

Golden LEAF Foundation Food Distribution Assistance Program

Application Guidelines

Overview

This document contains detailed guidelines for organizations submitting an application. If you have questions about the program, including eligible entities and eligible uses of funds, please [see the Golden LEAF website](#).

Funds may be used for the following:

- Grants to nonprofit organizations to assist those organizations in (i) becoming eligible to be partner agencies of a North Carolina food bank or (ii) enhancing or expanding the capacity of current partner agencies of North Carolina food banks.
- Grants to nonprofit organizations to assist those organizations in (i) establishing a school-based weekend food assistance program or (ii) enhancing or expanding the capacity of current school-based weekend food assistance programs.

Golden LEAF Foundation expects that applications will exceed funds available for this program.

- Funds will be used to address a clearly defined gap in existing food assistance networks.
- Outcomes will be clear, measurable, and reportable. (Evaluation may continue after project completion.)

Process and Timeline

The Application is the final stage in the application process for applicants interested in the Food Bank Partner Agency (Potential New or Existing) funding opportunity within the Food Distribution Assistance Program.

Organizations must have completed the Pre-Application and Project Assessment (if applicable) in order to be eligible to submit an Application. For more information, please [see the Golden LEAF website](#).

Organizations May Submit Multiple Applications

Awards are capped at **\$250,000 per project**. Organizations may apply for more than one project. Projects may be considered separate based on the following:

- Proposed project will support food distribution at a separate physical location
 - Mobile distribution routes originating from one location are considered a single physical location.
- Proposed project has distinct outcomes that do not rely on another project in order to be met

Compliance Expectations

[Review guidance document posted on the Golden LEAF website](#) prior to beginning the application for information regarding monitoring, reporting, and compliance requirements for this program.

Eligible Use of Funds

[Review guidance document posted on the Golden LEAF website](#) prior to beginning the application.

Instructions

1. Review these guidelines
2. Download required documents from Golden LEAF website
3. Gather required information and documents
4. Visit Golden LEAF website for link to application portal

Applications are accepted on a rolling basis.

Applications submitted by **NOON on March 7** will be eligible for consideration by the Golden LEAF Board at their August 2 meeting. All applications must be submitted by **NOON on April 28**.

Review and Notification

Golden LEAF staff will review applications on a rolling basis. Review will include follow up by email to request additional information, virtual meetings, and, for most projects, an in person site visit. Organizations will be notified in writing if an award is made. Decisions will not necessarily be made in the order applications were received.

Contact

If you need assistance or have questions regarding the Application process, please reach out to Golden LEAF using the contact form on our website at <https://www.goldenleaf.org/food-distribution/contact/>.

Application Requirements

The following information is required for the Application. The purpose of this guide is to provide an overview of the questions, the details expected for each response, and additional clarity regarding the information requested.

Documents

The Application form requires the following attachments for all projects. Templates are available for download from the Golden LEAF website at <https://www.goldenleaf.org/food-distribution/resources/>.

1. Application Submission Certification Form
2. Certification of No Overdue Tax Debts
3. Budget/Expense Tracking Form
4. Organization's budget for current fiscal year

The following attachments are required if available or if applicable.

1. Food Distribution Location Addendum* (*pick up food distribution only*)
2. Photos of space available/proposed location of improvements (*depending on project type*)
3. Delivery Area Map (*mobile food distribution only*)
4. Strategic Plan (*if available*)
5. Quotes/Estimates for Proposed Expenditures (*if available*)
6. Endorsement Letter from Partner School(s)* (*for School-Based Weekend funding only*)
7. Six most recent monthly reports to the food bank (*for Existing Food Bank Partner Agencies Only*)

Documents with an asterisk (*) indicate the required template must be used. Required document templates are available for download from Golden LEAF's website at <https://www.goldenleaf.org/food-distribution/resources/>.

Which questions will be required for each applicant depends upon the funding opportunity sought.

