



**THE CITY OF PHILADELPHIA**

**Office of the Managing Director  
Pedro A. Ramos, Esquire  
Managing Director  
1401 John F. Kennedy Blvd., Rm 1430  
Philadelphia, PA 19102-1683**

April 21, 2007

Dear Program Director,

Attached is this year's copy of the FY08 Mayor's Anti-Drug Initiative application. This grant has been designated by Mayor John F. Street to support the work of those community based and faith based institutions which provide *outcome based* services to residents of the City of Philadelphia, in their efforts to prevent and/or intervene in the use and/or sale of illegal drugs throughout our City.

To be eligible for this year's funding, please complete the attached application and submit it to my office no later than Friday, June 1, 2007. Applications may be either, mailed to my office; sent electronically or faxed. The correct address information is listed on the application.

To insure the success of your application please be sure to answer all of the questions. You may also include any information, either statistical or anecdotal, which will depict the efforts of your organization's activities and make for a more successful application.

If you have any questions, please contact me at 215-686-9000 or [Frankie.hughes@phila.gov](mailto:Frankie.hughes@phila.gov).

Sincerely,

Frankie Hughes  
Deputy Managing Director



## Mayor's Anti-Drug Initiative Grant Application

c/o Frankie Hughes, Deputy Managing Director  
1401 JFKennedy Blvd., Room 1430  
Philadelphia, PA 19102-1683  
215-686-9000/01 215-686-3494 (fax)  
Frankie.Hughes@phila.gov

Date Received: \_\_\_\_\_

Organization Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_ Zip \_\_\_\_\_

\*\*Phone #: (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_

Email Address: \_\_\_\_\_ \*\*501c3 # \_\_\_\_\_

Name/Type of Program(s) Requiring Funding: \_\_\_\_\_

Is this a new program? If not, how many years has it existed? \_\_\_\_\_

Type of Program: (Please select one that best describes your program)

**Programmatic Grants** - Year round non-profit programs, where services are provided on a daily basis (at least five days per week). You must also serve at least 25 clients, and be located in a public facility. Programs should have activities and/or services where the needs of the community have been assessed and goals and objectives are met by delivery of these services. **Grant Range \$3,000 - \$10,000.00**

**Projects/Seasonal Activities** - Activities and/or services, which are provided on a seasonal schedule. (i.e. sports leagues, drill teams, etc.) **Grant Range - \$1,000 - \$5,000.00**

**Events** - Organizational Event or activity whose primary focus must be an anti-drug curriculum. **Grant Range - to \$1,000**

***(select one only!!!!)***

*Please answer the following questions to help us determine funding: Please attach the answers on separate sheets to your application.*

**Mission Statement:** What is your organization's Mission Statement?

**Project Description:** Please provide a detailed description of your organization and the project for which you are seeking funding. Your response must include, but not be limited to the following information:

1. Brief description of the your organization
2. Detailed description of the project for which you are seeking funding.
3. Scheduling: Location of the activities; days and hours of operation for this project
4. Type of facilities to be used; duration of the project, (year round, after-school, summer, etc.)
5. How many residents do you plan to serve?
6. What services and/or activities will be provided? Be specific!!
7. What resources and staff will be needed for the operation of this project? Please be specific. Where possible, provide names and resumes.
8. What outcomes will result from this work? How will the client's behavior be impacted? (Describe the positive which will occur or remain for the clients who attend this activity, and what will you use to measure the success or failure?)

**Project Justification:**

**Needs Assessment** – Why is this activity needed for your clients to either suspend the use of drugs and/or sale; or sustain their refusal to either use of sell drugs?

**Resource Inventory** – Please identify the resources your organization will use to facilitate this project. Include funding. (Budget and Resource Sheets are attached.)

**Sustainability** – How will your organization sustain this activity beyond this funding source?(Year 2 and 3)

**Indicator Information** – Please identify what measurements will be used to indicate success.

**Evaluation-** Please identify the goals of this project. How have you determined that this activity will prevent, intervene or treat the use or the sale of drugs? Please explain using the measurement tools described above.

**Marketing Plan** – How will this project be marketed.

**You must show how this project will prevent or intervene in either the use of sale of drugs.** Please provide any data or information which shows this.

**Budget Information:** Please attach the total organizational budget AND project request. This information should include all sources of income, revenues and expenses. Please include sources of funding, including fees, grants and other in-kind resources. **(Incomplete submissions will be disqualified.)**

**Budget Request** - Please itemize each item or activity you have requested funding. ***Be Specific!!!!*** Please include the use of this item, how it is necessary for your program. The quantity you are requesting and how many clients and projects designated for its use. *(You must indicate the necessity of item/ service for your project, or it will not be considered.)*

**Workshop Requirement** - As a requirement for this grant, all groups must present at least three workshops throughout the year with an Anti-Drug, (both use and sale) message. Please indicate anticipated days and times workshops will be scheduled and how workshop will be documented. (i.e sign-in sheets, pictures, etc.)

