , Choose an item., Choose an item. |  | Amoun | $\text { ed: \$ } 4$ <br> tem., |
|  | Program Name: Older Adult Program <br> Applicant Type: Single Agency Application <br> Program Type: Culturally Relevant Services <br> List Program Partner(s) (if applicable): Choose an item., Choose an item., <br> Choose an item. |  | Amoun <br> Ch | d: \$ |
|  | Program Name: <br> Applicant Type: Choose an item. <br> Program Type: Choose an item. <br> List Program Partner(s) (if applicable): <br> Choose an item., <br> Choose an item. |  | Amoun | d: \$ <br> m., |
|  | If you are applying for more than four programs please contact Garrett Tusler gtusler@cityofmadison.com |  |  |  |
| Contact Person for application (Joint Applications Lead Org): | Richard Jones Jr | Email: richardj@blwcenter.org |  |  |
| Organization <br> Address: | 1917 Lake Point Dr. Madison, WI 53713 | Telephone: |  | -6991 |
| 501 (c) 3 Status: | $\boxtimes$ Yes $\square$ No | Fiscal Agent (if no) |  |  |

## Organizational Qualifications - All Applicants:

1. Organization History and Mission Statement

Since 2004, the mission of Bridge Lake Point Waunona Neighborhood Center (BLW), part of the Vera Court Neighborhood Center, Inc. agency, has been to support its community in addressing the needs identified by its residents. BLW offers growth and enrichment opportunities to community residents that reflect the changing needs,
strengths, and diversity of the community. Our goal has been to identify community needs and provide high quality programming to children, youth, and adults, in the areas of education, recreation, health, and nutrition. Located on the southeast side of Madison, BLW sits within the old Simpson Street neighborhood, a historically underserved area of the city. It is surrounded by neighborhoods composed of low-income families from diverse backgrounds, with a high ratio of Black and Latinx families who are socioeconomically disadvantaged and often unemployed or underemployed.
BLW Center has established legitimacy for offering quality programs and comprehensive services for community residents. Effective management of the organization over the past 9 years has enhanced progress attained through the City of Madison's revitalization efforts in the neighborhood since late 1990's. BLW Center is a recognized focal point that emphasizes a holistic approach in addressing community needs. Strong administration demonstrates a clear focus on the center mission \& benefits from guidance from the ground up as opposed to a top down leadership structure. Center staff and community members have collaborated to create a future vision for the center and the progress over the past six years has reflected these goals.
To appreciate the significant progress and development in the last 19 years it is necessary to understand the history of the community center and the Lake Point Neighborhood. Throughout the 1990s until the fall of 2003, community residents did not have a focal point to access effective programs and services. While a center existed, it was plagued by failed administration and deteriorated to be little more than a food pantry. In the fall of 2003, the center's director abruptly resigned followed by disintegration of the center's board. The City of Madison CDBG commission called upon the management of Vera Court Neighborhood Center, Inc. to step in and create an organization that would build a sense of pride among residents, and become a focal point and advocate for the community.
Under this management, BLW has been successful in obtaining the resources necessary to expand programming to respond to the escalating need among residents. In the past 19 years, the organization's capacity has increased significantly. Programs once outsourced to collaborative agencies are now entirely center-run. This not only enhanced resident involvement and feelings of ownership in the center, but resulted in programming that more effectively responds to the distinct needs of the community.
BLW has a strong history of providing programs and services for older adults. As BLW sits in one of the city's priority areas, BLW sees a lot of BIPOC, low-income older adults who seek support and empowerment. BLW has developed dynamic programs that help older adults with isolation and depression, healthy eating practices, physical health, and more. These programs are creating experiences that participants do not usually have access to, providing access to many different essential resources, and helping participants meet other community members. BLW programs allow opportunities for learning, fellowship, and help older adults feel wanted and cared for.
2. Describe your organization's experience implementing programming described in the Older Adult Services Policy Paper and Older Adult RFP Guidelines relevant to the programs you propose in this application. List all current older adult programs with their inception date.
The Family Resource Center (FRC) started in 2010 as the Latino Family Resource Center. Through the original purpose of guiding Latinx families to necessary resources and services that were difficult to obtain due to a language barrier, the program has grown to help almost 4,000 individuals gain access to resources such as mental health and medical services, education services, and legal support. Case management services were added to the FRC in 2022 with the addition of individual service plans, goal setting, and follow up plans for 10 families each year. With funding from this RFP, BLW will add two specific elements to the FRC for older adults: outreach, information, and referral services as well as 5 additional slots available for older adult case management.
The BLW Senior Program, now called the Older Adult Program, formed organically over time from the communicated needs and interests of the older adults in the BLW area. As new needs and interests were brought to the attention of BLW staff, more activities and services were added to the program. Because this program has a fluid and organic past, it is hard to put an exact start date, but this program has been running for at least six years. The Older Adult Program has a history of successful, culturally relevant activities, classes, and services such as health information fairs, strength and balance classes, nutrition classes, dance classes, chair yoga, mindfulness, tai chi, massage therapy, comprehensive medication reviews, breakfast outings, knitting and social, and various field trips.
3. Describe any significant changes or shifts at your agency since 2022 or anticipated changes in the next two years. For example, changes in leadership, turnover of management positions, strategic planning processes, expansion or loss of funding. What, if any affects have or will these changes make regarding the agency's ability to provide proposed services? If there are no changes, write "No changes".
BLW has experienced a good amount of positive change in the last few years, and anticipates more in the near future. In November of 2022, the agency hired a new Executive Director. In April of 2023, a new Development Director was hired after having the position be vacant for two years. In November of 2023, a new Center Director was hired at BLW. BLW is currently hiring for a new Family Resource Center Coordinator and plans to hire an Adult Program Manager. With these newer positions, BLW is working hard to strengthen and grow programs and services, especially those that serve emerging adults, parents, and older adults.
4. Describe your organization's experience, education and training requirements for management and older adult services program staff. Include how you support these requirements and other professional development opportunities.
BLW has a strong, 20 year history of listening to the needs of the community and implementing programs and services that meet those needs. There are multiple ways that BLW engages with the community, so that whenever a new idea is suggested, staff can do their best to make it happen. For all BLW staff with direct service responsibilities, program development is a required experience in order to ensure high quality, culturally relevant programs for participants of all ages. Specifically for adult and older adult programs, staff must be first aid and CPR certified and have older adult care training. All BLW staff need to be good listeners, have great problem solving abilities, adaptability, and flexibility, be at least 18 years of age, and be at least 21 years of age to drive BLW vans.

