## **DHCD CHSW - Technical Assistance**

- 1.
- 2.
- 3.

## **Maryland Department of Housing and Community Development**

# **Community Health and Safety Works:**

# **TECHNICAL ASSISTANCE**

The system WILL NOT allow more than one application to be submitted by an applicant.

By completing this application, you certify that the statements and answers within are true and accurate to the best of your knowledge and that you are authorized to apply for these funds on behalf of the applicant.

Applicants will be responsible to comply with any state or federal reporting requirements related to Community Health and Safety Works.

Additionally, DHCD may be required to disclose information about Community Health and Safety Works applicants and awardees to the Board of Public Works and the Maryland General Assembly and may desire to disclose such information to other state officials or their staff, local government officials or their staff, and other lenders and funding sources. DHCD is also required to disclose information in response to a request for information made pursuant to §4-101 et seg. of the Public Information Act of the General Provisions Article, Annotated Code of Maryland.

# 1) APPLICANT INFORMATION

#### **Legal Name**

READ CAREFULLY: Your organization's legal name must be typed in this application as it appears on your Certificate of Good Standing (CGS) from the Maryland Department of Assessment and Taxation (SDAT). Only capitalize the first letter of each word unless your official name includes more capitalization. Also, please use the exact spelling of suffixes (such as Inc. or Incorporation) and type the precise abbreviation and punctuation exactly as it appears on the SDAT CGS. Please carefully review and ensure that these items are correct before submitting. (For more information on the SDAT CGS: <a href="https://egov.maryland.gov/BusinessExpress/EntitySearch">https://egov.maryland.gov/BusinessExpress/EntitySearch</a>)

Enter the organization's legal name here	
Trade Name	

# Upload a copy of your SIGNED and DATED W-9 Taxpayer Identification Number and Certification Form

**READ CAREFULLY:** The organization name on your W-9 must be your organization's legal name exactly as it appears on your Certificate of Good Standing (CGS) from the Maryland Department of Assessment and Taxation (SDAT). Although the name on your CGS is written in all capitals, your organization's name on the W9 can include capitals only where appropriate. In addition, the Federal ID # and the mailing address on the W-9 must be the same as is typed into this application. Please carefully review and ensure that these items are correct before submitting.

#### Federal ID #:

**READ CAREFULLY:** This Federal ID# MUST be the same as listed on the W-9 submitted with this application. Please carefully review and ensure that these items are correct before submitting

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## **Mailing Address**

<b>READ CAREFULLY:</b> This mailing address MUST be the same as listed on the W-9 submitted with this					
application. Please car	efully review and ensure that these	e items are correct before submitting.			
Street					
Street 2					
City	ty State				
<b>7</b> in					
Zip					
Web Address					
Please provide Social	l Media addresses for:				
Facebook	Twitter	Instagram			
Contact Information	1:				
Please provide the prin	mary contact for this application.				
r lease provide the prin	many contact for this application.				
Name					
Title					
Phone	Cell Phone	E-mail Address			
<b>Secondary Contact</b>	Information:				
DI					
Please provide a secon	ndary contact for this application.				
Name					

Title			
	Cell Phone	E-mail Address	
Phone	Cell Priorie	E-IIIaii Address	

# 2) Applicant Eligibility

**READ CAREFULLY:** To be eligible to apply, an applicant must be a tax-exempt nonprofit organization based in the state of Maryland. Nonprofit organizations will be required to provide an IRS Determination Letter of tax-exempt status.

Please upload a copy of your IRS Determination Letter of Tax-Exempt Status.

Please upload a DATED screen shot from the Maryland State Department of Assessments and Taxation (SDAT) website showing the applicant's good standing status.

**NOTE:** You do not need to purchase an official Certificate of Good Standing. However, the uploaded screen shot, or an already purchased official Certificate of Good Standing, must show a date not older than January 1, 2024.

