Aleutian Pribilof Island Community Development Association (APICDA) 2021 Community Development Grant Program (CDGP) Instruction and Application Packet

The APICDA Community
Development Grant
Program (CDGP) supports
economic development in
each of the six APICDA
communities of Akutan,
Atka, False Pass, Nelson
Lagoon, Nikolski and St.
George.

This Grant provides a resource to APICDA communities of direct financial support and assists with leveraging additional funding for their priority initiatives.

Each APICDA community has developed a Community Development Plan which identifies goals for the community. This program assists communities in accomplishing their community development goals.

In each APICDA community, the City, Tribe and/or Village Corporation may apply for the CDGP. Funding for the Grant is designated by APICDA's Board of Directors, based on available funds and the recommendation of the Budget and Audit Committee. An allocated amount per community will be authorized each year by the Board of Directors.

APICDA will consider applications from communities and the eligible entities until the total grant funds for each community are exhausted. Late or incomplete applications are not accepted. There is no rollover of unallocated grant funds at the end of the grant period.

Projects must be listed on the Community Development Plan and meet one or more of the CDQ Program Requirements:

- Benefit all community residents
- Provide in-region employment
- Aid in the reduction of poverty
- Provide economic and social benefits for the community residents
- Aid in creating a sustainable and diversified local economy
- Benefit the fishing industry directly or indirectly

The 2021 grant period is open January 1 - October 1, 2021

How to apply:

- 1. Submit application packets no later than 5:00PM AKST on October 1, 2021 via email to programs@apicda.com
- 2. Complete applications include:
 - i. Application Form with Budget and Timeline Forms
 - ii. Written Grant Proposal Narrative
 - Documentation of previous grants or projects completed by applicant
 - iv. Supplemental information to support application

Additional Requirements:

Grant awardees will be required to submit quarterly reports with itemized accounting of the grant award. Quarterly reports are due no later than 10 business days past the end of the quarter. Upon completion of the project, awardees must submit the grant close-out form with a final itemized accounting of the grant.

Instructions: Complete the application form and provide all supplemental documents listed under the required documents checklist. Complete the application, answering all fields in the application form as thoroughly as possible. The application and supplemental material will assist APICDA in evaluating the grant request. Submit complete applications by email to programs@apicda.com.

The APICDA Program Committee reviews all applications. As needed, APICDA staff will request additional information. After a full review, a funding recommendation is prepared for the Board of Directors for a final decision. All applicants will be notified in writing of the Board's decision.

1. Date of application:	
2. Name and address of entity to which CDGP w	vould be paid. Please list exact legal name:
	Telephone:
	Cell:
3. Project title:	
4. Purpose of grant (one sentence):	
5. President/CEO/Administrator name:	
6. List names, titles and contact information of th	ne project manager(s) who will direct the project.
7. Grant request: \$ Total	project budget: \$
8. Anticipated length of project: Start date:	End date:
9. Is this a multi-year project? Yes No	
10. Is this project listed as a goal on your Comm	nunity Development Plan? Yes No
If no, please explain here:	

11. What is the primary purpose and the need or problem that you are seeking to address with this project?
12. Does this project benefit all community residents? Yes No Please explain here:
13. Does this project provide economic and social benefits for community residents? Yes No
14. Does this project create new jobs in the community? Yes No# of Full-time Jobs List Job Titles: # of Part-time Jobs List Job Titles: # of Temporary Jobs List Job Titles: If the answer is no, please explain here:
15. Does this project contribute to employment or other long-term income generating opportunities for community members? Yes No Please explain here:
16. Does this project directly or indirectly support the fishing industry in the community and/or region? Yes No Please explain here:
17. Does this project require additional funding sources (i.e. state or federal grants, in-kind funds, etc.) Yes No Please explain here:

Budget Form

Project Title:			
	nit budget form wit	h your application	
<u>Expenses</u>			
Evnance Itama	Line Item Total	Amount Requested from ARICDA	
Expense Items (e.g. labor, material, admin, etc.)	Line item rotai	Amount Requested from APICDA	
(=:5:,,,			
*Totals	\$	\$	
luaa wa			
<u>Income</u>			
Income Source	Line Item Total	Amount Requested or Awarded	
(e.g. entity match, other grants, etc.)	Ziiro Roiii Fotai	, unearm requested or , maraed	
*Totals	\$	\$	
Name and contact information for pe	erson who will be r	esponsible for finances:	
Name:	Title:		
Office Phone:	Cell Phone:		
Email:			

Detailed Project Planning Form

*Submit timeline form with your application

TASKS	RESPONSIBLE PERSON	START DATE	END DATE	BUDGETED COST	STATUS
PHASE 1					
PHASE 2					
PHASE 3					
PHASE 4					
PHASE 5					
FIRSE 3					
PROJECT TEAM-Complete with your application and submit changes with each quarterly report					
NAME & ROLE	1	QUALIFICATIONS		RESPONSIBILITIES	

PROJECT TEAM-Complete with your application and submit changes with each quarterly report			
NAME & ROLE	QUALIFICATIONS	RESPONSIBILITIES	

Required Attachments:

1. Grant Proposal Narrative Guidelines

2020 APICDA CDGP grant funds.

Signature of Mayor/CEO/President

Name of Governing Entity

- **Provide the following Project Information:**
 - 1. Project rationale-Identify problem/current need
 - 2. Project goals and outcomes
 - 3. List all collaborations or partnerships
 - 4. Statement addressing the project's sustainability and feasibility

Be sure to include information regarding items of significance resulting from this grant such as; new

equipment, infrastructure repairs or replacement, saving improved business, feasibility studies, business plans, c	
2. Budget Form	
3. Detailed Project Planning Form	
4. Documentation of Previous Grants or Projects Ad	lministered by Applicant.
5. Supplemental Information to Support Application	
By signing below, I certify all information is true and corrapproved, I agree to carry out this project as approved authorized to sign and accept funding on behalf of this contact.	by the APICDA Board of Directors. I am
XSignature of Executive Director/CEO/President	Date
XPrinted Name	Project Title

Date: Date:

Signature from other eligible community entities acknowledging this application is being submitted for

Name of Governing Entity

Signature of Mayor/CEO/President

^{*}APICDA will not process applications until all signatures are acquired.