

**2020 GREATER HARRISBURG
COMMUNITY FOUNDATION
BENJAMIN FRANKLIN TRUST FUND
GRANT APPLICATION
DATE DUE: AUGUST 1, 2020**

Thank you for applying to the Benjamin Franklin Trust Fund of the Greater Harrisburg Community Foundation, a regional foundation of The Foundation for Enhancing Communities. Tell your story clearly and concisely. Attachments are required; follow all directions. Failure to answer questions, utilize this template, or provide required materials will disqualify your application. **Answer all questions using information that applies to the project seeking support of grant funds.** Contact Jennifer Strechay, Program Officer for Community Investment, at 717-236-5040 or jstrechay@tfec.org with questions.

APPLICANT SNAPSHOT

Applicant Organization Name

Carlisle CARES dba Community CARES

Provide your organization's name as currently recognized by the IRS

Check box if the Applicant Organization Name above is a "Doing Business As" name and the provided 501c3 letter states a different name. *To be recognized by the "Doing Business As" name, attach ONE legal document using the provided name. If not provided, TFEC will utilize the 501c3 name.*

Check box if the Applicant Organization uses a Fiscal Sponsor and provide name here

Click or tap here to enter text.

Name, Title, Email, Phone of Executive Leader

Beth Kempf, Executive Director, bkempf@morethanshelter.org, 717-249-1009 ext. 2226

All contracts and notifications of grant status will be addressed to the individual provided here

Applicant Organization's Physical Address

50 W. Penn St., Carlisle, PA 17013

Applicant Organization's Address for Mailed Communications

50 W. Penn St., Carlisle, PA 17013

All contracts and notifications of grant status will be sent to the address provided here

Name, Title, Email, Phone of Contact Completing Application

Ann Carney, Finance Coordinator, acarney@morethanshelter.org, 717-249-1009 ext. 2227

If application questions arise, this individual will be contacted by TFEC staff

Counties to be served as part of project; check all that apply.

- Cumberland Dauphin Franklin Juniata Mifflin
 Lebanon Perry
 Northern York (Dillsburg Area)

PROJECT NARRATIVE

Answer questions 1-5 clearly and concisely; no limit (except for Project Snapshot)

PROJECT TITLE Resources for the Homeless

Project Title must match title listed throughout application and online

APPLICANT ORGANIZATION MISSION STATEMENT

Serving and strengthening the community by providing emergency shelter, resources and supportive services to individuals and families experiencing homelessness.

PROJECT SNAPSHOT

1. Capture your project and the community need it seeks to address in 200 words or less.

Homelessness has been classified as a health emergency and navigating the challenges of homelessness is difficult. Some leading causes of homelessness are lack of affordable housing, physical and mental illnesses, unemployment and poverty. HUD's (Housing and Urban Development) housing first model supports the evidence that the more quickly an individual can be stabilized with housing, the better able they are to deal with other barriers (such as addiction issues, mental health concerns, etc.). This model promotes housing individuals without restrictions based on these barriers.

Unfortunately, due to these barriers, access to affordable housing is often limited and individuals who are homeless seek support through our emergency shelter and street outreach (Cumberland Street Reach) programs. In this case, our goal is to provide resources that will promote stability and independence, making homelessness rare, brief and non-recurring. This project seeks to alleviate some of the barriers to homelessness by providing support to overcome these barriers. These supports, when combined with case management and other community resources, will help those experiencing homelessness obtain jobs and housing more quickly and will help provide access to medications and health care to attend to mental and physical health concerns.

PROJECT NARRATIVE

2. Describe the proposed project, the geographic area it will serve, and the audience to be served; state why this audience was selected. You **MUST** use and complete the following statement within your answer, "Grant funds will be used to _____". Include when and where the project will take place. List dates and locations as appropriate in chronological order and state if provided dates/locations are confirmed, estimated, or to be determined.

