

DEPARTMENT OF MILITARY AND VETERANS AFFAIRS

2024-2025 VTF Grant Application Form



**Legal Name of Organization:**

**DBA** (if applicable):

**Mailing Address** (include physical address if different):

**Phone**

**Fax**

**EIN**

**Website**

**Organization Email Address**

**Name of Authorized Representative**

**Authorized Representative Title**

**Phone**

**Email**

**VTF Grant Program Contact** (person responsible for the day to day operation of program or services to be funded):

**Contact Title**

**Phone**

**Email:**

**Amount of Request**

\$

**Organization Information**

[Empty text box for Organization Information]

**Mission Statement:**

[Empty text box for Mission Statement]

**Geographic Area Served** (specific to this proposal): **Include Counties**

[Empty text box for Geographic Area Served]

**Tax Exemption Status:** 501(c)\_\_\_\_\_

**(Briefly) Describe what the grant will be used for:**

[Large empty text box for describing grant use]

**Signature Page**

*By signing below, I certify that the information contained in this application is true and correct to the best of my knowledge and indicates an agreement to accept the terms and conditions of the grant award.*

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**Typed Name of Authorized Representative/Title**

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**Signature of Authorized Representative**

**Date**

# DEPARTMENT OF MILITARY AND VETERANS AFFAIRS

## Division of Veterans Affairs

6848 S. Revere Parkway

Centennial, Colorado 80112

Phone (720) 628-1480



## 2024-2025 VTF GRANT APPLICATION

### PROGRAM DETAIL

#### 1. **Need/ Geographic Distribution (5 points):**

Identify the primary geographic target area to be served (Provide detailed description, you must clearly identify the target area).

#### 2. **Need/ Number of Veterans to Be Served (10 points):**

Identify the number of veterans in the area and provide the data source: Identify the projected number of unduplicated veterans to be served which correlates with the number of veterans in your target area and the level of services to be delivered.

- What is the total number of veterans that you expect to serve?
- What is the number of unduplicated that veterans you expect to serve?
- What is the number of unduplicated veterans served by your program during the previous calendar year?

**1. Need/ Need for Services (15 points):**

Identify the needs of veterans in your service area. How did you arrive at these *needs*? *The needs should be established through a discussion of the estimated numbers of veterans in your target area.*

Discuss the need for specific services to be delivered through a discussion of the estimated numbers of veterans in the proposed target area. The need should be clearly identified and tied together with data. The data source and target area needs to be clearly identified.

**2. Need/Service Gaps (5 points):**

Identify the services you intend to provide and identify other providers that provide services to veterans in your service area: Identify existing service gaps and address duplication of services by other providers.

Provide a thorough discussion on how services will address existing service gaps without duplicating other efforts in your area. Provide information to further establish need.

**3. Local Partnerships (10 Points)**

Identify how your services fill in the "gaps." How does your program collaborate with other services to avoid duplication? Include your relationship with your County Veterans Service Officer in your response.

Provide clear description of collaborative efforts, ongoing contact with other providers and CVSO, and describe linkages for services beyond the scope of the applicant.

4. **Outcomes and Effectiveness (15 Points)**

What difference (impact, changes) will your program make in veterans' lives? Clearly identify expected changes or impacts (outcomes) of services as well as outputs (unduplicated number to be served). Include your willingness to participate in any DMVA evaluation efforts.

5. **Historical/Program Effectiveness (15 Points)**

What services did your program provide in the previous year?

How your program has impacted veterans.

Provide information regarding the program's effectiveness in achieving outcomes. Provide clear evidence on previous service provision. Demonstrate prior success.

What has been the impact of the services you have provided? **(Previous grantees must use survey results. Statistical documentation must be included. If you are not a previous grantee, explain how you determine the impact of your services)?**

**NEW Explain how your program will reach out to underserved veterans within your area, specifically women veterans. Underserved Veteran populations consist of Native American Veterans, Women Veterans, Members of racial and ethnic minority groups, LGBTQ+ Veterans, and Aging Veterans (5 points)**

### 3. Budget (10 points)

**Attach** a line item budget and budget narrative that clearly identifies estimated expenses, estimated numbers and purpose for funds.

If funded by VTF last fiscal year, please include a breakdown of expenses (how much was spent) by category. For example, housing, mental health, emergency financial assistance, etc.

Provide a clear line item budget and budget narrative that is reasonable and appropriate for services to be provided.

List total agency budget in narrative. Must include other sources of funding.

**OFFICE SUPPLIES must be included in your line item budget if applicable.** If applicable, attach a bid sheet from a dealer for vehicle purchase. Identify any other sources of funding to be utilized for the program.