<i>Code</i>	<i>Required Respondents</i>
All	All
FBP	All Food Bank Partner Agency (Potential New and Existing) Applicants Only
FBP - Existing	Food Bank Partner Agency - Existing Partner Agency Applicants Only
FBP - New	Food Bank Partner Agency - Potential New Partner Agency Applicants Only
SBW	All School-Based Weekend Food Assistance Applicants Only

Application Portal Questions

The **questions in bold** will appear in the application portal. The text below each question is intended to provide guidance regarding the type of information expected. Please review carefully. Organizations are encouraged to draft responses to each question prior to starting the application in the portal. Applicants can save and return to an application at a later time. *Please complete the application questions in order.*

Funding Opportunity

Which funding opportunity is your organization seeking funding for with this application? A separate application is required for each project. (All)

All organizations will select which funding opportunity they are applying to access. Response to this question will determine which additional questions will be required. If you are pursuing separate projects through both opportunities, a separate application will need to be submitted for each. Select one option:

1. Food Bank Partner Agency (Potential New and Existing)
2. School-Based Weekend Food Assistance

Are you currently a food bank partner agency? (FBP)

Organizations interested in the Food Bank Partner Agency (Potential New and Existing) funding opportunity

will choose “Yes” or “No” in response to this question. If you have started or are actively in the application process to become a partner agency but have not yet been approved, please select “No” in response to this question.

If yes, which food bank(s)? Select all that apply. (FBP - Existing)

Organizations interested in the Food Bank Partner Agency (Potential New and Existing) funding opportunity who are currently a food bank partner, will select which food bank using the options below.

1. Food Bank of the Albemarle
2. Food Bank of Central and Eastern NC
3. Inter-Faith Food Shuttle
4. MANNA
5. Second Harvest Food Bank of Metrolina
6. Second Harvest Food Bank of Northwest NC
7. Second Harvest Food Bank of Southeastern NC

To be eligible to submit an application for this funding opportunity your organization must have completed the Project Assessment phase. Please review the submitted Project Assessment Questionnaire and note any updates. (FBP)

This is a short answer response limited to 1500 characters. Organizations interested in the Food Bank Partner (Potential New and Existing) funding opportunity must have completed the Project Assessment phase prior to submitting an application. Some questions from the Project Assessment Questionnaire may be repeated throughout this application, while others may request additional detail than originally required for the Project Assessment Questionnaire. Significant changes from an organization’s Project Assessment Questionnaire will require additional review by the food bank and may result in a change in the food bank’s endorsement.

History & Organizational Capacity

Provide a brief history of your organization. (All)

This is a short answer response limited to 1500 characters. This response should include information about how and why the organization was founded, the populations the organization focuses work on, and any other programs the organization offers for the community served.

How long has your organization been in operation? (enter a number of years) (All)

This is a short answer response but should be a number of years only. Please round to the nearest whole year.

How long has your organization provided food assistance? (enter a number of years) (All)

This is a short answer response but should be a number of years only. Please round to the nearest whole year.

What is your organization’s mission statement? (All)

This is a short answer response limited to 750 characters. If your organization does not have a mission statement, please enter, “My organization does not have a mission statement.”

Provide a link to your organization’s website and social media profiles (all available) (All)

This is a short answer response limited to 750 characters. Please include links or usernames to all profiles

used by your organization on common social media platforms, including Facebook and Instagram.

What is your organization's physical address? If you are in the process of moving, provide information about the new location. Or, if your organization does not have a physical location, describe where organizational activities occur. (All)

This is a short answer response limited to 750 characters. Organizational activities are defined as the official work of the organization, including administrative duties (record keeping, reporting, financial compliance), volunteer/staff meetings, food distribution, fundraising, etc. This address may also be where mail is received for the organization. Information regarding additional locations and those used for food distribution activities is requested later in the application.

