

EFSP Phase 39 and ARPA-R Application

Emergency Food & Shelter Program Logan County, Illinois



FUNDING PERIOD: November 1, 2021 through April 30, 2023

Submit completed applications to Patti Becker at uwloganil@comcast.net

Deadline: June 3, 2022 - 4:00 pm

If you have questions relating to this application process, please address them in email form to uwloganil@comcast.net

*(NOTE: Applications submitted after the deadline and/or incomplete applications will **NOT** be accepted or reviewed.)*

Background

The Emergency Food and Shelter Program (EFSP) was created in 1983 to supplement and expand the work of local social service agencies, both nonprofit and governmental, in an effort to help people with **economic** emergencies (not disaster-related [i.e., fires of any kind, floods, tornadoes, etc.] emergencies). Therefore, EFSP funds are not to be used to provide emergency assistance for circumstances that are the **immediate** result of a disaster situation. EFSP funds may be used to provide economic assistance in the long term, even if the current circumstances may have been impacted by an earlier disaster occurrence. The EFSP funding is open to all organizations helping hungry, homeless and low income people. EFSP funds must be used to supplement feeding, sheltering (including transitional sheltering) and rent/mortgage and utility assistance efforts only. EFSP is governed by a National Board that selects jurisdictions for funding. Local Boards are convened in those qualifying jurisdictions to determine the highest need and best use of funds and to select Local Recipient Organizations (LROs) that will provide emergency food and shelter services. Each year, needs are to be assessed in an effort to respond to changes in the community.

Intent of Program

The intent of this program is for the purchase of food and shelter, to supplement and expand current available resources and not to substitute or reimburse ongoing programs and services or to start new programs. The intent regarding the use of funds is that goods and services purchased or provided with EFSP funds should be used as necessary on a daily basis to help meet community need during the spending period. Food vouchers and purchased gift certificates/gift cards must be distributed and used during the jurisdiction's spending period. Large purchases made at the end of the spending period do not meet the intent of the program and will be considered ineligible.

Instructions for Application Submittal

- Review the applications and instructions carefully and be sure to completely answer all questions. Applications that are incomplete will not be accepted or reviewed.
- Applications that do not meet *all* of the program requirements on the application will not be accepted or reviewed.
- All applications must have the necessary electronic signature.
- All applications must be submitted via e-mail by the deadline. Applications submitted after the deadline will not be accepted or reviewed.
- If awarded EFSP funds, applicants must complete the LRO Certification Form that will be e-mailed to the applicant.
- Agencies are encouraged to submit their applications prior to the deadline with the understanding that they *will not be reviewed* until after the deadline when all applications have been received.

Eligible Programs

Applicants are able to apply for costs associated with food programs (served meals programs, bagged grocery programs, and/or food voucher programs), shelter, motel voucher programs and utility/rental assistance programs. Listed below is a brief description of each eligible funding category.

CATEGORY	SAMPLE ELIGIBLE ITEMS	SAMPLE INELIGIBLE ITEMS
SERVED MEALS	Any food used in served meals (cold or hot); costs of transporting food to site or client; daily per meal schedule (\$3/meal).	Any items not related to actual feeding of a client. Excessive meal costs. Excessive snack food items. Staff events/functions.
OTHER FOOD	Food vouchers, food boxes, grocery orders, restaurant vouchers, etc., food purchased for food banks and/or food pantries, vouchers, gift certificates (limited), transportation costs.	Tobacco, alcohol, paper products. Any nonfood item. Excessive meal costs. Excessive snack food items. Staff events/functions.
MASS SHELTER	Direct expenses associated with housing a client (e.g., supplies, linens, etc.); transportation costs; daily per diem schedule (\$12.50).	Year-round ongoing operational costs (rent, pest control, garbage pick-up, utilities); salaries of employees.
OTHER SHELTER	Any <u>reasonable</u> hotel/motel or non-profit facility acting as a vendor; SRO; actual charge by vendor, per night; 30 day limit. LROs may pay more than one-month hotel/motel assistance. LROs may now provide up to 90 days of assistance for clients per phase if it is necessary to prevent homelessness. The Local Board may approve the payments, but no additional approval is required by the National Board.	An LRO receiving funds <u>may not</u> act as a vendor for themselves or another funded LRO. Stay beyond 30 days per phase. Prepayments for hotel/motel.
SUPPLIES/ EQUIPMENT	<p style="text-align: center;"><u>\$300 per item maximum</u></p> <p>Mass feeding: pots, pans, toasters, blenders, microwave, utensils, paper products, any item essential to the preparation of food, shelving. Diapers.</p> <p>Mass shelter: cots, blankets, pillows, toilet paper, soap, toothpaste, toothbrushes, cleaning materials, limited first-aid supplies, underwear/diapers. Emergency repair of essential small equipment (\$300 limit for both mass feeding and mass shelter.)</p>	Decorative curtains, carpet, clothing, TVs, computer systems, office equipment, bedroom furniture other than beds (nightstand, lamps, etc.).
RENT/MORTGAGE	Past due rent or mortgage payment (Principal & Interest only); current rent or mortgage due within 10 calendar days; first month's rent; lot fee for mobile homes. Limited to one month's cost for an individual/family. LROs may pay more than one-month rental or mortgage assistance. LROs may now pay up to 90 days (3 months) for clients per phase if it is necessary to maintain housing. The Local Board may approve the payments, but no additional approval is required by the National Board.	Payment for rent/mortgage exceeding one month's cost; deposits; down-payment for purchase of home; late fees; legal fees; taxes, insurance & escrow accounts.