By January of 2025, BLW will hire a Family Resource Coordinator, as well as an Adult Program Coordinator contingent upon this funding. All staff who are hired need to pass a background check. The Family Resource Coordinator must have a post-high school training of an associate, bachelor, or master in a field related to health and human services and have case management experience. The Adult Program Coordinator must have at least two years of experience in a similar field working with older adults. Both these positions should have experience with service coordination, program planning, and program implementation.

BLW has a strong commitment to ongoing professional development. All staff participate in culturally relevant programming training. These include restorative justice, trauma informed care, implicit bias training and more. All staff in the agency meet monthly for relationship building and professional development. Each staff member has a professional development budget to pursue topics of interest to them, and all staff work with their supervisors to follow individualized professional development plans.

Agency leadership collaborate to create professional development pathways for all staff, including agency-wide core competency training, department specific training and tier specific training. This process will consist of ongoing dialogue with individual staff members and evaluation. We are in the process of developing asynchronous professional development training that staff can take at their own pace and choose training based on their own intrinsic motivations. Staff are also encouraged to attend conferences with focuses relevant to their positions.

The Family Resource Coordinator and Adult Program Coordinator will be provided professional development opportunities in the areas of case management, program development and design, software training, data usage retention, staff management, healing centered engagement, DEI training, and cultural competency training.

JOINT/MULTI-AGENCY APPLICATIONS ONLY - Lead Agency Applicant responses
Program name:
Program type: Choose an item.
5. Provide a brief overview of your partnership history with the collaborating agency/agencies. When and how did this partnership begin, and what collaborative initiatives have you undertaken together in the past?
6. Explain the rationale behind choosing to partner with the specific agency/agencies identified in this application. What unique strengths or resources does each organization bring to the partnership, and how do these complement one another?
7. Describe the division of roles and responsibilities between your organization and the collaborating agency within the proposed program. How will each partner contribute to program design, implementation, and evaluation?
8. Outline any challenges or barriers you anticipate encountering as a result of the partnership, and how you plan to address these collaboratively.
9. Detail any previous collaborations or partnerships with other organizations serving older adults, if applicable. What lessons or insights have you gained from these experiences that will inform your approach to this partnership?

# Older Adult Services <br> 2024 Request for Proposals PART 2 - Program Narrative Form 

Submit Application to: cddapplications@cityofmadison.com

## Deadline: 4:30 p.m. (CDT) on July 1st

Official submission date and time will be based on the time stamp from the CDD Applications inbox. Late applications will not be accepted
Part 2 - Program Narrative Form MUST be completed for EACH PROGRAM for which you are asking for funds.
Responses to this RFP should be complete but succinct. Materials submitted in addition to Part 1 Organization Narrative, Part 2 - Program Narrative(s) and Part 3 - Budget Narrative will not be considered in the evaluation of this proposal. Do not attempt to unlock/alter this form. Font should be no less than 11 pt.

## Joint/Multi-Agency Applicants

Only the designated 'lead agency' is required to submit the Program Narrative form on behalf of all identified partners listed in the application for applicants choosing to apply through a joint application.

If you need assistance related to the content of the application or are unclear about how to respond to any questions, please contact CDD staff: Yolanda Shelton-Morris, Community Resources Manager ysheltonmorris@cityofmadison.com or Garrett Tusler, Community Development Specialist gtusler@cityofmadison.com. We are committed to assisting interested organizations understand and work through this application and funding process.

If you have any questions or concerns that are related to technical aspects of this document, including difficulties with text boxes or auto fill functions, please contact Garrett Tusler - gtusler@cityofmadison.com

| Program Name: | Older Adult Resource and <br> Referral Program | Total Amount Requested for this <br> Program: | $\$ 40,000$ |
| :--- | :--- | :--- | :--- |


| Legal Name of Organization: | Bridge Lake Point Waunona Neighborhood Center | Total amount Requested for Lead/Single Applicant |  |  | \$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | Total Amount Requested for Partner 1: |  |  | \$ |
| Partner(s) (Joint/Multi- |  | Total Amount Requested for Partner 2: |  |  | \$ |
| Agency Applicants only): |  | Total Amount Requested for Partner 3*: |  |  | \$ |
| Program Contact: | Richard Jones Jr | Email: | richardj@b <br> Iwcenter.or g | Phone: | $\begin{aligned} & \text { 608-441- } \\ & 6991 \end{aligned}$ |
| Program Type: Select ONE Program Type for this form. |  |  |  |  |  |
| $\square$ Case Management Services |  |  |  |  |  |
| $\square$ Culturally Relevant Services |  |  |  |  |  |
| $\square$ Independent Living Support Services |  |  |  |  |  |
| $\boxtimes$ Outreach, Information, and Referral Services |  |  |  |  |  |
| considered distinct/stand-alone if the participants, staff and program schedule are separate from other programs, rather than an activity or pull-out group. |  |  |  |  |  |

*Click or tap here to enter text.

## 1. PROGRAM OVERVIEW

A. Need: Briefly describe the need in the City of Madison for the programs included in this application, including the source of the data used in your response.
Bridge Lake Point Waunona Neighborhood Center (BLW) has an established 20-year history with the community it serves. Older adults have been one of the main populations that have come to the center for support. BLW staff are in constant communication with older adults through daily conversations during walk-in hours, community events, community meals, and more. Through these conversions, older adults share their individual needs and rising community needs with BLW staff to seek support.