Describe if your organization owns, leases, or has another type of arrangement for this space (even if different from where food distribution activities occur). If you are in the process of moving, provide information about the new location. If your organization leases space, provide the end date of the current lease term. (All)

This is a short answer response with no word limit. Provide as much detail as possible about the location and, if your organization does not own the space, the arrangement your organization has with the owner. This information is required for all projects. This information will also be used to understand organizational sustainability.

What are your hours of operation? (All)

This is a short answer response limited to 250 characters. Hours of operation for the organization, which may be different then when food is distributed. Please specify days and times.

How do individuals and families access services provided by your organization? (All)

This is a short answer response limited to 750 characters. Response should include information about how your organization makes services available to the community, for example, do you accept walk-ins or only by referral from third-parties.

What is the screening process for those that receive assistance from your organization? (All)

This is a short answer response limited to 750 characters.

Does your organization actively fundraise for your food program? (All)

This is a "Yes" or "No" choice question. Fundraising includes seeking grants or soliciting donations to support activities.

Does your organization have a designated source of funding for food distribution each year? (All)

This is a "Yes" or "No" choice question. A designated source of funding would be a specific grant or other revenue source for the organization that is specific to this activity.

If your organization actively fundraises, briefly describe efforts and sources in a typical year. (All)

This is a short answer response limited to 750 characters. Response should include information about efforts including types of fundraising activities (letters, drives, events).

What percentage of your board members have made a financial contribution to the organization in the past 12 months? (All)

Select which option most closely aligns for your organization.

1. 0% of Board members
2. closest to 25% of Board members
3. closest to 50% of Board members
4. closest to 75% of Board members
5. closest to 100% of Board members

Does your organization have a strategic plan? A strategic plan would be a formal document outlining goals, and strategies and tactics to reach those goals. (All)

This is a “Yes” or “No” choice question. If your organization has a strategic plan, please upload a copy at the end of this application portal.

Does your organization collaborate with other organizations or agencies for your food program? (All)

This is a “Yes” or “No” choice question. Collaboration could include co-hosting events, referring clients, or sharing meeting locations or other resources.

If your organization collaborates with other organizations, please list below. (All)

This is a short answer response limited to 1500 characters. Please list the names of the organizations only. If the name is common, for example, a name of a church, please include the city name as well.

Number of paid staff (All)

Count each individual staff member as 1, regardless of full or part-time status.

Number of regular volunteers (All)

Count each individual volunteer as 1, regardless of how many hours per day. Regular is defined as an average number that are consistent participants in activities on at least a monthly basis.

Who are the key staff and/or volunteers to implement this project, what are their roles, and what are their qualifications? (All)

This is a short answer response limited to 1500 characters. Qualifications include both relevant training, degrees, and experience.

Fiscal Information

Organization’s next fiscal year begins:

Enter the month, day, and year for the first day of the next fiscal year.

Total current annual operating budget:

Enter the dollar amount. This amount should match the document provided as an attachment.

Budget figure provided is for fiscal year ending:

Enter the month, day, and year.

Total current endowment, reserve, or unrestricted fund balance:

Enter the dollar amount.

Endowment, reserve, unrestricted fund balance is for fiscal year ending:

Enter the month, day, and year.

Experience with Federal Funds

Has your organization previously received or managed federal grant funds? (All)

This is a “Yes” or “No” choice question. The Golden LEAF Food Distribution Assistance Program is funded by federal American Rescue Plan Act funds.

If yes, describe the source of funds (which federal program), and how the funds were used. (All)

This is a short answer response limited to 750 characters.

Does your organization have written policies regarding procurement in place? (All)

This is a “Yes” or “No” choice question. Procurement is defined as the action of obtaining equipment or services. Written policies would provide guidance on how goods and services should be purchased.

Reporting Capacity

Does your organization have adequate computer and internet access? (All)

This is a “Yes” or “No” choice question. Adequate is defined as a dedicated computer with Microsoft products and internet access sufficient to complete online reporting activities. Golden LEAF will require reports to be completed through our online portal.