UTILITIES	Past due bills, or current bills due within 10 calendar days, for gas, electricity, oil, water; reconnect fees. May pay budgeted or actual amount. Limited to one month's amount that is part of the arrearage at the time of payment or current one month amount. Local Recipient Organizations (LROs) may pay more than one-month utility assistance. LROs may now pay up to 90 days (3 months) for clients per phase if it is necessary to prevent disconnection of services. The Local Board may approve the payments, but no additional approval is required by the National Board. One-time delivery of firewood, coal, propane.	Payments for utilities exceeding three months cost; deposits; cable, or satellite TV bills; phone bills; internet service; late fees.
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Local Funding Priorities

The Emergency Food and Shelter National Board mandates that Local Boards must set funding priorities annually prior to the selection of agencies for funding. As a result, funding will be focused to address these needs in the areas of emergency food and shelter. The following are additional priorities for the Local Board:

1. Serve a geographically diverse area of Logan County

The Local Board will look to provide funding to organizations that provide services throughout the County, so that as many citizens as possible have access to EFSP funds. We encourage organizations to apply that serve county-wide and especially those that are located in an underserved community or neighborhood.

2. Serve a range of populations that are most in need

While there are no minimum income requirements set for clients to access these funds, the Local Board is seeking to provide assistance to those most in need, especially those finding themselves in situations with which they have not encountered previously. This will include families and individuals newly experiencing unemployment and financial instability; seniors who are on fixed incomes or experiencing added financial burdens of guardianship of grandchildren or other strains; physically or mentally disabled individuals or families with disabled members; veterans; Native Americans; and transitional aged youth who are unaccompanied and/or just moved out of the foster care system.

3. Provide a range of needed services addressing all eligible program categories

In order to create the most benefit for the community, the Local Board commits to funding a broad range of program categories. The Local Board seeks to equitably fund as much food, shelter, rent/mortgage and utility assistance as necessary to meet the current need in our community.

Eligibility Guidelines by Program

The EFSP is a needs based program, for which clients must qualify. **The National Board does not set client eligibility criteria.** The Logan/Mason County Local Board has determined that each Local Recipient Organization may use their existing eligibility criteria. However, each LRO must adhere to the eligibility and documentation requirements outlined in the most recent phase manual. The criteria used must provide for assistance to needy individuals without discrimination (age, race, sex, religion, national origin, disability, economic status or sexual orientation), sensitivity to the transition from temporary shelter to permanent homes and attention to the specialized needs of homeless individuals with mental and physical disabilities and illness and to facilitate access for homeless individuals to other sources of services and benefits. In providing assistance under the EFSP, verification of proof of citizenship or qualified alien status of any applicant for assistance is not required. **Note: Funds allocated to a jurisdiction can only be used for permanent residents and transients within that jurisdiction.** No individual, family or household may be charged a fee for service or be required to attend religious/counseling services with relation to assistance received under EFSP.

