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**UCAN AmeriCorps**

**2024-2025 Request for Proposal (RFP)**

**Application**

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| --- | --- | --- | --- | --- |
| **Service**  **Term** | **Term**  **Dates** | **Cash**  **Match** | **In-Kind Match** | **Proposal Due Date** |
| **900 hour** | February 3, 2025  –  July 31, 2025 | $6,000 | $4,000 | October 30th, 2024 |
| **300 hour** | June 2, 2025  –  July 31, 2025 | $2,000 | $1,000 | February 15th, 2025 |

For questions or clarifications, please refer to the RFP Guidelines document or contact Julia Anselmo at [Julia.anselmo@ucancap.org](mailto:Julia.anselmo@ucancap.org).

**Coversheet**

|  |  |
| --- | --- |
| PRIMARY APPLICANT CONTACT (person submitting application on behalf of organization) | |
| Organization Name: | |
| Organization Address: | |
| Employer Identification Number (EIN): | |
| Primary Applicant Name: | |
| Applicant Title: | |
| Applicant Email: | |
| Applicant Phone: | |
|  | |
| CONTRACT PERSON CONTACT (person legally able to join into a binding agreement, if same as primary applicant, write “Primary Applicant”) | |
| Legal Signer Name: | |
| Legal Signer Title: | |
| Legal Signer Email: | |
| Legal Signer Phone: | |
|  | |
| SITE-SUPERVISOR CONTACT (if same as primary applicant, write “Primary Applicant”) | |
| Site Supervisor Name: | |
| Site Supervisor Title: | |
| Site Supervisor Email: | |
| Site Supervisor Phone: | |
|  | |
| SITE-MENTOR CONTACT (if same as primary applicant, write “Primary Applicant”) |  |
| Mentor Name: | |
| Mentor Title: | |
| Mentor Email: | |
| Mentor Phone: | |
|  | |
| ACCOUNTS PAYABLE CONTACT (person to whom we will send invoices) | |
| Accounts Payable Name: | |
| Accounts Payable Title: | |
| Accounts Payable Email: | |
| Accounts Payable Phone: | |
| Accounts Payable Mailing Address: | |

**Eligibility Information**

|  |  |
| --- | --- |
| 1. Which of the following best represents your type of organization? | |
|  | 501(c)(3) organization |
|  | School district or educational service district |
|  | Government (local, county, city, regional, state or federal) |
|  | Tribal Nation  Faith-based or community-based organization |
|  |  |
| 1. What Service Term are you applying for?  |  | | --- | | 900 hour | | 300 hour | |  |  1. Number of members being applied for by your organization: | |
|  | One |
|  | Two |
|  | *Other:* |
|  |  |
| 1. Which of the following UCAN focus area(s) best describes your proposed project? | |
|  | Education |
|  | Economic Opportunity |
|  | Healthy Futures |
|  |
| 1. Which of the following counties within UCAN’s current service region will your AmeriCorps project serve? (check all that apply) | |
|  | Coos |
|  | Curry |
|  | Douglas |
|  | Jackson |
|  | Josephine |
|  |
| 1. If you have staff under a collective bargaining agreement at your organization, have you discussed the AmeriCorps placement with a union representative to ensure the proposed position doesn’t encroach upon collectively bargained labor? | |
|  | Yes |
|  | No |
|  | Not Applicable |
|  |  |
| 1. Will your agency make accommodations so your work site is accessible to a member with disabilities? | |
|  | Yes |
|  | No |
|  |  |
| 1. Which of the following **resources** will be available to your Member? (check all that apply) | |
|  | Computer or laptop |
|  | Email account with internet access |
|  | Telephone & Voicemail |
|  | Workstation – how many square feet? |
|  |  |
| 1. Transportation for member service activities: | |
|  | An organizational vehicle is provided to the member for:   * service activities * transporting clients/youth (if necessary) * *Note: member must be covered by organization’s vehicle insurance policy.* |
|  | Personal vehicle required and:   * host site will reimburse members at the federal employee reimbursement rate for all service activity related travel * *Note: Member may not transport clients/youth in personal vehicles.* |
|  | No travel required for the AmeriCorps project: |
|  | Other: |
|  |  |
| 1. Are you prepared to pay the Host-Site Cash Match for your selected Service Term? | |
|  | Yes  No |
| 1. Which of the following **sources** best describes how you will fund your Member? | |
|  | Local |
|  | State |
|  | Private |
|  | Federal *(approval for use with AmeriCorps/CNCS funds required)* |
|  |  |
| 1. Funding for the proposed project(s) is: | |
|  | Secured |
|  | Pending; will be confirmed by: |
|  |  |
| 1. Is your organization committed to fulfilling the In-Kind match requirement for your selected Service Term? | |
|  | Yes  No |
|  |  |
| 13. Does your organization have a general commercial liability policy? | |
|  | Yes |
|  | No |
|  |  |
| 14. If so, does it meet UCAN’s minimum requirements of $500,000 of single occurrence general liability, $1,000,000 of aggregate general liability, and if host site requires a member to drive a vehicle, $1,000,000 in auto coverage? | |
|  | |  | | --- | | Yes | | No | |