According to the EQT by Design Older Adult Services Engagement Analysis, "there are an estimated 63,599 older adults in the City of Madison over the age of 50 which represents about $26 \%$ of the population." BLW is located in census tract 15.01 , which borders a large CDD Equity Priority Area spanning several neighborhoods with very little community support services nearby. These neighborhoods have large populations of Black, Latinx, and white older adults who have many different concerns, needs, and desires. The EQT by Design report also states that many Black older adults "expressed the need for transportation and relevant programming," many Latinx older adults "sought health education, social activities, transportation options, and language access accommodations," and many white older adults, especially those who are low-income, "faced challenges in transportation and accessing information about available services." BLW meets many of these needs through culturally relevant programming, transportation resources and services, health education opportunities, social activities, Spanish/English translation and interpretation services, and advertising our services in many different accessible ways. When older adults in this area of Madison need resources or support, they know they can find a safe, supportive space at BLW.

One of the significant rising needs is outreach, information, and referral services. Many of the older adults in the BLW community face one or more barriers to accessing support or essential resources. Language, transportation, and economic barriers severely limit access to support BLW community members need. BLW addresses these barriers by providing free programs, bilingual (Spanish and English) staff, and having a location in the heart of the community.
B. Goal Statement: What is the goal of your program and how does it align with the scope of work described in the RFP guidelines?
The Older Adult Resources and Referral Program seeks to empower our older adult neighbors by connecting them to resources and information needed to live happy and healthy lives.
C. Program Summary ( $3-5$ sentences):

The Older Adult Resource and Referral Program is an all year program that offers outreach, information, and referral services to older adults in the BLW community. Clients can seek support during drop in hours, schedule an appointment, and/or attend quarterly resource fairs. Spanish and English speaking staff will be available to offer support and resource navigation in the areas of health insurance, mental health services, medical care, housing support, legal assistance, translation and interpretation services, and so much more.

## 2. POPULATION SERVED

A. Proposed Participant Population: Describe the intended service population that will be impacted by this program (e.g., location, ages, race/ethnicities, income ranges, English language proficiency, if applicable etc.) AND how this population was involved in the development of this program proposal.
The BLW Older Adult Resource and Referral Program will serve older adults age 55 and older in the immediate and surrounding neighborhoods of the center on the southeast side of Madison. BLW is located in census tract 15.01, located in a CDD Equity Priority Area, and is composed of the following racial demographics: 0.5\% American Indian/Alaskan Native, 3.6\% Asian, $14 \%$ Black, $20 \%$ Hispanic/Latinx, $11 \%$ Multiracial, and $60 \%$ white. There is a large population of Spanish speaking immigrants from countries in Central America, as well as many low-income individuals and families. This program will address multiple barriers for residents by having bilingual (Spanish and English) staff, being located within or nearby resident neighborhoods with an all ability accessible building, and providing all programming for free.

BLW has not tracked demographics for older adult participants, but will start with funding from this RFP. Program registration will include demographic information such as address, age, race/ethnicity, income range, and primary language.

BLW recruits for its programming through word of mouth, information on the website, monthly e-newsletters, social media, flyers, community events, food pantries, and more. Older adults who visit BLW and learn about available programs often share the information with friends and neighbors and invite them to participate or seek support. Visitors of the center are encouraged to take home a physical copy of our monthly calendar which features all the different events and programs that will be offered. BLW is also building relationships with local landlords and apartment management to leave marketing and recruitment information in these spaces.

When a community member comes to BLW seeking support from the Older Adult Resource and Referral Program, they first meet with Family Resource Center staff or the Center Director. During this initial meeting, the client will fill out a form indicating the type/s of support they are seeking along with contact and demographic information. The client will then meet with Family Resource Center staff to discuss available resources and create a short term plan. Family Resource Center staff will provide immediate information and assistance when possible, referrals and resource navigation when necessary, and recommendations for further actions when applicable. After this meeting takes place, staff will follow up with the client within the next 30 days to assess if further support is needed.
B. 2023 Participant Demographics (if applicable):

| Race | \# of Participants | \% of Total Participants |
| :--- | :--- | :--- |
| White/Caucasian |  |  |
| Black/African American |  |  |
| Asian |  |  |
| American Indian/Alaskan Native |  |  |
| Native Hawaiian/Other Pacific Islander |  |  |
| Multi-Racial |  |  |
| Balance/Other |  |  |


| Total: |  |  |
| :--- | :--- | :--- |
| Ethnicity |  |  |
| Hispanic or Latino |  |  |
| Not Hispanic or Latino |  |  |
| Total: |  |  |
| Gender |  |  |
| Man |  |  |
| Woman |  |  |
| Non-binary/GenderQueer |  |  |
| Prefer Not to Say |  |  |
| Total: |  |  |

Comments (optional):
C. Language Access and Cultural Relevance: Please describe how the proposed program will serve non-English speaking older adults. Describe how the proposed program will be culturally relevant to the population served.
To address language needs of the local population, the FRC Coordinator will be bilingual in English and Spanish. This program will work with Spanish speaking clients to address language barriers by accessing essential resources and services with interpretation and translation. All flyers, brochures, and other materials in the center will be available in English and Spanish. In order to lessen the language barriers in our center, opportunities to learn Spanish will also be provided to the community as programming and to the staff as professional development opportunities.

BLW programming is continuously responsive to the voiced needs of the community gathered through conversations, surveys, as well as data and research performed by the City of Madison. To ensure programs are appropriate, supportive, and responsive to the diverse needs of the community, BLW is willing to adapt the Older Adult Resource and Referral Program as it goes on to best support and empower the people in the community. The program can be flexible in communication methods, program offerings, hours of operation, and more.
D. Recruitment, Engagement, Intake and Assessment: Describe your plan to recruit, engage and address barriers to participation for the identified service population. Explain the intake and/or assessment procedure you will use for this program.
BLW recruits for its programming through word of mouth, information on the website, monthly enewsletters, social media, flyers, community events, food pantries, and more. Older adults who visit BLW and learn about available programs often share the information with friends and neighbors and invite them to participate or seek support. Visitors of the center are encouraged to take home a physical copy of our monthly calendar which features all the different events and programs that will be offered. BLW is also building relationships with local landlords and apartment management to leave marketing and recruitment information in these spaces.

When a community member comes to BLW seeking support from the Older Adult Resource and Referral Program, they first meet with Family Resource Center staff or the Center Director. During this initial meeting, the client will fill out a form indicating the type/s of support they are seeking along with contact and demographic information. The client will then meet with Family Resource Center staff to discuss available resources and create a short term plan. Family Resource Center staff will provide immediate information and assistance when possible, referrals and resource navigation when necessary, and recommendations for further actions when applicable. After this meeting takes place, staff will follow up with the client within the next 30 days to assess if further support is needed.