Community CARES has been in service for over 15 years. In 2004 members of a local church recognized the problem of homelessness locally and were compelled to take action. Soon after, other churches joined in opening their doors to the area's homeless. In 2009, CARES became a 501(c) 3 nonprofit organization and today provides outreach, coordinated entry, emergency overnight shelter, resources and supportive services to single women, men and families at risk of or experiencing homelessness in Cumberland County, 365 days a year.

Community CARES is a 501(c)3 public charity which operates several programs, all focused on assisting people at risk of or experiencing homelessness. Hosted by local area churches which rotate monthly, the shelters provide overnight emergency shelter to individuals and families experiencing homelessness. **Cumberland Street Reach** is a mobile outreach program designed to engage, assess and combat homelessness for individuals and families who are at risk of losing their home and those living on the streets, in encampments and in locations not intended for human habitation, throughout Cumberland County. The Resource Center is the hub of our daytime operations for both staff and residents. Here, residents receive supportive services and access to other necessary basic needs including a place to do laundry, take showers, receive mail, make phone calls, cook meals, and rest when they are ill

or working nights. Residents meet weekly with a Supportive Service Coordinator to develop housing plans and strategies to overcome some of the unique barriers they face as they work toward stability and independence.

At Community CARES, our priority is to get people housed as quickly as possible. In the meantime, we provide supports and help develop housing plans and strategies to work on barriers to homelessness building independence and stability. Supportive Services Coordinators work with individuals and families to provide assistance and direction when applying for housing assistance, jobs, SSI/SSDI benefits, public assistance and by making the necessary referrals to agencies and organizations for services and resources in the community.

These grant funds will be used to help individuals obtain the proper identifications needed when seeking employment and filing for housing assistance in Cumberland County, including birth certificates and/or Pennsylvania state identification cards (\$20-\$30 per item/per person). The grant funds will be used to assist individuals who cannot afford life sustaining medications by providing funds to pay required prescription co-pays (typically \$2-\$6 per medication). Individuals without a vehicle or income have few options to get to and from doctors and mental health appointments, hospital visits, and other necessary appointments or to reach other locations where housing may be available. These grant funds will be used to help pay for essential transportation for those who demonstrate a financial need. Funds will pay for the most practical and available form of transportation by utilizing a local taxi or Uber service, Capital Area Transit, bus or train (this varies as needed depending on mode of transportation and distance but typically ranges between \$6-\$30 per person). Grant funds will be used to help with the cost of shoes and/or clothing required for a resident to work. Sometimes work boots or a specific uniform is required. "Resources for the Homeless" will occur during the 2021 calendar year and is designed as a pay-as-needed program, where funds will be provided for services upon request (and as determined necessary by Community CARES staff). Where possible, payment for services will be made directly to the service provider. When this is not practical, a receipt for the purchase will be required. While there is no specific limit on the amount of assistance an individual will receive from this program, the supportive services coordinators use prudence on a case by case basis and most of these services are between \$2 and \$30 per occurrence. YTD during 2020 (as of 7/26/20), 68 individuals have received the types of support described above.

Those who are in our Emergency Shelter program and receiving supportive services, or who are encountered through our Cumberland Street Reach (street outreach) program, will be considered for assistance through the "Resources for the Homeless" program. CARES will provide education of this benefit through the Supportive Services Coordinators. This program will benefit both the residents and the local community by equipping individuals and families to build independent, healthy and stable lives and providing supports that lead to permanent housing.

FUNDING

3. Restate the amount you are seeking from TFEC and describe any other funding sources and amounts. If this proposal is not funded at the level requested, will you be able to implement the project as stated? Explain as needed.

Community CARES is seeking \$1,300 from TFEC to provide funding toward "Resources for the Homeless" during 2021. This funding will aid individuals in overcoming some of the barriers as stated in this application that prohibit them from achieving independence. "Resources for the Homeless" has a current committed fund in the amount of \$1,200 for 2021 and will commit additional funding in the amount of \$250 from other grants and/or individual contributions. Community CARES will seek additional funding through individual contributions, fundraising events and additional grant opportunities in the event this grant request is not funded at the level requested.