**Volunteer Capacity Assessment (VCA)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| We want to make sure that your member’s service not only helps you serve more folks during their service, but that your member will leave you with a greater capacity to continue serving more people. In providing you a member, we need to ensure that your member boosts your organization’s capacity to use volunteers. We determine this by focusing on how members help with the achievement of ***selected Volunteer Management Goals (VMGs)*** at each of our host sites.  Below you will find a self-assessment to analyze what your organization’s current state is with respect to various Volunteer Management Goals. We have organized the self-assessment into goals we think a member can achieve in the short-term, mid-term and by the end of their service. (*300hr positions are only required to complete 2 short-term goals).* By completing this self-assessment, we can together best determine which goals your member will focus on to best support your organization’s needs.  To complete this self-assessment, indicate whether your organization has not started on a particular goal (entering a “0”), is working toward the goal (entering a “1”) or has already achieved the goal (entering a “2”). Complete the table for each goal.   |  |  |  | | --- | --- | --- | | **VMG #** | **Volunteer Management Goal** | **Rating** | | **Tier 1: Short-term Goals** | | | | **1a** | A purpose statement has been developed for the organization’s volunteer program. |  | | **1b** | Benefits and challenges related to volunteer involvement inside the organization have been identified. |  | | **1c** | Needs for volunteer roles throughout the organization have been identified, including opportunities for skilled volunteers or volunteer leaders. |  | | **1d** | A supervisor has been identified for every volunteer role. |  | | **1e** | A volunteer waiver form that addresses potential risks has been developed. |  | | **1f** | Research has been done on diverse volunteer roles that include a wide range of abilities, ages, and interests. |  | | **1g** | Research has been done to identify potential partnerships with community organizations (e.g., outside organizations, businesses, service clubs) as sources for volunteer recruitment. |  | | **1h** | A responsive communications process is in place so volunteers are contacted within a reasonable time after they apply. |  | | **1i** | Volunteer supervision responsibilities are included in staff and higher-level volunteer position descriptions (e.g., providing support, opportunities for communication, accountability). |  | | **1j** | A plan for integrating volunteers into the organizational structure at multiple levels has been developed. |  | | **1k** | Systems have been created to match volunteers with appropriate positions based on their abilities, interests, and level of commitment. |  | | **1l** | Research has been done on how to evaluate volunteer recruitment efforts and their effectiveness. |  | | **1m** | Volunteer tracking mechanisms have been researched. (e.g., tracking of volunteer hours, tasks accomplished, etc.) |  | | **1n** | A system to provide feedback and evaluation on the work of individual volunteers has been researched. |  | | **1o** | A system to receive and address volunteer feedback has been developed. |  | | **Tier 2: Midterm Goals** | | | | **2a** | There is a plan in place to dedicate appropriate resources (e.g., financial, space, training, supervision, etc.) to the organization’s volunteer program. |  | | **2b** | Human resources and risk management policies that relate specifically to volunteers have been developed. |  | | **2c** | Volunteer position descriptions that include performance goals or expectations have been developed. |  | | **2d** | A volunteer application form and application process is in place (e.g., system for distributing, collecting, and reviewing applications and conducting interviews as appropriate). |  | | **2e** | A volunteer recruitment plan has been developed. |  | | **2f** | Resources (financial, space, training, supervision, etc.) have been allocated for a volunteer management program. |  | | **2g** | Efforts have begun to incorporate community organizations (e.g., outside organizations, businesses, service clubs) in regular volunteer activities. |  | | **2h** | Volunteer tracking mechanisms (e.g., tracking of volunteer hours, tasks accomplished, etc.) are implemented. |  | | **2i** | Processes have been created to review and confirm volunteer supervisors are ensuring that their volunteers are complying with applicable human resources and risk management policies. |  | | **2j** | Strategies (e.g., events) are implemented to build relationships between staff and volunteers. |  | | **2k** | A plan to address potential conflict between staff and volunteers has been implemented. |  | | **2l** | Ongoing volunteer onboarding plan and materials have been developed. |  | | **2m** | An evaluation plan has been developed to utilize the data obtained using the volunteer tracking mechanisms. |  | | **Tier 3: Long-term Goals (***Only required for 900hr term)* | | | | **3a** | A recruitment plan for volunteers has been created, including marketing to community organizations (e.g., outside organizations, businesses, service clubs) and diverse populations. |  | | **3b** | Volunteer orientation trainings and materials have been implemented for current and future volunteers. (e.g., orientation, handbook, emergency procedures plan, etc.) |  | | **3c** | All volunteers and staff have been trained to ensure that volunteers are complying with applicable human resources and risk management policies. |  | | **3d** | Diverse volunteer roles that include a wide range of abilities, ages, and interests have been recruited and implemented within organization. |  | | **3e** | The organization has a plan to ensure that volunteers represent the diversity within the community, including a system for recruiting and meeting needs of diverse groups. |  | | **3f** | Staff and volunteer leaders are trained in volunteer management best practices that include varied approaches appropriate for diverse individuals and groups |  | | **3g** | The organization’s volunteer retention rate (e.g., number of volunteers that completed their original commitment to the organization) is tracked, recorded, and analyzed. |  | | **3h** | A volunteer retention and recognition plan that includes formal (e.g., celebration, gifts) and informal (e.g., organizational culture of appreciation) recognition has been developed. |  | | **3i** | Community partnerships for volunteer recruitment have been identified (e.g., outside organizations, businesses, service clubs) and cooperative outreach strategies have been implemented. |  | |