How do you keep track of the individuals served and the other outcomes achieved? Please include the metrics that you track. (All)

This is a short answer response limited to 1500 characters. Example metrics would include pounds of food, number of households, number of students. For each metric, describe what data you gather and how you keep track of the information. Does your organization have a database? Keep Excel spreadsheets? Keep paper records?

Does your organization currently provide reports to another grant funder, food bank, or other? (All)

This is a “Yes” or “No” choice question.

If so, provide an overview of those obligations including the required metrics, elements, and frequency. (All)

This is a short answer response limited to 750 characters. The metrics would include the specific data points you are asked to gather. Elements include how the metrics are presented in the reports (charts, tables, etc.) and the frequency is how often the reports are compiled and submitted (monthly, quarterly, annually).

Proposed Project

Baseline Activity

To approximately how many households do you provide food each month? (FBP)

This is a short answer response limited to 250 characters. This amount may fluctuate during certain seasons, so choose an approximate amount that would be a fair average over a year.

To approximately how many students or households do you provide food each month? (SBW)

This is a short answer response limited to 250 characters. This amount may fluctuate during certain seasons, so choose an approximate amount that would be a fair average over a year.

How often do you serve food? (All)

This is a short answer response limited to 250 characters. Days and hours for food distribution, which may be different from hours of operation. Please specify days and times.

What types of food service programs are available through your organization? Select all that apply. (All)

- Food pantry
- Soup kitchen
- Residential rehab facility
- Emergency shelter (homeless or domestic violence)
- Children's program (after-school program, weekend backpack program, school pantry, daycare)
- Senior program
- Group home
- Other

How frequently can those served by your organization access food? (All)

Fill in applicable row (s)

- (Number of) times per day (Number of) days per month
- (Number of) days per week There is no limit.

Current Method of Food Distribution (All)

Select all that apply

1. Pick up
2. Mobile/Drop-off

In what county/counties will food distribution activities be physically located? (All)

Organizations will select from a list of North Carolina counties. Do not include any counties where distribution activities are not physically located or do not physically take place, even if you may serve residents of those counties.

Delivery Region for Mobile Food Distribution (All)

Geographic area where food distribution occurs. Provide as much detail as possible regarding geographic boundaries, including zip codes, streets, or neighborhoods.

Proposed Project

Request Amount (All)

Enter the dollar amount requested by the organization for this application. This amount should match the amount included on the Budget/Expense Tracking Form submitted at the end of the application portal. Awards are capped at \$250,000 per project.

Total Project Budget (All Sources) (All)

Enter the dollar amount of the total project budget for this project. This amount should match the amount included on the Budget/Expense Tracking Form submitted at the end of the application portal. This includes all sources directly related to implementation of the project, including the amount requested from the Golden LEAF Foundation.

Grant Term (Months) (All)

How many months will it take you to implement the project? It is the intent of the Golden LEAF Foundation for funds to be spent as soon as possible and for projects to begin shortly after funds are awarded. In most cases, projects should be completed within 12 months.

Project Summary (All)

This is a short answer response limited to 750 characters. Provide a brief, high-level summary of your proposed project, including proposed use of Golden LEAF funds, and the outcomes expected.

Elements of Proposed Project / Requested Use of Golden LEAF Funds (*select all that apply*) (All)

Please select which category(ies) below are aligned with your requested use of funds. Please see the complete list of eligible/ineligible expenses on the Golden LEAF website.

1. Building construction or renovation
2. Large or small equipment
3. Staffing for project implementation, including grant and construction administration

Physical location of food distribution activities that this project will support. If mobile needs, please specify in the space.

This is a short answer limited to 750 characters. Using the location name/function from the Food Distribution Location Addendum (for pick up locations), list which location(s) and the proposed project elements at each (if multiple).

Funds in this program may only be awarded to existing North Carolina food bank partner agencies to enhance or expand capacity. Enhanced or expanded capacity requires either an increase in the number of people served and/or an increase in the variety of food provided. What needs are you seeking grant funding to meet? (FBP - Existing)

This is a short answer with no word limit. Please see the complete list of eligible/ineligible expenses on the Golden LEAF website. Please be clear about if you are looking to expand or enhance or both.