## 3. PROGRAM DESCRIPTION AND STRUCTURE

A. Activities: Describe your proposed program activities. If applicable, describe any evidence, research, proven curriculum, standards, or documentation of promising practice that supports the programming or service proposed.

BLW has a strong 20-year history on the southeast side of Madison. It is through this history in the same neighborhood that BLW has been able to establish strong relationships built on trust with local community residents. Residents in nearby and surrounding neighborhoods trust the staff at this agency to know their personal and sensitive information, such as immigration status, because of that history of trust. People walk into the community centers and they see friendly, diverse faces who they trust to help them more than social service organizations or even the school districts.

The Family Resource Center (FRC) has been doing outreach, information, and referral services for more than ten years, building on those established relationships and sense of trust to support more community members and connect them with essential services and resources. The Family Resource Coordinator will work with multiple systems together with the client to provide highly individualized plans to meet the unique needs of each person.

To support older adults in the BLW community, BLW will create the Older Adult Resource and Referral Program within the FRC to provide outreach, information, and referral services to older adults ages 55+. There will be drop in hours available for older adults to come in with questions and support requests, as well as opportunities for participants to make an appointment to discuss their situation. The Older Adult Resource and Referral Program will provide support in the areas of health insurance, mental health services, medical care, housing support, legal assistance, translation and interpretation services, and so much more.

The Older Adult Resource and Referral Program will also provide any necessary transportation support to referred organizations in the form of bus passes, taxi rides, gas cards, referred transportation services, and in rare cases, by staff in BLW vans.

In addition to resource referral and navigation, BLW will hold information and resource fairs every quarter to share information about Madison resources that can support older adults in the community. BLW staff will contact various organizations that provide information or services in the identified topic and invite them to set up a table to share what their organization offers.
B. Program/Service Schedule: If you are proposing to provide a program at more than one location and the program schedule is the same for all locations, please list all of the locations in the "Location(s)" cell in Table 1 below. If the program schedules vary amongst locations, please complete Table 2 and the question following the tables.

Table 1

| Day of the Week | Start Time | End Time |
| :--- | :--- | :--- |
| Monday |  |  |
|  |  |  |
| Tuesday | $11: 00 \mathrm{AM}$ | $7: 00 \mathrm{PM}$ |
|  |  |  |
| Wednesday | $11: 00 \mathrm{AM}$ | $7: 00 \mathrm{PM}$ |
|  |  |  |
| Thursday | $11: 00 \mathrm{AM}$ | $7: 00 \mathrm{PM}$ |
|  |  |  |
| Friday | $11: 00 \mathrm{AM}$ | $7: 00 \mathrm{PM}$ |
| Saturday |  |  |
|  | $11: 00 \mathrm{AM}$ | $7: 00 \mathrm{PM}$ |
| Sunday |  |  |
|  |  |  |

Table 2 (optional)

| Day of the Week | Start Time | End Time |
| :--- | :--- | :--- |
| Monday |  |  |
|  |  |  |
| Tuesday |  |  |


|  |  |  |
| :--- | :--- | :--- |
| Wednesday |  |  |
|  |  |  |
| Thursday |  |  |
|  |  |  |
|  |  |  |
| Saturday |  |  |
|  |  |  |

If applicable, please list the third location and any subsequent locations. Include the specific program schedule(s) differences as compared to the programs included in the tables above.

## 4. ENGAGEMENT COORDINATION AND COLLABORATION

A. Family Engagement: Describe how your program will engage caregivers, guardians, and/or family of participants in the development of this proposal, and how they will be involved in the implementation and assessment of the program activities.
The Older Adult Resource and Referral Program will work with the family members of the client with the client's permission. As most current BLW clients live independently, families will be engaged with case management services only when necessary. If the established plan of care involves communicating with or supporting client family members, staff will engage in frequent dialogue to ensure the program and services are responsive to needs. Family members will also be invited to participate in quarterly surveys and other program assessment tools to share positive aspects of the program or ideas for improvement.
B. Neighborhood/Community Engagement: Describe how your program will engage neighborhood residents or other relevant community stakeholders in the development of this proposal, and how they will be involved in the implementation and assessment of the program activities.
As a result of community feedback gathered through partnerships and ongoing discussions directly with community members, BLW develops activities and goals that are reflective of community needs, concerns, and interests. We address racial equity and social justice by engaging in regular conversations with our community, gathering data from quarterly community surveys, and hosting community feedback meetings.

In addition, we encourage input from all our participants, as it is their ideas that keep our program exciting, relevant, and aligned with interests and needs.
C. Collaboration: Please complete the table below and respond to the narrative questions regarding program collaboration with community partners.

Note: Agencies listing a partner/collaborator below in addition to any 'joint/partner applicant' (if applicable) for their program should include a letter of commitment/support from the agency partner highlighting the ways in which the agency will support the program.

| Partner Organization | Role \& Responsibilities | Contact Person | Signed MOU <br> (Yes/No)? |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |


|  |  |  |  |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |

List any additional partners, their role \& responsibilities, contract person and MOU information (if applicable):
BLW will identify and engage new partners to improve the Older Adult Resource and Referral Program and to fill the needs of community members. New partnership needs will be identified through dialogue with community members, program evaluations, surveys, and data from the City of Madison. BLW staff will connect with other organizations providing older adult services, attend information and networking events, and participate in the COALESCE cohort.

How do these partnerships enhance this proposal?

What are the decision-making agreements with each partner?
D. Resource Linkage and Coordination: What resources are provided to participants and their families/loved ones by your proposed program/service? How does the program coordinate and link participants to these resources?
The Older Adult Resource and Referral Program will provide outreach, information, and referral services in the areas of health insurance, mental health services, medical care, housing support, legal assistance, and more. BLW will build strong partnerships and relationships with various organizations and resources, establishing persons of contact for when clients must be referred. These groups will be nearby when possible, culturally responsive, and accessible.

BLW will identify and engage with current and new partners by connecting with other organizations providing older adult services, attending information and networking events, and participating in the COALESCE cohort.