For a local agency to be eligible for funding it must:

- Be nonprofit or an agency of government;
- Not be debarred or suspended from receiving Federal funding;
- Have a checking account. (Cash payments are not allowed);
- Have an accounting system or fiscal agent approved by the Local Board;
- Have a Federal Employer Identification Number (FEIN), (Note: contact local IRS office for more information on securing FEIN and the necessary form [SS-4] or go to the website: www.irs.gov);
- Have a Data Universal Number System (DUNS) number issued by Dun & Bradstreet (D&B) and provide along with other required associated information (See the EFSP website for information on how to obtain.);
- Conduct an independent annual audit if receiving \$100,000 or more in EFSP funds; conduct an annual accountant's review if receiving \$50,000 to \$99,999 in EFSP funds. See Annex 12, page 103;
- Conduct annual audit, if expending \$750,000 or more in Federal funds, in compliance with the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards at 2 CFR 200 of the Office of Management and Budget;
- Be providing services and using its other resources in the area in which they are seeking funding;
- Practice nondiscrimination (those agencies with a religious affiliation wishing to participate in the program must not refuse services to an applicant based on religion or require attendance at religious services as a condition of assistance, nor will such groups engage in any religious proselytizing in any program receiving EFSP funds);
- Have a voluntary board if private, not-for-profit; and,
- To the extent practicable, involve homeless individuals and families, through employment, volunteer programs, etc., in providing emergency food and shelter services.

PHASE 39 and ARP PAR EFSP FUNDING APPLICATION– LOGAN/MASON COUNTY IL LOCAL BOARD

Part I-A: Organization Information	
Organization Legal Name	Click here to enter text.
Executive Director:	Click here to enter text.
Federal Employer ID	Click here to enter text.
DUNS Number	Click here to enter text.
Administrative Address:	Click here to enter text.
City, State Zip+4:	Click here to enter text.
Telephone:	Click here to enter text.
Fax:	Click here to enter text.
Email:	Click here to enter text.
Website:	Click here to enter text.
Federal Congressional District:	Click here to enter text.
Address Where EFSP Services Are Provided (if different from above)	Click here to enter text.
Federal Congressional District Where EFSP Services Are Provided (if different from above):	Click here to enter text.
Contact Person (if different from above):	Click here to enter text.
Address (if different from above):	Click here to enter text.
City, State Zip+4 (if different from above):	Click here to enter text.
Telephone (if different from above):	Click here to enter text.
Fax (if different from above):	Click here to enter text.
Email (if different from above):	Click here to enter text.

Does your organization serve as a fiscal conduit?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If so, how many agencies using EFSP funds are you responsible for?	Click here to enter text.	
Please indicate which areas your proposed program(s) will be serving:		
<input type="checkbox"/> All Mason County <input type="checkbox"/>		
<p>Other areas: Please list all applicable:</p>		

Part I-B: Organization Information (If Received Prior EFSP Funding)		
Did your organization receive EFSP Phase 37, CARES and/or Phase 38 funds?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, total award amount?	Click here to enter text.	
Categories Funded in Previous Phases:		
<input type="checkbox"/> Served Meals <input type="checkbox"/> Bulk Food <input type="checkbox"/> Mass Shelter <input type="checkbox"/> Utility Assistance <input type="checkbox"/> Rental Assistance		
Did your organization return funds in Phase 38, CARES or Phase 39?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If so, which Phase(s) and how much? From which categories and why?	Click here to enter text.	

Part II: Eligibility Questions	Yes/No	
Is your organization a 501c (3) non-profit or governmental agency providing food, shelter or rent/utility assistance to homeless and low-income people?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is your agency debarred or suspended from receiving funds or doing business with the Federal government?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Will your organization charge fees from clients for EFSP-funded services?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Will EFSP funds be used to <u>supplement only</u> existing food and shelter programs?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does your organization practice non-discrimination and not require religious participation for the proposed EFSP funded program(s)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is your organization governed by a volunteer Board of Directors?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
I understand organizations must apply for a minimum of \$500 per funding category. EFSP does not award grants smaller than \$500.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
I understand that for LROs receiving \$50,000 or more in EFSP funding, the National Board requires an independent annual audit. For LROs receiving from \$25,000 to \$49,999, the National Board requires an annual review. For newly funded LROs or LROs funded above the amount requiring an audit or review for the first time, the LRO must arrange for the audit or review of funds to coincide with the next scheduled annual audit or annual review of its financial affairs.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
I understand EFSP funding is intended to be used on an ongoing basis to supplement and extend food and shelter services, not as a substitute for other program funds or to start new programs.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
I understand my organization has the right to appeal a denied application within five (5) business days of notification of denial; the DeKalb County EFSP Local Board will respond to appeal requests within 15 business days of an appeal submission via email.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

PART III: Budget

The intent of the Emergency Food and Shelter Program is to supplement and expand current available resources and not to substitute or reimburse ongoing programs and services or to start new programs. Other funding sources must be in place for the programs for which you are applying and must be reported below.