Funds in this program may only be awarded to nonprofit organizations that are seeking to become eligible to be a partner agency with a North Carolina food bank. What are the primary hurdles to food bank

partnership you are seeking to address with grant funding through Golden LEAF? (FBP - New)

This is a short answer with no word limit.

What other hurdles to becoming eligible to be a partner agency are you working to address in other ways?

(FBP - New)

This is a short answer with no word limit.

How will partnering with a food bank benefit your organization? (FBP - New)

This is a short answer with no word limit.

What community need(s) or gaps will be met if you are able to become a partner agency? Please be as specific as possible. (FBP - New)

This is a short answer with no word limit.

Funds in this program may only be awarded to new programs or to existing programs to enhance or expand capacity. Enhanced or expanded capacity requires either an increase in the number of people served and/or an increase in the variety of food provided. What needs are you seeking grant funding to meet? (SBW)

This is a short answer with no word limit.

For each proposed use of Golden LEAF funds, describe any existing available resources and the expansion that will result from the use of Golden LEAF funds. *If funds will be used to replace existing equipment, the new equipment must still result in a new expansion of capacity.* (All)

This is a short answer with no word limit. For example, my organization currently has two residential-type freezers and we would like to replace both with larger commercial size freezers.

Project Management

Project Implementation Narrative (All)

This is a short answer with no word limit. Describe how the project will be implemented. This narrative should identify any other stakeholders/partners that will need to be involved in the project. This narrative should include any necessary steps for procurement, development of engineering/construction plans, etc. This narrative should align with the milestones selected below as well as the overall grant timeframe.

Project Outcomes

For each outcome selected (not all will apply), identify the goal to be met no later than 90 days following completion of project milestones. The focus of this program is to measure and assess the change from the baseline (increase) in each of these outcome areas. For some projects, the baseline may be 0. Please be sure that the goal and baseline are aligned with the frequency identified for the outcome.

For projects to expand capacity of an existing partner agency, the baseline will be verified using an average of at least six prior months of monthly reports to the food bank.

Application	Outcome	Baseline	Baseline Date	Target	Target Date
FBP	For all food distribution activities, unique households served each month				
FBP	For all food distribution activities, total pounds of food distributed each month				
FBP - Existing	For projects to enhance capacity of an existing partner agency, pounds of new varieties of food distributed				
FBP - Existing	For projects to enhance capacity of an existing partner agency, types of new varieties of food distributed	Narrative outcome			
FBP - New	For organizations seeking to become partner agencies, become eligible to be a partner agency	n/a		Approval	
SBW	Number of backpacks distributed per week				
SBW	Number of backpacks distributed per month				

Project Activities (All)

Select project activities below (not all will apply), and identify the target completion date based on your project’s timeline. It is the intent of the Golden LEAF Foundation for funds to be spent as soon as possible and for projects to begin shortly after funds are awarded.

<u>Milestone</u>	<u>Target Completion Date</u>
Begin Bidding and Procurement Process (Engineering and Design)	
Complete Bidding and Procurement Process (Engineering and Design)	
Identify Successful Bid (Engineering and Design)	
Begin Engineering and Design	
Complete Engineering and Design	
Begin Bidding and Procurement Process (Construction and Renovation)	
Complete Bidding and Procurement Process (Construction and Renovation)	
Identify Successful Bid (Construction)	
Identify Small Equipment to be Purchased (No Formal Procurement Process Required)	

<u>Milestone</u>	<u>Target Completion Date</u>
Purchase Small Equipment (No Formal Procurement Process Required)	
Delivery/Installation	
Begin Training	
Complete Training	
Begin Renovation or Construction	
Complete Renovation or Construction	
Apply to become a Food Bank Partner Agency	
Begin Expanded/Enhanced Food Distribution	