**Civic Project:** All programs must host a scheduled civic activity. Please provide detailed information as to when activity is scheduled, where it will be held, and how many members you anticipate will participate. Documentation of event will be necessary. All civic projects must benefit those other than program participants and /or their families.

**Attachments:**

Copy of Non-Profit status for you or your fiduciary agent.

Organizational Budget

Workshop and Civic Project Information – include locations, resumes or bios of speakers and number of participants anticipated for each.

Please identify how program will be marketed.

Please provide an example of the “model of change” or Logic Model which will describe the behavior change indicators used to show the success or failure of your activity(ies) for which you are seeking funding.

Any requests for scheduled trips must include the lesson plan information for each age group participating in trip, number of attendees and the reason this activity was chosen.

**Grant Exclusions:** *Some items are excluded from this grant. These items include, but are not limited to:*

All personnel and operational costs are excluded, which includes supports services, equipment uniforms, supplies, rent, utilities and insurance.

Costs associated with travel to amusements parks are excluded as well as cultural activities which do not support an educational format, for which a lesson plan has not been provided.

Costs or services related to commissary, banquets and/or celebrations are ineligible.

Groups who discriminate on the basis of race, gender, creed, origin or sexual orientation are not eligible to receive this grant.

Gifts, stipends, and scholarships to participants and staff are ineligible.

Consultant costs are only allowed for experts whose costs have not previously been covered in any capacity, and are not part of the cost related to staffing for normal programming. All other costs are excluded.

**For previous grantees only!**

1. Evaluation of previous activities in which you received funding. Include an analysis of all documentation gathered.

Receipts for approved expenditures from previous grant. NO EXCEPTIONS!!!

Program schedule for upcoming year.

Documentation of scheduled workshops and, where available, civic projects.

**Grant Request – Budget Request Sheet**  
**Equipment Needed**

Equipment – Please list item(s) and purpose. <i>(Please note: All request over \$500 must include three bids based on the required specifications for the equipment).</i>	Total Cost per Item	Number of items requested	Total Amount Requested

**Supplies Needed**

Supplies – Please list item(s) and purpose. <i>(Please note: Office supplies are not eligible)</i>	Total Cost per Item	Number of items requested	Total Amount Requested

**Service Needs**

Consultant/ Service – Please list service, and benefit or purpose. <i>(Please note, all consultant request must be accompanied by credentials, experience and/or education of the consultant.)</i>	Hourly Rate	Number of Hours Needed	Amount Requested
Name of Consultant:			
Name of Consultant:			
Name of Consultant			
Name of Consultant			

## Trips and Transportation

Destination:	# of travelers	Admission fee for each	Mode of transportation	Amount Requested

**Purpose of trip:** *(You must attach the lesson plan information for which this trip supports)*


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## **Glossary of Terms**

1. **Benchmarks – a standard or point of reference**
2. **Budget Justification- justification of amount indicated in budget. (necessity of item selection)**
3. **By-Laws – A rule made by an organization to control the actions of its members.**
4. **Capacity Building – to increase the awareness or education of members/community being served.**
5. **Demographics – study of the structure of human populations using statistics of birth, death, wealth, disease, etc.**
6. **Evaluation Tools – information used to do evaluate**
7. **Fiscal Agent - corporation or individual who handles the financial accounting and distribution of funds for organization.**
8. **Indicators – A gauge or meter of specified kind.**
9. **Inputs – the action or process or putting or feeding something in**
10. **Logic Models – Models of Change**
11. **Logic Models – Problem Statement**
12. **Matching Dollars – Dollars or resources used to match grant dollars**
13. **Mission Statement – Summary of the aims and values of an organization.**
14. **MOU's – Memorandum of Understanding - agreement to participate.**
15. **Needs Assessment – An assessment of the need of population or organization.**
16. **Process Evaluation – evaluation of process undertaken to achieve goals**
17. **Product Evaluation – evaluation of goals**
18. **Resource Inventory – inventory of assets and resources**
19. **RFP/RFA – Request for Proposals or Applications**
20. **Restricted Funds – Funds restricted to a specific use.**
21. **Risk Factors - factors to determine obstacles or causes to issues or problems.**
22. **Sustainability - the ability to sustain activity once funding source has ceased.**
23. **SMART - Specific, Measurable, Achievable, Realistic, Timely**
24. **Unrestricted Funds - Funds not designated, available for corporate use.**
25. **Outcomes - Programs with performance measurements.**
26. **Outputs - resources or completed assignments attributed to activities of corporations**