## 5. PROGRAM QUALITY, OUTPUTS, OUTCOMES AND MEASUREMENT

A. Program Outputs - Unduplicated Older Adults and/or Program Hours

Total Annual Unduplicated Older Adults served through proposed program/service: 65
Total program/service hours annually: 2,080
B. Program Outcomes

Please describe the data and the data source used to choose your outcome objectives.
BLW selected the two pre-written outcome objectives created by the CDD for this RFP and did not create a third one.

Using the drop-down menu, please select the Program Outcome \#2 for your proposed program(s), listed under each respective funding priority found in RFP Guidelines 1.6 Measurements of Success, that you will track and measure. Complete the table(s) below.
Outcome Objective \#1: 75\% of clients/participants report that the services/assistance they receive help them achieve the quality of life that they desire.

| Performance Standard | Targeted Percent | $75 \%$ | Targeted <br> Number | 49 |
| :--- | :--- | :--- | :--- | :--- |

## Measurement Tool(s) and Comments:

Participants will complete a survey at the end of their individual service plan, or on a quarterly basis
Outcome Objective \#2: Information, Outreach, and Referral Services Outcome - Measure the rise in the number of individuals and households accessing assistance, referrals, and navigation services, indicating the program's effectiveness in meeting community needs.

| Performance Standard |
| :--- |
| Targeted Percent |
| Measurement Tool(s) and Comments: <br> The FRC Coordinator will track client data in a case management software and keep track of the number <br> of individuals and households accessing the program. |


| Outcome Objective \#3 (optional): |  |  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :---: | :---: |
| Performance Standard | Targeted Percent | Targeted <br> Number |  |  |  |  |

## Measurement Tool(s) and Comments:

If necessary, add additional outcome objectives, performance standards, targeted percent, targeted number, and measurement tools:
C. Data Tracking: What data tracking systems are in place or will be in place to capture the information needed to document demographics, program activities, outcome measures and expenses?
BLW will purchase a case management software that has the ability to also track program activities and information. Only relevant staff members will have access to this software to ensure information is safe, and different staff members will have different levels of access to the information based on relevancy. Within that system BLW will store and track demographics, different program activities, referred resources, and more. This data will be analyzed to make any necessary changes to program activities and services in order to meet program goals and client needs.

Expenses will be tracked using a system consisting of Quickbooks and Google Sheets. Any receipts or invoices will be marked with the program name and type of purchase and then be entered into this system accordingly, while personnel expenses will be automatically split into necessary programs.

## 6. PROGRAM LOCATION

A. Address(es) of the site where programs/services will occur:

1917 Lake Point Dr. Madison, WI 53713
B. Drawing upon the insights outlined in RFP Guidelines 1.5 Equity Priority Areas, please elaborate on your agency's strategies for integrating this information into the development of your proposed program/service. Furthermore, please explain on how your program/service will effectively reach and support individuals residing within or in close proximity to Equity Priority Areas. If applicable, please list any collaborations with existing agencies dedicated to serving and/or operating within the identified areas.
BLW is located in census tract 15.01, which borders a large CDD Equity Priority Area spanning several neighborhoods with very little community support services nearby. These neighborhoods have large populations of Black, Latinx, and white older adults who have many different concerns, needs, and desires. BLW will implement programming that targets older adults within this area. The EQT by Design report states that many Black older adults "expressed the need for transportation and relevant programming," many Latinx older adults "sought health education, social activities, transportation options, and language access accommodations," and
many white older adults, especially those who are low-income, "faced challenges in transportation and accessing information about available services." Through conversations with community members, BLW staff know that many older adults in the community are struggling with the increasing cost of living while surviving on a fixed income. Many older adults are requesting help paying for medications, transportation, and housing payments. There are also lots of requests for assistance with home maintenance, yard work, and food security. BLW meets many of these needs through culturally relevant programming, transportation resources and services, health education opportunities, social activities, Spanish/English translation and interpretation services, food pantries, resource navigation, and community meals, and advertising our services in many different accessible ways. When older adults in this area of Madison need resources or support, they know they can find a safe, supportive space at BLW. To reach more older adults within the nearby Equity Priority Areas, BLW will reach out to landlords, apartment management, and local businesses to leave flyers and information about available programs and services.

## 7. PROGRAM STAFFING AND RESOURCES:

A. Program Staffing: Full-Time Equivalent (FTE) - Include employees, AmeriCorps Senior members and Interns with direct program implementation responsibilities. $\mathrm{FTE}=\%$ of 40 hours per week.
*Use one line per individual employee

| Position Title | Qualifications or Required Training | Location(s) |
| :--- | :--- | :--- |
| Family Resource Center <br> Coordinator | Post-high school training in field <br> related to health and human <br> services | 1917 Lake Point Dr <br> Madison, WI 53713 |
| Adult Program <br> Coordinator | Post-high school degree or two <br> to four years related experience, <br> or an equivalent combination of <br> education and experience <br> providing direct service to older <br> adults. | 1917 Lake Point Dr <br> Madison, WI 53713 |
| Center Director | Program development, ability to <br> supervise multiple departments, <br> community minded, problem <br> solving skills. | 1917 Lake Point Dr <br> Madison, WI 53713 |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Volunteers: If volunteers will have direct contact with program participants, how are they vetted, trained and supervised?
People who are interested in volunteering in this program must first fill out a volunteer application, then the Center Director will follow up with that individual and do an initial evaluation. Once they are approved to volunteer, they will go through training specifically for the area they are volunteering in. All volunteers working with older adults will get general older adult care training. Volunteers who are in this program more regularly and frequently will have the option and opportunity for more in depth training such as first aid, CPR, and servsafe certification. Volunteers will be supervised primarily by the Center Director with support from BLW staff.
B. Other program Resources/Inputs (such as program space, transportation or other resources necessary for the success of your program:
BLW currently has a 15 passenger van and a 12 passenger van that can be used to transport participants on any relevant excursions

## 8. BUDGET

A. The budget should be submitted with the proposal using the template provided in an Excel document or a PDF. There are five tabs within the Excel spreadsheet: Cover Page, Organization Overview and one sheet for the Program Budget for each program. The Cover Page, Organizations Overview and relevant Program Budgets must be submitted with this document for a proposal to be complete.

