EMERGENCY FUNDING REQUESTS

POLICY:

In general, such requests are discouraged and in fact should be rare. In most cases, the requestor will first be directed to available regular funding opportunities and processes. Some examples of circumstances which would justify an emergency funding request are:

a) The sudden/unexpected loss of committed revenue for reasons beyond agency control.
b) The sudden increase in budgeted expenses due to circumstances beyond agency control (e.g. larger than anticipated rent increase).
c) The sudden increase in demand for services due to external factors.

CRITERIA FOR EVALUATION:

For those requests which are accepted for review, the following criteria will be used to evaluate their merits:

1) The use of the requested funds must measurably advance First 5 Marin Priority Results

2) Lack of requested funding must have an immediate negative effect on the 0-5 population, or portion thereof, in Marin.

   a. The agency/organization requesting funds must have a track record of significant success in delivering services to the 0-5 population.
   b. Funds may not be requested to augment the budget of a project currently funded through First 5 Marin.
   c. All funds received under this policy must be spent within one year of the receipt of funds.
   d. The funds must not supplant existing funds.

PROCEDURE FOR SUBMITTING EMERGENCY REQUESTS:

1. The entity making a request must submit a letter of intent that directly addresses the criteria above and indicates the dollars needed and timeline for requested support.
2. The letter of intent will be reviewed by staff and acted upon within 30 days of receipt. Staff may discuss the letter of intent with the requestor to determine if the situation meets the required criteria and is of such urgency that it should be considered for review.

   a. For requests under $10,000, the Executive Director may make the determination based solely on the letter of intent (and any conversation with the applicant) and may approve, modify or deny the request.

   b. For requests over $10,000, an organization must submit the Emergency Funds Request Application which will be reviewed by the Executive Committee of the Commission. The Executive Committee will make a funding recommendation to the full Commission at its next meeting. The full Commission may then approve, modify or deny the request.
General Instructions
for
Emergency Funding Application for Requests over $10,000:

1. One original and three copies of the application and all attachments must be submitted.

2. Applicant must attach proof of 501-c(3) non-profit status.

3. Applicant must attach a list of the members of the Board of Directors, including phone numbers.

4. Section page limits may not be exceeded.

5. Applicant may submit letters of support, but they are not required and are not part of the page limits.

6. Questions should be directed to Amy L. Reisch, Executive Director, Marin Children and Families Commission, 415-257-8556, email: alreisch@marincfc.org
Emergency Funding Request Application
For Requests over $10,000

Cover Sheet

Send Application to:

First 5 Marin Children and Families Commission
1101 5th Avenue, Suite 215
San Rafael, CA  94901

Project/ Program Name

Legal Name of Organization

Address of Organization

Telephone Number  FAX Number

Non-Profit Status  501c (3)/ Name of Fiscal Agent  if Different from Above

Agency Contact Person  Phone Number

Total Dollar Amount Requested:

______________________________
Signature, Executive Director    Date

______________________________
Signature, Chair, Board of Directors (where applicable)    Date
1. In narrative form, please describe your program. Discuss the reason(s) why a lack of funding will have a negative effect on the 0-5 population of Marin (in the area you serve).

2. Explain the reason(s) your agency has a funding crisis precipitating this request. Include a discussion of the anticipated duration of the funding crisis.

3. Describe your agency’s experience working with the 0-5 population. How does this experience fit in with the overall mission and vision of your agency?

4. In narrative form, please discuss program/project goals, strategic and program outcomes, and program objectives, activities, and timelines. How do they mesh with the strategic goals and outcomes of First 5 Marin?

5. What are your plans for sustainability of the program described after these funds end?
## PROJECT BUDGET

**Agency Name:**

**Project Name:**

**Total Dollar Amount Requested:**

**Length of funding requested, in months:**

Applicant may use alternative format to submit budget information but all information requested below must be included.

### Revenues

<table>
<thead>
<tr>
<th>Revenues</th>
<th>Cash Revenues</th>
<th>In-kind Revenues</th>
<th>Total Project Revenues</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Five</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marin CFC</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other income, list</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### TOTAL INCOME

### Expense Categories

<table>
<thead>
<tr>
<th>Expense Categories</th>
<th>Cash Expenses</th>
<th>In-kind Expenses</th>
<th>Total Project Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Project Personnel, list position, % of full time, and monthly salary</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. Fringe, as % salary</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Subtotal, personnel costs*

<table>
<thead>
<tr>
<th>C. Rent</th>
<th>D. Other Operating Expenses</th>
<th>E. Equipment, over $500</th>
<th>F. Travel &amp; Training</th>
<th>G. Consultants</th>
<th>H. Subcontractors</th>
<th>I. Other Costs</th>
<th>Subtotal</th>
<th>J. Indirect, % of budget</th>
</tr>
</thead>
</table>

### TOTAL EXPENSES
BUDGET INSTRUCTIONS

1. Applicant must complete Project Budget and Budget Narrative.

2. Applicant must include documentation of anticipated additional income listed in the budget. List sources and amounts of all non-First 5 Marin income.

3. Administrative overhead costs may not exceed 10%. Agency administrative personnel costs may not be listed as part of project budget if reimbursement for their costs is included in administrative overhead.

4. Personnel costs must include positions, salary, and actual % of time worked for each employee. Salary and fringe benefits must be prorated for non full-time employees, if agency provides fringe benefits to part-time employees.

5. In-kind revenues include: non-cash support, such as free or reduced rent, volunteer hours, free xeroxing, etc. When estimating in-kind support from volunteers, delineate hours worked, job title and hourly rate used.

6. In-kind expenses include: all non-cash expenses to the project, such as volunteer hours, free or reduced rent, etc. Again, please delineate hours worked, job title and hourly rate used when budgeting volunteer hours.

BUDGET NARRATIVE

Please use no more than 2 pages to answer the following questions.

1. Please detail equipment expenses over $500.

2. If you are including consultant services in your budget, please explain the need for consultant services and describe the scope of work for each consultant on the project.

3. If you are subcontracting for services, please detail the arrangements, including financial expectation. Attach a Memorandum of Understanding (MOU) with all organizations with whom your agency will contract.

4. Explain in-kind revenue and/or expenses in more detail if appropriate.

5. Explain “Other Costs” if they have been included in the budget.