



City Of Greensboro

City Council Application Approval Request

Approval Process	
Match	<input type="text" value=""/>
Tracking Number	10372
Request Origination	
Department	Parks & Recreation <input type="text" value=""/>
Division	Smith Senior Center
Submitted By	Jennie Matkins
Date Submitted	10/14/2015
Phone	3737566
Application Summary	
Grant/Project Name	2015-2016 Sr Center General Purpose Grant
Brief Project Summary	The funds will be used to replace the bathrooms floors in Smith Senior Center with epoxy, non-slip, flooring; and will be used to offer Healthrhythms group drumming sessions weekly
Grantor	Piedmont Triad Regional Council Area Agency on Aging
Goals, Strategies, Objectives supported	To seek and partner with outside organizations to maximize human and financial resources and maintain viability through partnerships, grants, and volunteer efforts.
Application Amount	\$15,000
Application Due Date	11/2/2015 <input type="text" value=""/>
Application Submission Date	11/2/2015 <input type="text" value=""/>
Grant Year	2016
Funding Cycle	1 year
New?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Recurring?	<input type="radio"/> Yes <input checked="" type="radio"/> No
If recurring, how many years?	

Applicant's Role	Project Administrator
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Eligible Activities	Cost	Description
Personnel		
Contracted Services	\$15,000	Flooring Contractor; Music Therapist
Travel		
Supplies/Operating Expenses		
Equipment		
Other (Describe)	Cost	Description
<input type="checkbox"/> Insert item		
Total Project	\$15,000	

Required Match Elements	Value	Description
Cash (Describe Source)	\$0	
Cash Match Source Account Number (If Known)	3000	101-5046-03.5413 (Sr. Programs M&O Budget)
In Kind (Describe)		
Other (Describe)	Value	Description
<input type="checkbox"/> Insert item		
Total Match Value	\$3,000	

Project Funding Information (Includes Match)	
Federal Amount	
State Amount	
Regional Amount	\$12,000
Local Amount	\$3,000
Private Contributions Amount	
Cash Award Amount	
Total Funding	\$15,000
Reimbursement (Yes/No)	<input checked="" type="radio"/> Yes <input type="radio"/> No
If reimbursement grant, explain fund availability.	Funds are available in Senior programs budget
How will the program be funded after the grant expires?	N/A

List of any other departments within the City of Greensboro eligible for this funding.	N/A
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Description of Department Collaborations	
Department	Description
▼	
<input type="button" value="Insert item"/>	

Description of Other Collaborations	
Regional Governments	X
State Agencies	
Federal Agencies	
Other Community Partners	
Other	

Result Area Work Plan	
Economic and Community Development	
Infrastructure	
Public Safety	
Culture, Recreation and Community Character	X
General Government	

Department Area Work Plan	
Economic and Community Development	
Infrastructure	
Public Safety	

Culture, Recreation and Community Character	X
General Government	

Target Areas	
Council District(s)	<input type="checkbox"/> District 1 <input type="checkbox"/> District 2 <input type="checkbox"/> District 3 <input type="checkbox"/> District 4 <input type="checkbox"/> District 5 <input checked="" type="checkbox"/> None
Police District(s)	<input type="checkbox"/> District 1 <input checked="" type="checkbox"/> District 2 <input type="checkbox"/> District 3 <input type="checkbox"/> District 4 <input type="checkbox"/> District 5 <input checked="" type="checkbox"/> None
Other Area(s)	

Program/Project Staffing	
Number of Current Staff	
Number of Hours/Current Staff	
Describe Current Staff Position(s)/Role(s)	
Personnel to Hire Additional Staff	<input type="radio"/> Yes <input checked="" type="radio"/> No
Number of Additional Staff Needed	0.00
Number of Hours for Additional Staff	0
Describe Additional Staff Position(s)/Role(s)	n/a
Total full time equivalent jobs created with this project is estimated at:	

Impact
Will this project duplicate or compete with another service or program provided by the City of Greensboro or other local agency?
<input type="radio"/> Yes <input checked="" type="radio"/> No
How will this program/project benefit the City as an organization?
The project will promote health and wellness opportunities for citizens ages 55 and over.
How will this program/project benefit the City as a region?
The project will promote health and wellness opportunities for citizens ages 55 and over.

Department Director's Signature Authorization to Proceed	
Name (printed)	Wade Walcutt
Signature	
Date	

Submit