Joint/Multi-Agency Applications
B. All Joint/Partner Agencies listed on page 2 of this Program Narrative form must also complete a Budget Narrative form to be submitted alongside all required materials.

The budget template and budget narrative can be found on the CDD Funding Opportunities website.

## 9. If applicable, please complete the following:

A. Disclosure of Conflict of Interest

Disclose any potential conflict of interest due to any other clients, contracts, or property interests, e.g. direct connections to other funders, City funders, or potentially funded organizations, or with the City of Madison.
B. Disclosure of Contract Failures, Litigations

Disclose any alleged significant prior or ongoing contract failures, contract breaches, any civil or criminal litigation.

## APPLICATION FOR 2024 OLDER ADULT SERVICES PROGRAMS

## 1. ORGANIZATION CONTACT INFORMATION

| Legal Name of Organization | Bridge Lake Point Waunona Neighborhood Center |
| :---: | :---: |
| Mailing Address | 1917 Lake Point Dr. Madison, WI 53713 |
| Telephone | 608-441-6991 |
| FAX | 608-441-6993 |
| Director | Richard Jones Jr. |
| Email Address | richardj@blwcenter.org |
| Additional Contact | Michelle McKoy |
| Email Address | michellem@blwcenter.org |
| Legal Status | Private: Non-Profit |
| Federal EIN | 39-1945609 |


| 2. PROPOSED PROGRAMS |  | 2025 | If currently City funded |  |
| :---: | :---: | :---: | :---: | :---: |
| Program Name: | Letter | Amount Requested | 2024 Allocation | Joint/Multi Application SELECT Y/N |
| FRC Older Adult Program | A | \$30,400 |  |  |
| Contact: |  |  |  |  |
| Older Adult Resource and Referral | B | \$40,000 |  |  |
| Contact: |  |  |  |  |
| Older Adult Program | C | \$66,800 |  |  |
| Contact: |  |  |  |  |
|  | D |  |  |  |
| Contact: |  |  |  |  |
|  | E |  |  |  |
| Contact: |  |  |  |  |
| TOT | QUEST | \$137,200 |  |  |

## DEFINITION OF ACCOUNT CATEGORIES:

Personnel: Amount reported should include salary, taxes and benefits. Salary includes all permanent, hourly and seasonal staf Taxes/benefits include all payroll taxes, unemployment compensation, health insurance, life insurance, retirement benefits, etc.

Operating: Amount reported for operating costs should include all of the following items: insurance, professional fees and audit postage, office and program supplies, utilities, maintenance, equipment and furnishings depreciation, telephone,
training and conferences, food and household supplies, travel, vehicle costs and depreciation, and other operating related cost

Space: Amount reported for space costs should include all of the following items: Rent/Utilities/Maintenance: Rental costs for office space; costs of utilities and maintenance for owned or rented space. Mortgage Principal/Interest/Depreciation/Taxes: Costs with owning a building (excluding utilities and maintenance).

Special Costs: Assistance to Individuals - subsidies, allowances, vouchers, and other payments provided to clients. Payment to Affiliate Organizations - required payments to a parent organization. Subcontracts - the organization subcontracts for service being purchased by a funder to another agency or individual. Examples: agency subcontracts a specialized counseli service to an individual practitioner; the agency is a fiscal agent for a collaborative project and provides payment to other agenc
3. SIGNATURE PAGE

## AFFIRMATIVE ACTION

If funded, applicant hereby agrees to comply with City of Madison Ordinance 39.02 and file either an exemption or an affirmative action plan with the Department of Civil Rights. A Model
Affirmative Action Plan and instructions are available at cityofmadison.com/civil-rights/contract-compliance.

## CITY OF MADISON CONTRACTS

If funded, applicant agrees to comply with all applicable local, State and Federal provisions. A sample contract that includes standard provisions may be obtained by contacting the Community Development Division at 266-6520.
If funded, the City of Madison reserves the right to negotiate the final terms of a contract with the selected agency.

## INSURANCE

If funded, applicant agrees to secure insurance coverage in the following areas to the extent required by the City Office of Risk Management: Commercial General Liability, Automobile Liability, Worker's Compensation, and Professional Liability. The cost of this coverage can be considered in the request for funding.

## 4. SIGNATURE

Enter name: Richard Jones Jr

By entering your initials in the box you are electronically signing your name and agreeing to the terms listed above.

DATE 6/30/2024
INITIALS:
RJ
f costs.
t,
s.

## 5. BOARD-STAFF DEMOGRAPHICS

Indicate by number the following characteristics for your agency's current board and staff. Refer to application instructions for definitions. You will receive an "ERROR" until you finish completing the demographic information.

6. Does the board composition and staff of your agency represent the racial and cultural diversity of the residents you serve? If not, what is your plan to address this? (to start a new paragraph, hit ALT+ENTER)
Yes for staff, in progress for board. We are in the middle of a recruitment process for 2025's Board of Directors and plan to add more people who represent the racial and cultural diversity of the community.

## 7. AGENCY GOVERNING BODY

How many Board meetings were held in 2023
How many Board meetings has your governing body or Board of Directors scheduled for 2024?
How many Board seats are indicated in your agency by-laws?

|  |
| :--- |
|  |
| At least 5 |

List your current Board of Directors or your agency's governing body.