PROJECT SUCCESS

4. What will project success look like and how will project success be measured and documented (i.e.: how will you know the project is

successful? Are you collecting value statements, numbers served, surveys, photos, before and after images, or using other methods)?

Community CARES will measure the success of "Resources for the Homeless" by documenting the need for these funds throughout the year, including details on reasons, dates and amounts expended for birth certificates, photo ID's, transportation, medical co-pays, food and clothing throughout the year as well as the number of individuals served through this program. Benefits of this program include an impact on overall health by providing funds for prescription drugs co-pays and transportation to medical and mental health appointments and by providing funds for transportation to alternate housing locations, ID's and birth certificates to expedite access to housing jobs and other services. By eliminating some common barriers with these supports, we expect positive impact on the length of stay in emergency shelter and in successful placement into housing.

ACCESS & INCLUSION

5. As a community foundation, TFEC fosters a climate of purposeful inclusion that values diversity of gender, age, race, ethnicity, national origin, range of abilities, sexual orientation, and socio-economic status. Please state how your project will be made accessible to all individuals who qualify for participation in the project and describe any accommodations, modifications, technologies, or services you will offer to ensure that all eligible participants experience the best possible services or outcomes.

Community CARES serves those experiencing homelessness and seeking shelter in Cumberland County, as an overnight Emergency Homeless Shelter, and offers our residents access to a daytime Resource Center that provides a kitchen, laundry room, bathroom/showers, lockers, computer technology, internet, a mailing address, telephone, wellness room and a community gathering area. The Resource Center is also a point of contact for residents to meet with Supportive Services Coordinators to develop plans for overcoming homelessness. In addition, for those who are not eligible for emergency shelter (i.e. Megan's law offenders, individuals with history of violent crimes, etc.) or those who choose not to enter emergency shelter, Cumberland Street Reach (street outreach) offers services to anyone who is homeless or at risk of homelessness throughout Cumberland County, meeting people right where they are located. These services are available to men, women, and families. Community CARES offers an environment of inclusion by a non-discrimination policy with regard to any protected class, including age, gender identity, race, ethnicity, national origin, range of disabilities, sexual orientation and socio-economic status. We make all aspects of our program accessible to all individuals who otherwise qualify for our programs, to the best of our ability. Our Resource Center is accessible and our bus has a lift to accommodate a wheel chair and/or residents who are not able to do steps, as they travel to and from the shelters each night.

BUDGET WORKSHEET

Complete the Budget Worksheet below; a Project Total is required.

ITEM OR SERVICE <i>Examples include: Contracted Services, Equipment, Personnel, Supplies; list your own as appropriate.</i>	DESCRIPTION OF ITEM OR SERVICE	REQUESTED GRANT FUNDS <i>List where funds sought through this grant opportunity will be applied.</i>	OTHER FUNDING SOURCES <i>List the names and amounts of all other funding sources.</i>	PENDING, COMMITTED, OR RECEIVED <i>Using a P, C, or R, indicate the status of all funding sources.</i>	\$ TOTALS <i>Add across to provide a total for each row. Total columns as indicated in bottom row.</i>
Transportation	Transportation to medical, social sevice and diversion locations	\$550	\$800 - Designated Contributions and grants	C	\$1,350
Medication Co-pays	To offset costs of medication co-pays	\$200	\$200 - Designated Contributions	C	\$400
State ID's	Required for housing and job applications	\$300	\$300 - Individual Designated Contributions	C	\$600
Birth Certificates	Required for housing applications	\$100	\$100 - Designated Contributions	C	\$200
Work Clothes	Clothing and shoes needed for employment	\$150	\$50 - Designated Contributions	C	\$200
		\$		C	\$
		\$			\$
		\$			\$
		\$			\$
TOTALS		\$1,300 Total: Requested	\$1,450 Total: Other Funding Sources		\$2,750 PROJECT TOTAL