**Volunteer Management Goals (VMGs)**Now that you have completed the self-assessment, determine how your member will best build your capacity, selecting a single short-term, mid-term and long-term goal for your member (*300hr positions are only required to complete 1 short-term and 1 mid-term goal,* ***or*** *2 short-term goals*). You will select these goals from items you rated as either a “0” or “1” above. Complete the section below by entering the Volunteer Management Goal # used in the table, the description accompanying the number, and your assessment of your organization on this goal (either a “0” or “1”). Please also describe strategies to be employed by the member so that the goal is achieved. These strategies will help ensure your member achieves each goal.

Short Term -

* VMG #:
* VMG Description:
* Baseline Assessment Rating:
* Strategies for Achievement:
  + - Strategy #1:
    - Strategy #2:

Medium Term - *Only required for 900hr term. 300hr positions may select another short term goal.*

* VMG #:
* VMG Description:
* Baseline Assessment Rating:
* Strategies for Achievement:
  + Strategy #1:
  + Strategy #2:

Long Term – *Only required for 900hr term.*

* VMG #:
* VMG Description:
* Baseline Assessment Rating:
* Strategies for Achievement:
  + Strategy #1:
  + Strategy #2:

**Proposal Narrative: Executive Summary**

Refer to the ***Proposal Guidelines*** document for detailed information on completing the following narrative questions. Please keep each answer to 500 words or less.

**ORGANIZATION AND QUALITY OF PROJECT**

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| --- |
| 1. Tell us about your organization. Please Include any of the following statements for your agency: mission, vision, equity/diversity statement and/or goals |
|  |
| 1. Provide an overview of the AmeriCorps project; how did you determine the need for this project? Outline the program activities that will be undertaken by the AmeriCorps member and how they relate to your selected UCAN Focus Area(s). |
|  |
| 1. Once your member is fully on boarded, what will a standard day of service look like for your member? |
|  |
| 1. How will this project engage community volunteers, unpaid interns, or youth service-learners to increase your organization’s capacity to provide the described programs above? |
|  |
| 1. Is this position unique and different from any current *or* past paid staff positions? If there are similar responsibilities, *how* are they different from paid positions? |
|  |

**ORGANIZATIONAL CAPACITY**

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| --- |
| 1. Supervision & Mentorship: For both your supervisor and mentor, what experience do these individuals have, and what makes them uniquely qualified to be the day-to-day supervisor & mentor? Describe the structure for daily supervision, mentorship and overall project oversight. |
|  |
| 1. Risk Management: Please describe the potential risks to the safety of members and volunteers in this project and how your organization’s systems and policies will keep them safe within the scope of their project duties? |
|  |
| 1. Workspace: Describe the workspace your organization will provide to your member. Please describe where the supervisor will be located in relation to the member’s desk space? What about the mentor? |
|  |
| 1. Onboarding: Describe your plan for educating staff, the board, funders, and your community about AmeriCorps and the member’s *specific* role in your organization. What is your plan to prepare and welcome your member to your organization? |
|  |

**SUSTAINABILITY**

|  |
| --- |
| 1. How do you plan to continue this project in the future without AmeriCorps support? Share your plan for sustaining the project. If you have previously been successful at making AmeriCorps activities sustainable, describe your success*. (only required for 900hr term)* |
|  |

**MEMBER RECRUITMENT**

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| --- |
| 1. Host sites are required to lead local and targeted recruitment efforts for their project, and should not rely on UCAN to secure national or local applicants. Outline a local recruitment plan to secure your AmeriCorps member(s). Please strategize ways you could recruit from the communities this project serves. |
|  |
| 1. Housing: What strategies or resources do you have that will assist your member in securing affordable housing? *E.g. connections to housing opportunities, possible roommate, individuals willing to board the member while they search for housing, or if your organization is able to provide housing (upon UCAN approval).* |
|  |
| 1. My.AmeriCorps Tagline: Consider your project’s “hook” to entice national applicants to look at your full listing. ***In 200 characters or less*** (including spaces) provide a tagline to be used on the MyAmeriCorps website. |
|  |