## Required Uploads:

- 501c3 Letter of Determination
- Maryland State Department of Assessments and Taxation (SDAT) Good Standing. Upload a
  DATED screen shot from the Maryland State Department of Assessments and Taxation (SDAT)
  website showing the applicant's good standing status. You do not need to purchase an official
  Certificate of Good Standing.
- Current Operating Budget
- Most recent fiscal year ending Profit and Loss
- Audited Financial Statements
- A copy of your SIGNED and DATED W-9 Taxpayer Identification Number and Certification

Please upload a copy of your current operating budget

Please upload a copy of your most recent fiscal year ending Profit and Loss

Please upload copies of your most recent audited financial statements

# 3) ELIGIBLE ACTIVITIES & GRANT NARRATIVE

Eligible activities include individual and teams of nonprofit providers that will provide project design and implementation support to the community-based awardees of CHSW project funding. Nonprofit applicants must be Maryland-based and have a record of assistance to community-driven projects.

CHSW funding will support the following types of projects:

- Community Placemaking: Grants up to \$100,0000 for collaborations that engage artists and
  other designers to create lovable and safer spaces for community use. Communities will be
  asked to engage artists and/or designers to facilitate community engagement, project design and
  implementation.
- Environmental Health and Justice: Grants up to \$100,000 for collaborations to eliminate
  predatory and unhealthy practices from communities such as illegal dumping, litter, and traffic
  hazards and address urban heat islands and other conditions related to climate change.
- Crime and Violence Prevention and Intervention: Collaborations to remove illegal and dangerous activities from communities in one of two ways:
  - Grants up to \$100,000 for lighting and camera surveillance strategies and related community safety services.
  - Grants up to \$250,000 for place-based comprehensive outreach and case management services that directly connect at-risk individuals to safe, restorative pathways.

Awardees will be responsible for providing technical assistance to CHSW projects. This may include but is not limited to:

Designing and facilitating an inclusive community engagement process

- Providing guidance on integrating art and cultural elements into a community space project
- Assisting artists/designers and community organizations with integrating health outcomes in community space projects
- Finding and engaging partners for environmental stewardship projects
- Assisting artists/designers and community organizations with integrating green infrastructure and climate-sensitive urban design into their community space projects
- Assisting partnerships that are developing and implementing place-based outreach and case management strategies
- Creating and evaluating a call for artists and designers for projects
- Obtaining and evaluating bids from contractors for projects
- Designing a maintenance plan for public space improvements

#### Please provide answers for **EACH** of the following:

a. What is your organization's official mission statement and purpose? How does the organization's mission align with the purpose of this Technical Assistance grant and the Community Health and Safety Works program.

0/1000 max characters

b. Provide your organization's recent accomplishments (2021 thru 2023).

0/1000 max characters

c. Describe how your organization measures and evaluates the impact of its programs and activities.

0/1000 max characters

a. What is your organization's current financial situation? Please describe the organization's ability to continue operations while managing and maintaining projects and activities for which you are requesting funding.

0/1000 max characters

## **Organization Experience**

a. Describe the experience, education and training of the staff that provides technical assistance to community-based projects. Include the resumes of each staff member as an upload.

0/1000 max characters

Upload resumes here

b. Describe your organization's experience providing technical assistance for community-based projects. Provide specific examples of completed projects, including addresses, if relevant. Cite examples of projects designed to deter crime and/or improve environmental health and safety.

0/2500 max characters

Is your organization already supporting an organization(s) that is applying for a FY24 Community				
Health and Safety Works grant?				
Yes				
No				

c. Explain how your organization collaborates with other organizations and communities to fulfill your mission. Provide specific examples.

0/1000 max characters

d. Describe how your organization includes underrepresented voices in community engagement and how diverse perspectives are incorporated into design and implementation of projects. Provide specific examples.

0/2000 max characters

#### PROJECT EXAMPLE UPLOAD:

Upload examples of previous work that demonstrates your ability to provide project design and implementation support to awardees of CHSW funding.

DHCD Email Opt-in	
Opt-in for email communication and updates from The Maryland Department of Housing and	
Community Development.	