	Grant Funds			
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President	Bradley Griffie	Griffie & Associates	Carlisle Rotary-Sunrise Membership Chair
			Carlisle Area Chamber of Commerce
			Cumberland County Bar Association
			Franklin County Bar Association
			Pennsylvania Bar Association
			American Bar Association
			St. Paul's Evangelical Church
			BPOE #578
			Family Moose Lodge #761
Vice President	Andy Lippert	US Army War College	Our Lady Queen of Peace - Member
			St. Patrick's Church - Attendee
			Carlisle Rotary-Sunrise Member
			U.S.Army War College Fdn. - Member
			Carlisle Fish & Game Association - Member
			American Association of Individual Investors, Member
			Army Aviation Association of America, Member
			Cumberland County Historical Society, Member
			Knights of Columbus, Member
			Military Officers' Association of America, Member
			Gettysburg Foundation - Member
Treasurer	Sam Glesner	Belco Community Credit Union	Carlisle Family YMCA Board Member
			South Middleton Parks and Rec. Board
			Carlisle Chamber Board -Legislative Affairs Comm.
			BPOE #578-Member
			F.&A.M. of PA Carlisle Lodge 260-Member
			A.A.S.R Northern Masonic Jurisdiction-Member
			USA Softball Certified Umpire
			SSAA Certified Umpire
			Cumberland County Republican Committee
Secretary	Jennifer Heishman	Get Leasing	Cancer Society - Volunteer
Staff Relations	Open		
Board Development	Justin Hovetter	Berkshire Hathaway Homesale Realty	Greater Harrisburg Association of Realtors Board
			Carlisle Historic Architecture Review Board
Member at Large	David Rogers	Carlisle Borough Police	FOP Tri-County Lodge #76 - Conductor
			Carlisle Gun Club - Member
Programs	Charles Stoup	Retired	Carlisle Rotary-Sunrise member
			Carlisle Municipal Authority - Board member
			St. John's Episcopal Church
Community Development	Carley Miller	Orrstown Bank	United Way of Carlisle & Cumb. Cty.-Comm. member
			Leadership Cumberland-Comm. member
			Doubling Gap Church of God - SS teacher

2020 BENJAMIN FRANKLIN TRUST FUND SIGN & SUBMIT FORM
Provide signatures from the applicant organization, below. Both
organization representatives must sign.

By providing your original OR digital signature below, you agree that the provided information in this application is true to the best of your knowledge and may be submitted for review. Completion of this form is one component of your Complete Application.

<input type="checkbox"/>	President/CEO		Click or tap here to enter text.
		Ink Signature	Digital Signature
<input checked="" type="checkbox"/>	Board President		Click or tap here to enter text.
		Ink Signature	Digital
		Signature	

REQUIRED ATTACHMENTS TO BE UPLOADED & SUBMITTED BY 4PM IN THE DEADLINE DATE

All grant materials must be submitted through the TFEC online application system by 4pm on the deadline date. This grant opportunity does not utilize delivered or mailed materials.

- Complete Application:** Applicant Snapshot, Project Narrative, Budget Worksheet, and Sign & Submit Form with original or digital signatures.
- Board of Directors List:** Professional affiliations (ie: work positions and/or titles as applicable) must be included.
- Letters of support are OPTIONAL for this grant opportunity but must be uploaded by the deadline date. No more than TWO letters of support with original or digital signatures may be provided.** Letters of support from the applicant organization's Board of Directors will not be accepted; identical form letters are discouraged.
- Applicants who utilize a FISCAL SPONSOR** must include a letter signed by the Executive Leader of the Fiscal Sponsor organization indicating agreement to serve as the Fiscal Sponsor. An original or digital signature is required.
- IRS 501(c) (3) determination letter**
- 1st Page of Applicant Organization's Most Recent 990.** If 990 is not available, upload applicant organization's most recent audit or financial statement.

QUESTIONS

If you should have any questions regarding this form or TFEC grant opportunities, contact Jennifer Strechay, Program Officer for Community Investment, at jstrechay@tfec.org or 717-236-5040.