



# Thurston/Mason County Developmental Disabilities

## Community Project Grant Proposal

### Narrative Questions



Answers must be typed on 8 ½ by 11-inch paper using a standard type font. Responses must be presented in the same order as below. The identifying question number should be presented before the response. All pages must be single sided and numbered.

Applications may be submitted electronically in a single attachment or a hard copy can be mailed or hand delivered.

Applications received with incomplete documents or missing information may be rejected. The following documents are required with all application packets:

- County Coversheet
- Narrative Questions with responses typed on 8 ½ by 11-inch paper
- Proposed Budget Spreadsheet
- Proposed Salary Spending Plan Spreadsheet
- Additional documents requested in the Narrative Questions with the identifying question number clearly stated at the top of the document

### Questions

1. Provide a detailed summary of your proposal. Details should include information such as:
  - a. Target service audience/population
  - b. Type of service(s) to be provided
  - c. Information about agency location and accessibility
  - d. Specific areas of Thurston/Mason county to be served
  - e. Frequency of service(s) to be provided and/or program hours
  - f. Details about how the proposed service(s) will benefit the target service audience/population and the community and fill existing service gaps
2. Provide a clear Statement of Work that describes goals and intended outcomes of your proposal. Goals and anticipated outcomes should be Specific, Measurable, Attainable, Realistic and Time-bound (SMART).
3. Describe the need for services and any identified service gaps your proposal addresses. Funding priority will be given to services that are not provided or funded by DSHS programs such as Division of Vocational Rehabilitation or Developmental Disabilities Administration.
  - a. If you are **currently** providing services under the previous Community Project Grant, your new proposal must:
    - Identify the service(s) you provide under your current agreement
    - Demonstrate the need for continuation of services
    - Include details regarding the outcomes achieved in comparison to the initial program projections
  - b. If you are proposing a **new** service or project, your proposal must include:
    - Data to support the need for your proposal
    - Cited sources for data that demonstrates service need

4. The mission of the Thurston/Mason County Developmental Disabilities program is: *“To work with people with developmental disabilities, families and the community to promote everyone’s well-being, rights, choices and opportunities in living as valued, contributing and integrated members of our community”.*

What is your agency’s mission and how does the service(s) you provide align with Thurston/Mason County Developmental Disabilities program’s mission?

5. Clearly indicate how your proposal will promote one, or all, of the following needs for people with developmental disabilities:
  - a. Education and personal safety
  - b. Community accessibility and inclusivity
  - c. Personal growth and independence
  - d. Services or supports that benefit individuals with developmental disabilities
6. Indicate how much this proposal will cost through the Proposed Budget and Proposed Salary Spending Plan spreadsheets. Include other funding sources that will pay for the costs not proposed. If the full amount requested is not awarded, how will you modify the request and/or service(s)?
7. Add any additional information and/or supporting documentation you would like the review panel to consider when reviewing your proposal.