



City of Bonita Springs Food Insecurity Program

Request for Proposal

APPLICATION COVER PAGE

Program Name: _____

Applicant/Agency: _____

Federal ID/EIN #: _____

Mailing Address: _____

City, State, Zip: _____

Telephone Number: _____

Fax Number: _____

Name of Contact: _____

Title: _____

Telephone Number: _____

Fax Number: _____

Email Address: _____

Web Address: _____

Amount requested for this application (*): _____

I hereby certify that I am an authorized representative of the agency and that to the best of my knowledge:	
<input type="checkbox"/>	The information contained in this application and the supporting documentation is true and accurate.
<input type="checkbox"/>	The governing body has duly authorized this document.
<input type="checkbox"/>	The agency will be able to meet all of the minimum application requirements as specified in the announcement.
<input type="checkbox"/>	The agency will deliver services as described in the application if a contract is awarded.

Name of Authorized Official: _____

Title: _____

Signature of Authorized Official: _____

Date: _____

Narrative

AGENCY INFORMATION	
1.) Agency's mission statement	
2.) What is the agency's program budget?	
3.) What zip codes does the agency serve?	
4.) Describe who your program serves.	
5.) Agency hours and days of operation.	
6.) How many households does the agency currently serve?	

7.) At what location(s) are services provided?
8.) What outreach methods are used to serve clients?
9.) Is the Board of Directors involved in long range or strategic planning for the agency? If so, describe their role in the process.
10.) Describe the Board's involvement in providing oversight regarding operations and service delivery.
11.) Describe the Board's involvement in approving and overseeing the agency's budget.
12.) Is there any pending litigation involving this agency or any of its principal officers? If so, briefly explain.
13.) Have any contracts been terminated due to non-performance or non-compliance in the past three years? If so, briefly explain.

<p>14.) How has COVID-19 affected your agency and clientele?</p>
<p>PROGRAM DESIGN (SCOPE OF WORK)</p>
<p>15.) BRIEFLY describe the proposed program and how it addresses food insecurity. Include information about the program will operate on a daily basis, i.e., what a typical day looks like?</p>
<p>16.) What is the projected number of unduplicated clients to be served during the contract period?</p>
<p>17.) Explain how the unmet food need is not being addressed and how the program differs from similar programs being offered by other organizations.</p>
<p>18.) Describe the target population, the geographic service area (as applicable), and how the proposed service delivery method will best meet the needs of the target population. If possible, use research, statistics, or anecdotal evidence of need.</p>
<p>19.) How does the organization ensure accessibility to the target population? Include if the facility is located in an area convenient to the clients and if the facility is accessible by public transportation.</p>

PERFORMANCE EVALUATION SYSTEM (How does the agency satisfy the need?)

20.) List outcomes to be measured (no more than two): The outcome statement should reflect how the client benefits from the services/program being provided. It is NOT a statement of what the agency/program will do or what type of service will be provided. An outcome must be measurable and achievable. It should also be a realistic representation of the effectiveness of the program.

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REQUIRED ATTACHMENTS:

Each application must include the following information:

- Current program budget with revenue and expense categories
 - Current organizational budget with revenue and expense categories
 - IRS 501(c)(3) determination letter
 - List of Board of Directors
 - Agency's most recent audited financial statement including notes
 - *Optional:* additional materials which may help explain your agency or program
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Successful applicant will be required to track, at a minimum, the following information in order for reimbursement of funds.

(*) Required Fields

AGE GROUP

5 and under*	
6-12 years*	
13-17 years*	
18-30 years*	
31-50 years*	
51-61 years*	
62 and over*	
Age Group Not Collected*	
Total Age Group	0

GENDER

Male*	
Female*	
Gender Not Collected *	
Total Gender	0

RACE

American Indian or Alaskan Native *	
Asian*	
Black or African American*	
Native Hawaiian or Pacific Islander*	
White*	
Other Multi-Racial*	
Race Not Collected*	
Total Race	0

ETHNICITY

Hispanic*	
Not Hispanic Or Latino *	
Ethnicity Not Collected*	
Total Ethnicity	0

LEGAL RESIDENCE AT REFERRAL

Bonita Springs (34133, 34134, 34135, 34136)*	
34133	
34134	
34135	
34136	

INCOME LEVEL (See chart for user instructions)

Very Low (30% Of Median)*	
Low (60% Of Median) *	
Low/Moderate (80% Of Median) *	
Income Level Not Collected*	
Total Income Level	0