| Name | Corinda Rainey-Moore |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Home Address | 1306 Glacier Hill Dr Madison, WI 53704 |  |  |  |  |
| Occupation | ED of Elder Care of Dane County |  |  |  |  |
| Representing | President |  |  |  |  |
| Term of Office |  | From: | mm/yyyy | To: | mm/yyyy |
| Name | David Krause |  |  |  |  |
| Home Address | 5346 West Rd \#16 Madison, WI 53704 |  |  |  |  |
| Occupation | Retired School Principal |  |  |  |  |
| Representing | Treasurer |  |  |  |  |
| Term of Office |  | From: | mm/yyyy | To: | mm/yyyy |
| Name | Linda Hoskins |  |  |  |  |
| Home Address | 2417 Cypress Way \#107 Madison, WI 53713 |  |  |  |  |
| Occupation | Retired Teacher |  |  |  |  |
| Representing |  |  |  |  |  |
| Term of Office |  | From: | mm/yyyy | To: | mm/yyyy |
| Name | Daniel Steinbring |  |  |  |  |
| Home Address | 9 Woodridge Ct. Apt 6 Madison, WI 53704 |  |  |  |  |
| Occupation | Youth Program Director |  |  |  |  |
| Representing |  |  |  |  |  |
| Term of Office |  | From: | mm/yyyy | To: | mm/yyyy |
| Name | Samuel Schweder |  |  |  |  |
| Home Address | 6903 Littlemore Dr Apt 201 Madison, WI 53718 |  |  |  |  |
| Occupation | Development and Quality Insurance Officer |  |  |  |  |
| Representing |  |  |  |  |  |
|  |  | From: | mm/yyyy | To: | mm/yyyy |
| Name |  |  |  |  |  |
| Home Address |  |  |  |  |  |
| Occupation |  |  |  |  |  |
| Representing |  |  |  |  |  |
| Term of Office |  | From: | mm/yyyy | To: | mm/yyyy |
| Name |  |  |  |  |  |
| Home Address |  |  |  |  |  |
| Occupation |  |  |  |  |  |
| Representing |  |  |  |  |  |
| Term of Office |  | From: | mm/yyyy | To: | mm/yyyy |
| Name |  |  |  |  |  |
| Home Address |  |  |  |  |  |
| Occupation |  |  |  |  |  |
| Representing |  |  |  |  |  |
| Term of Office |  | From: | mm/yyyy | To: | mm/yyyy |

AGENCY GOVERNING BODY cont.

**Instructions: Complete this workbook in tab order, so the numbers will autofill correctly. Only fill in the yellow cells. Only use whole numbers, if using formulas or amounts with cents, convert to whole number before submitting to CDD.

Please fill out all expected revenues for the programs you are requesting funding for in this application. All programs not requesting funding in this application, should be combined and entered under NON APP PGMS (last column)

| REVENUE SOURCE | $\begin{gathered} \text { AGENCY } \\ 2025 \end{gathered}$ | PROGRAM <br> A | PROGRAM B | PROGRAM <br> C | PROGRAM <br> D | PROGRAM E | NON APP PGMS |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| DANE CO HUMAN SVCS | 9,704 | 4,852 | 4,852 |  |  |  |  |
| UNITED WAY DANE CO | 37,000 | 0 | 0 |  |  |  | 37,000 |
| CITY CDD (This Application) | 137,200 | 30,400 | 40,000 | 66,800 |  |  |  |
| City CDD (Not this Application) | 258,198 | 22,000 |  |  |  |  | 236,198 |
| OTHER GOVT* | 0 |  |  |  |  |  |  |
| FUNDRAISING DONATIONS** | 34,300 | 7,600 | 10,000 | 16,700 |  |  |  |
| USER FEES | 0 |  |  |  |  |  |  |
| TOTAL REVENUE | 476,402 | 64,852 | 54,852 | 83,500 | 0 | 0 | 273,198 |

*OTHER GOVERNMENT: Includes all Federal and State funds, as well as funds from other counties, other Dane County Departments, and all other Dane County cities, villages, and townships.
**FUNDRAISING: Includes funds received from foundations, corporations, churches, and individuals, as well as those raised from fundraising events.

Enter all expenses for the programs in this application under the PGM A-E columns. Enter the amount you would like the City to pay for with this funding under the CITY SHARE column **Use whole numbers only, please.

| ACCOUNT CATEGORY | $\begin{gathered} \hline \text { AGENCY } \\ 2025 \end{gathered}$ | TTL CITY REQUEST | $\begin{gathered} \hline \text { PGM } \\ \text { A } \end{gathered}$ | $\begin{gathered} \hline \text { CITY } \\ \text { SHARE } \end{gathered}$ | $\begin{gathered} \hline \text { PGM } \\ \text { B } \end{gathered}$ | $\begin{gathered} \hline \text { CITY } \\ \text { SHARE } \end{gathered}$ | $\begin{gathered} \hline \text { PGM } \\ \text { C } \end{gathered}$ | CITY SHARE | $\begin{gathered} \hline \text { PGM } \\ \text { D } \end{gathered}$ | CITY SHARE | $\begin{gathered} \hline \text { PGM } \\ \text { E } \end{gathered}$ | $\begin{gathered} \hline \text { CITY } \\ \text { SHARE } \end{gathered}$ | NON APP PGMS |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| A. PERSONNEL <br> Salary <br> Taxes/Benefits | 75,000 25,000 | $\begin{aligned} & 56,925 \\ & 18,975 \end{aligned}$ | $\begin{array}{r} 22,500 \\ 7,500 \end{array}$ | $\begin{array}{r} 15,675 \\ 5,225 \end{array}$ | $\begin{aligned} & 30,000 \\ & 10,000 \end{aligned}$ | 24,375 8,125 | $\begin{array}{r} 22,500 \\ 7,500 \end{array}$ | $\begin{array}{r} 16,875 \\ 5,625 \end{array}$ |  |  |  |  |  |
| Subtotal A. | 100,000 | 75,900 | 30,000 | 20,900 | 40,000 | 32,500 | 30,000 | 22,500 | 0 | 0 | 0 | 0 | 0 |
| B. OTHER OPERATING Insurance <br> Professional Fees/Audit <br> Postage/Office \& Program <br> Supplies/Printing/Photocopy <br> Equipment/Furnishings/Depr. <br> Telephone <br> Training/Conferences <br> Food/Household Supplies <br> Travel <br> Vehicle Costs/Depreciation <br> Other | 0 0 0 18,000 0 0 21,000 15,000 3,500 0 4,500 | 0 0 0 13,000 0 0 8,000 13,000 2,000 0 3,800 | $\begin{aligned} & 5,250 \\ & 7,000 \end{aligned}$ | $\begin{aligned} & 4,250 \\ & 5,000 \end{aligned}$ | $\begin{aligned} & 7,250 \\ & 7,000 \end{aligned}$ | $\begin{aligned} & 4,250 \\ & 3,000 \end{aligned}$ | $\begin{array}{r} 5,500 \\ \\ 7,000 \\ 15,000 \\ 3,500 \\ \\ 4,500 \end{array}$ | 4,500 <br> 13,000 <br> 2,000 <br> 3,800 |  |  |  |  |  |
| Subtotal B. | 62,000 | 39,800 | 12,250 | 9,250 | 14,250 | 7,250 | 35,500 | 23,300 | 0 | 0 | 0 | 0 | 0 |
| C. SPACE <br> Rent/Utilities/Maintenance <br> Mortgage Principal/Interest Depreciation/Taxes | 4,500 0 0 | 0 0 0 | 1,500 |  | 1,500 |  | 1,500 |  |  |  |  |  |  |
| Subtotal C. | 4,500 | 0 | 1,500 | 0 | 1,500 | 0 | 1,500 | 0 | 0 | 0 | 0 | 0 | 0 |
| D. SPECIAL COSTS <br> Assistance to Individuals <br> Partner/Joint Agency/Agencies <br> Contractors/Subcontractors <br> Pymt to Affiliate Orgs <br> Other | 0 0 0 28,500 0 | $\begin{array}{r} 0 \\ 0 \\ 0 \\ 21,500 \\ 0 \\ \hline \end{array}$ | 250 | 250 | 250 | 250 | 28,000 | 21,000 |  |  |  |  |  |
| Subtotal D. | 28,500 | 21,500 | 250 | 250 | 250 | 250 | 28,000 | 21,000 | 0 | 0 | 0 | 0 | 0 |
| TOTAL (A.-D.) | 195,000 | 137,200 | 44,000 | 30,400 | 56,000 | 40,000 | 95,000 | 66,800 | 0 | 0 | 0 | 0 | 0 |

