

Washington County Department of Public Health & Environment
 Beyond Resilience Grant
 2020 PROJECT APPLICATION

PROJECT OVERVIEW

Organization:			
Contact:		Business Agent:	
Address:		Address:	
City:	Zip Code:	City:	Zip Code:
E-mail:		E-mail:	
Phone:		Phone:	
Fax:		Fax:	
Project Lead (if different than contact):			
<p>As the legal representative of the organization listed above, I give permission to submit this funding application to the Department of Public Health and Environment. I confirm that our organization will designate a project leader; is able to conduct business accounting practices; will submit invoices in a timely manner for reimbursement; and will complete reports or evaluation forms.</p>			
Signature:		Title:	
Date:			

1. Please provide a brief description of your organization.

How does your organization support the development of a resilient community? Provide the mission/vision of your organization.

2. Target Population

Who will your project be serving? Provide an estimated number of people who will be reached?

3. Partners

Who are the partners who have a role in your success? Describe current or past community partnerships that will support the planning and implementation of your project or provide a [letter of support](#).

4. What Lifespan Age Range(s) does your project support? Select all that apply.

- Early Childhood (ages birth-5)
- Children (ages 6-12)
- Youth (ages 13-18)
- Young adults (ages 19-40)
- Families (pre-natal; birth and beyond)
- Adults (ages 41-65)
- Adults (ages 65+)

5. What geographic are in Washington County will your project serve? Select all that apply.

- North Washington County
- Central Washington County
- South Washington County
- Other: _____

6. Will your project directly support any of the following populations? Select all that apply.

- People of color and American Indians
- Military Veterans
- At-risk youth
- LGBTQIA populations
- Persons with differing abilities
- Lower income populations
- Persons with substance use disorders
- Persons with transportation needs
- Persons who are incarcerated
- Persons whose primary/native language is not English

7. Will your project support key factors that support resilience? Select all that apply.

- Close relationships
- Problem-solving skills
- Self-regulation skills
- Self-efficacy
- Motivation to succeed
- Faith, hope, optimism
- Purpose/belief life has meaning
- Effective schools
- Well-functioning communities

8. Describe how this project will support resiliency for the communities/age ranges selected above. *What are you trying to achieve with your project and why is it important?*

9. Describe how your organization will sustain the project beyond the funding date?

10. Please describe the project's proposed activities, a budget description, performance measures, and the expected outcomes for each activity. You may include up to six activities

Proposed Activities <i>Feasible, high-impact action with specific timelines and deliverables</i>	Budget <i>Include a description of how these funds will be used</i>	Performance Measures <i>How will you measure your project activity success?</i>	Expected Outcomes <i>Change in knowledge, behavior, or circumstances that are a direct result of your activities.</i>