



## ***Associates of Vietnam Veterans of America, Inc.***

### ***Homeless Project Grant Application***

#### INSTRUCTIONS FOR HOMELESS GRANT APPLICATION

When submitting a proposal for funding, you must complete the attached Grant Proposal Cover Sheet and the Grant Proposal Outline as indicated in full.

Applicants will be notified in writing of a decision within 8-12 weeks of receipt. Applicants should plan accordingly.

All materials submitted become the property of AVVA.

Recipients of this AVVA Grant agree to submit a 250-500-word narrative explaining the use of the funds received and how the grant will impact operations. The narrative should be suitable for publication in The VVA Veteran, annual reports or similar publications. All grants are subject to audit by AVVA at any time. Unless otherwise approved, all grants may be disbursed quarterly or annually upon receipt of a report detailing the progress and time of project funded by AVVA. AVVA will forward funds to the treasurer or administrator of the grant or as indicated in the grant proposal.

Recipients of AVVA grants may be required to submit periodic reports detailing activities related to the grant. The number of reports and their due dates will be outlined in the grant award letter. Failure to file reports in a timely manner may result in forfeiture of the remaining grant or any future considered grant proposals.

AVVA reserves the right to visit, and/or review and monitor all activities related to the management and operation of the grant.

***APPLICANTS ARE RESPONSIBLE FOR THE ACCURACY OF THEIR SUBMISSION.  
INCOMPLETE PROPOSALS WILL NOT BE CONSIDERED.***

***The original and six (6) copies of the proposal must be submitted to:***

Associates of Vietnam Veterans of America  
Homeless in America Grant  
8719 Colesville Road, Suite 100  
Silver Spring, MD 20910-3919

**Added to Forms , 2010**

***F-Prog08.01***



## **Associates of Vietnam Veterans of America, Inc.**

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**NOTE: ALL QUESTIONS OR REQUESTS CONCERNING GRANT PROPOSAL OR PROCESS SHOULD BE DIRECTED TO AVVA FINANCE CHAIR, Kaye Gardner. She can be reached at (301) 845-4296 or by e-mail to [Kayegardner@aol.com](mailto:Kayegardner@aol.com)**

### **AVVA GRANT PROPOSAL OUTLINE**

(Note: Your Proposal Outline should include, at a minimum, responses to the following statements/questions. Feel free to elaborate where you think it would be helpful.)

**EXPLAIN YOUR PROPOSAL IN DETAILED RESPONSES TO THE FOLLOWING:** (Use additional sheets if necessary)

1. Provide a detailed narrative of the proposed project. Include answers to “who, what, when, how and why”.

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2. How will the project be managed?

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- a. Who will have overall management responsibility for the project?

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- b. Who will have overall financial responsibility for the project?

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- c. Who will have administrative responsibility for the project?

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3. Explain the time frames and deadlines for completing each aspect of the project.

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4. Is this an existing project? Yes \_\_\_ No\_\_\_  
Explain: \_\_\_\_\_

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5. If yes, how has the project been funded in prior years?

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6. Is the intended to be an on-going project? Yes \_\_\_ No \_\_\_

7. If yes, how will this project be funded in future years?

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8. Provide a brief resume for all personnel included in your project.

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9. Explain any other projects, which have been managed by your organization similar to one proposed. Include an explanation of the size and monetary value of each project.

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10. Include a line item budget for all project cost.

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Signed: \_\_\_\_\_

Signature of Person Responsible for Administering the Grant

Signed: \_\_\_\_\_

Signature of Executive in Charge of the Organization

***NOTE: If your grant request has not answered all questions, and has not included all attachments, it will not be considered.***

## **AVVA GRANT PROPOSAL COVER SHEET**

*(Note: This Proposal Cover Sheet should be considered as a synopsis of your proposal. This Cover Sheet should highlight many of the points that are of particular significance to those deciding the worthiness of your proposal and are important to the final decision.)*



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Name of Requesting Organization: \_\_\_\_\_

Total Cost of Project: \_\_\_\_\_

Total Amount Requested: \_\_\_\_\_

Matching Funds: Yes \_\_\_\_ No \_\_\_\_

a. If yes, from whom? \_\_\_\_\_

b. Amount? \_\_\_\_\_

Short Description of Project (such as title): \_\_\_\_\_

\_\_\_\_\_

Person Responsible for Administering Grant: \_\_\_\_\_

\_\_\_\_\_

Executive in Charge of Organization: \_\_\_\_\_

\_\_\_\_\_

Are you VVA National, State Council or Chapter? Yes \_\_\_\_ No \_\_\_\_

If AVVA is involved in Project, and if so, how, and to what extent: \_\_\_\_\_

\_\_\_\_\_

If NO, attach a letter of endorsement from either AVVA/VVA National office.

\_\_\_\_\_

VVA State Council or Chapter (Attached) \_\_\_\_\_



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**AVVA National, State, Chapter, or Affiliated Chapter (Attached)**

Attach your IRS Determination Letter (Attached)

Attach a copy of your most recent IRS Form 990, **IRS Form 990-E, or IRS Form 990-N, (Attached)**

**Return Address for ALL Correspondence:**

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**FOR AVVA USE ONLY**

**AVVA Grant Application Number:** \_\_\_\_\_  
**Special Grant Conditions:**

Added to Forms , 2010

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