**List all staff positions related to programs requestiong funding in this application, and the amount of time they will spend in each program.

|  |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Title of Staff Position* | 2025 $\substack{\text { Program A } \\ \text { FTE** }}$ | 2025 Program B FTE** | Program C FTE** | 2025 Program D FTE** | 2025 <br> Program E FTE** | $2025$ <br> Total FTE | 2025 <br> Annualized Salary | 2025 <br> Payroll <br> Taxes and Fringe Benefits | $\begin{aligned} & 2025 \\ & \text { Total } \end{aligned}$ Amount | 2025 $\begin{gathered}\text { Hourly } \\ \text { Wage*** }\end{gathered}$ | 2025 <br> Amount Requested from the City of Madison |
| BLW Center Director | 0.06 | 0.25 | 0.06 |  |  | 0.37 | 63,000 | 17,383 | 80,383 | 30.29 | 32,950 |
| Family Resource Center Coordir | 0.70 | 0.30 |  |  |  | 1.00 | 48,000 | 15,499 | 63,499 | 23.08 | 17,950 |
| Adult Program Coordinator |  | 0.36 | 0.36 |  |  | 0.72 | 27,000 | 2,126 | 29,126 | 12.98 | 25,000 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
| SUBTOTAL/TOTAL: | 0.76 | 0.91 | 0.42 | 0.00 | 0.00 | 2.09 | 138000.00 | 35008.00 | 173008.00 | 66.35 | 75900.00 |

CONTINUE BELOW IF YOU NEED MORE ROOM FOR STAFF POSITIONS
*List each staff position separately. Indicate number of weeks to be employed if less than full year in parentheses after their title.
**Full Time Equivalent ( $1.00, .75, .60, .25$, etc.) 2,080 hours $=1.00$ FTE
**List all staff positions related to programs requestiong funding in this application, and the amount of time they will spend in each program.

|  | 2025 | 2025 | 2025 | 2025 | 2025 | 2025 | 2025 |  | 2025 | 25 | 5 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Title of Staff Position* | $\begin{gathered} \text { Program A } \\ \text { FTE** } \end{gathered}$ | Program B FTE** | $\begin{gathered} \text { Program C } \\ \text { FTE** }^{* *} \end{gathered}$ | Program D FTE** | Program E FTE** | Total FTE | Annualized Salary | Payroll Taxes and Fringe Benefits | Total Amount | Hourly <br> Wage*** | Amount Requested from the City of Madison |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
|  |  |  |  |  |  | 0.00 |  |  | 0 | 0.00 | 0 |
| TOTAL: | 0.76 | 0.91 | 0.42 | 0.00 | 0.00 | 2.09 | 138000.00 | 35008.00 | 173008.00 | 66.35 | 75900.00 |

[^0]
## Program Summary

This tab should be completely filled in by your previous answers.

| Pgm Letter | Program Name | Program Expenses | 2025 City Request |
| :---: | :---: | :---: | :---: |
| A | FRC Older Adult Program | PERSONNEL | 20,900 |
|  |  | OTHER OPERATING | 9,250 |
|  |  | SPACE | 0 |
|  |  | SPECIAL COSTS | 250 |
|  |  | TOTAL | 30,400 |
| B | Older Adult Resource and ReferralProgram | PERSONNEL | 32,500 |
|  |  | OTHER OPERATING | 7,250 |
|  |  | SPACE | 0 |
|  |  | SPECIAL COSTS | 250 |
|  |  | TOTAL | 40,000 |
| C | Older Adult Program | PERSONNEL | 22,500 |
|  |  | OTHER OPERATING | 23,300 |
|  |  | SPACE | 0 |
|  |  | SPECIAL COSTS | 21,000 |
|  |  | TOTAL | 66,800 |
| D | 0 | PERSONNEL | 0 |
|  |  | OTHER OPERATING | 0 |
|  |  | SPACE | 0 |
|  |  | SPECIAL COSTS | 0 |
|  |  | TOTAL | 0 |
| E | 0 | PERSONNEL | 0 |
|  |  | OTHER OPERATING | 0 |
|  |  | SPACE | 0 |
|  |  | SPECIAL COSTS | 0 |
|  |  | TOTAL | 0 |
| TOTAL FOR ALL PROGRAMS |  |  | 137,200 |


[^0]:    *List each staff position separately. Indicate number of weeks to be employed if less than full year in parentheses after their title
    **Full Time Equivalent ( $1.00, .75, .60, .25$, etc.) 2,080 hours $=1.00$ FTE