Scoring Rubric

Sections	EXEMPLARY (8-10 PTS)	ADEQUATE (5-7 PTS)	MARGINAL (3-4 PTS)	MINIMAL OR MISSING (0-2 PTS)	Reviewer Score
<p>LEADERSHIP: BOARD OF DIRECTORS OVERSIGHT COMPOSITION- KNOWLEDGE, EXPERIENCE, ABILITIES, DIVERSITY & CUSTOMER RELATABILITY</p> <p>Maximum Points Available: 10</p>	<p>The narrative and documentation regarding the Board demonstrates that overall, the Board has EXEMPLARY qualifications and engagement to guide the fiscal and operational aspect of the program.</p> <p>The composition of the Board clearly reflects the diversity of participants served.</p>	<p>The narrative and documentation regarding the Board demonstrates that overall, the Board has ADEQUATE qualifications and engagement to guide the fiscal and operational aspect of the program.</p> <p>The composition of the Board somewhat reflects the diversity of participants served.</p>	<p>The narrative and documentation regarding the Board demonstrates that overall, the Board has MARGINAL qualifications and engagement to guide the fiscal and operational aspect of the program.</p> <p>The composition of the Board is not reflective of the diversity of participants served.</p>	<p>The narrative and documentation regarding the Board demonstrates that overall, the Board has MISSING OR MINIMAL qualifications and engagement to guide the fiscal and operational aspect of the program.</p> <p>The composition of the Board is not reflective of the diversity of participants served.</p>	
Sections	EXEMPLARY (50-60 PTS)	ADEQUATE (40-49 PTS)	MARGINAL (21-39 PTS)	MINIMAL OR MISSING (0 – 20 PTS)	Reviewer Score
<p>PROGRAM DESIGN, SERVICE DELIVERY AND EFFECTIVENESS: Evaluates how well the application explains and defines the need for the services in the community; how the proposed services meet those needs; explains the target population and how the target population will be served by the proposed program. Specific attention should be given to data, needs assessment, goals and objectives that are provided.</p> <p>Maximum Points Available: 60</p>	<p>The need in the community is well defined with facts and data that demonstrates the community need.</p> <p>Provides an in-depth and thorough explanation to clearly explain the goals of the program, how the goals will be achieved and what the program will accomplish.</p>	<p>The need in the community is well defined with facts and data that demonstrates the community need.</p> <p>Provides an adequate explanation to explain the goals of the program but is not clear or detailed how the goals will be achieved and/or what the program will accomplish.</p>	<p>The need in the community is vaguely explained with little facts or data to demonstrate the community need.</p> <p>Explanation provided marginally explains the goals of the program and is not clear or detailed how the goals will be achieved and/or what the program will accomplish.</p>	<p>The need in the community is not explained and little or no facts or data provided which demonstrates the community need.</p> <p>Explanation regarding the goals of the program is not provided or is minimal. Little or no explanation of how the goals will be achieved and/or what the program will accomplish.</p>	

Scoring Rubric – Page 2

Sections	EXEMPLARY (15-20 PTS)	ADEQUATE (10-14 PTS)	MARGINAL (5-9 PTS)	MINIMAL OR MISSING (0-4 PTS)	Reviewer Score
<p>OUTCOMES, MEASURES, PROGRAM PERFORMANCE</p> <p>Maximum Points Available: 20</p>	<p>Provides an in-depth and thorough explanation of how program performance will be evaluated. Provides a valid Outcome Measure that is specific, achievable, measurable, and clearly identifies how client will benefit from service.</p> <p>Prior performance: Prior year outcomes were achieved or exceeded.</p>	<p>Provides an adequate explanation of how program performance will be evaluated but is not clear or in-depth. Outcome Measure identifies how client will benefit from service but is not clear as to how it will be achieved and/or measured.</p> <p>Prior performance: Prior year outcomes were achieved.</p>	<p>Provides a vague explanation of how program performance will be evaluated. Outcome Measure ambiguous and does not clearly state how client will benefit from service or how it will be achieved and/or measured.</p> <p>Prior performance: Prior year outcomes were not achieved.</p>	<p>No explanation is provided on how program performance will be evaluated or is very unclear and confusing. Outcome Measure is not provided or does not state how client will benefit from service and/or how it will be achieved and/or measured.</p> <p>Prior performance: Prior year outcomes were not achieved.</p>	
Sections	EXEMPLARY (8-10 PTS)	ADEQUATE (5-7 PTS)	MARGINAL (3-4 PTS)	MINIMAL OR MISSING (0-2 PTS)	Reviewer Score
<p>PROGRAM BUDGET NARRATIVE</p> <p>Evaluate how well the budget defines the unit of service, how unit was determined, if expenses are reasonable, if revenue is sufficient to cover expenses; if program remains viable if City funding is not received.</p> <p>Maximum Points Available: 10</p>	<p>Provides a concise definition of the unit of service and how it was determined. Expenses are reasonable and realistic. Revenue is sufficient to cover expenses and program will remain viable if City funding is not received</p>	<p>Provides an adequate definition of the unit of service and how it was determined. Expenses are reasonable and realistic. Revenue may not be sufficient to cover expenses and it is unclear that the program will remain viable if City funding is not received.</p>	<p>Definition of the unit of service and how it was determined is unclear or questionable. Expenses are not reasonable and/or realistic. Revenue does not appear to be sufficient to cover expenses and it is questionable that program will remain viable if City funding is not received.</p>	<p>Definition of the unit of service and how it was determined is missing, confusing and/or questionable. Expenses do not appear to be reasonable and/or realistic. Revenue does not appear to be sufficient to cover expenses and program will not be viable if City funding is not received.</p>	
<p>Bonus Points: Each proposed program or service that is intended to benefit children or youth will receive 5 bonus points.</p> <p>Maximum Points available: 5</p>					
					<p>Total Score (Max Total Score = 105)</p>