If no current program funding is reported on the form below, this application will be automatically denied.

For each EFSP line item for which you are requesting funding, please reflect other agency funds available and the source of this funding by filling in the table below:

	Current Program Funds (Non-EFSP Funds)	Sources of Current Program Funds (Non- EFSP Funds).	EFSP Funds Requested
	IN DOLLARS	NAMES	IN DOLLARS
Served Meals	Click here to enter text.	Click here to enter text.	Click here to enter text.
Other Food	Click here to enter text.	Click here to enter text.	Click here to enter text.
Mass Shelter	Click here to enter text.	Click here to enter text.	Click here to enter text.
Other Shelter	Click here to enter text.	Click here to enter text.	Click here to enter text.
Supplies/Equipment	Click here to enter text.	Click here to enter text.	Click here to enter text.
Rent/Mortgage	Click here to enter text.	Click here to enter text.	Click here to enter text.
Utilities	Click here to enter text.	Click here to enter text.	Click here to enter text.
TOTAL	Click here to enter text.		\$

As a reminder, applicants may not request more than **50%** of a total program budget

Part IV: Narrative Questions

- Click in each field to type requested information for each program.

1. About Your Organization

Describe your organization's history and mission, including the year it was established. List the specific program(s) for which you are requesting EFSP funds and the identified outcomes for each.

[Click here to enter text.](#)

2. The Program(s)

- A. Describe the program's purpose and the particular need it seeks to address.
- B. What category the program(s) falls under and the proposed eligible items EFSP funds will be used for (see page 5).
- C. Explain why the addition of EFSP funds is needed to supplement and expand the current program.

Click here to enter text.

3. Accounting and Financial Stability

Describe how your organization will ensure EFSP funds will be used only for their intended purposes.

Include a description of the accounting procedures and staff responsible for financial management.

--If your organization has returned funds in the past, please detail how your organization has prepared itself to avoid this from occurring again.

[Click here to enter text.](#)

4. Volunteer Board

Provide the roster of your organization's volunteer board below.

If your program is awarded funding, you will need to complete the Phase 39 and/or the ARPA-R LRO Certification Form available on the EFSP website. Log on with your user name and password to complete. Your program will not receive funds until this form is submitted.

To the best of my knowledge and belief, the data in this proposal is true and correct and the applicant has duly authorized the enclosed information. I understand that incomplete applications or applications submitted after the deadline will not be accepted or reviewed. By signing below, the undersigned acknowledges having read and understood the program guidelines and will be able to fully comply with the provisions of these guidelines as well as any and all additional applicable federal, state and local requirements, including procurement and financial management. If awarded, my organization will submit reports to the Local Board by their due dates. If awarded, my organization will work with the Local Board to quickly clear up any problems related to compliance exception(s) at the end of the program. Failure of an LRO to comply with the National Board's reporting requirements will result in funds being withheld. The Local Board or National Board may reclaim and reallocate the funds being withheld if my organization does not comply in a timely manner to compliance issues.

Signature:

Logan County IL – LB 248200

PHASE 39 and ARPA-R EFSP ALLOCATION GUIDELINES

*No new or additional guidelines have been released at this time

1. All applications will be read by each Local Board member prior to the allocations meeting.
2. The Local Board will meet to determine funding allocations. Allocations are determined based on community need in each funding category and amount of funding received from EFSP.
3. Allocations will be made to ensure that all geographical areas of Logan County, Illinois receive services under the EFSP funding.
4. All funding allocations will be made at the sole discretion of the Local Board. There are no minimum or maximum amounts for consideration.
5. Notice of awards will be sent to agencies after the Local Board has been informed of the jurisdictional award and within two days after the Local Board allocation meeting has taken place.
6. Notices of funding denial will be sent to agencies after the Local Board has been informed of the jurisdictional award and within two days after the Local Board allocation meeting has taken place. These notices will contain specific reasons as to why the applications are denied.
7. The submission of a complete and timely application is the responsibility of the agency. The Local Board will not be responsible for any incomplete or late application.
8. Any applicant who is not funded is allowed to submit an appeal to the Local Board provided that their application was not eliminated from consideration due to the mandatory requirements specified on the application, was not sent via e-mail, or was incomplete.

By signing below, I attest that I have read and understand these terms.

Signature: _____