

P.O. Box 2877, Gainesville, FI 32607 Contact: jjohnson@co.alachua.fl.us 352-338-7392

Letter of Support for Grant Applications



Administration Randall H. Reid County Manager Mike Byerly, *Chair* Cynthia Moore Chestnut, Vice Chair Rodney J. Long Lee Pinkoson Penny Wheat

INSTRUCTIONS FOR COMPLETING

GRANT APPLICATION LETTER OF SUPPORT REQUEST FORM

This Form should be submitted to an Alachua County Department Director for review and approval prior to submission to the County Manager. When approved by a Department Director, the Director should submit the "Request Form" accompanied by a draft letter of support, which will be prepared by the Department Director and which will include an appropriate level of detail regarding why the county wants to support the proposed project in question. A sample draft letter of support is attached to these instructions. If the County Manager approves the request for a letter of support and the draft letter, the County Manager will present a draft letter to the Chair of the Board of County Commissioners (BoCC) for review. The Chair of the BoCC may approve and sign the letter of support on behalf of Alachua County.

Items numbered 1 through 17 of the Request Form are addressed below.

- 1. Identify the agency or entity which is requesting a letter in support of their grant application, proposal submission, response to a Request for Proposals, Request for Qualifications, etc.
- 2. Identify the responsible person within the agency identified in #1 above who will provide additional information if requested by the Alachua County Department Director.
- 3. List phone number, email address, or other means of contact for the person identified in #1 above.

- 4. List date of submission of request to Alachua County Department Director. The county intends to respond to the request within 4 working days from date of submission.
- 5. List date the Letter of Support is needed for inclusion in the proposal, grant application, etc.
- 6. Describe proposed project, addressing all items listed under #6 on the Request Form.
- 7. Identify the corporate (for profit or not for profit) or governmental status of the agency requesting a letter of support by checking the appropriate box.
- 8. Answer yes or no to the question about whether the requesting agency is currently receiving funding from Alachua County.
- 9. If the answer to #8 is yes, provide information as requested.
- 10. Answer yes or no to the question. If the answer is yes, then provide information about any funding or other resources, including but not limited to personnel/staff time, materials, or services which will be sought or requested from Alachua County to support the implementation of the proposed project.
- 11. Answer the question, and if the answer is yes, then provide additional information about avoidance of duplication.
- 12. List other agencies, entities or organizations which have been or are going to be asked for a letter of support for the proposal in question.
- 13. Answer yes or no. Provide additional information as requested if match or in kind contributions are required by the potential funding source.
- 14. Completion of item #14 by a duly authorized representative of the

organization requesting a letter of support is required. The legibly printed or typed name of the agency making the request, the legibly printed or typed name of the authorized person, that person's original signature in blue ink, and the date of signature are required.

- 15. To be completed by the Alachua County Department Director. Indicate approval or disapproval by the Alachua County Department Director of the request for a letter of support, based on the general criteria expressed by the question, "Is a letter of support for the proposed project in the best interest of the citizens of Alachua County?" Sign and date as indicated.
- 16. To be completed by the County Manager. Indicate approval or disapproval by circling choice and sign/date.
- 17. To be completed by the Chair of the BoCC. Indicate approval or disapproval by circling choice and sign and date. If approval is given, Chair of BoCC should then sign a letter of support. Chair may use draft letter or compose a letter of support.

If at all possible, a letter of support should be provided, or alternately, a decision to not provide a letter of support should be made, within 4 business days of submission of request for a letter of support.

Submit the completed LETTER OF SUPPORT REQUEST FORM to the Alachua County Department Director most familiar with the services, projects and programs operated by the agency requesting a letter of support. The Director will evaluate the request to ensure that such letter would be in the best interests of the citizens of Alachua County. If such a letter of support is found to be in the best interest of the citizens of Alachua County, the Department Director will prepare a draft letter of support for review by the County Manager. If the County Manager approves the request for a letter of support and the draft letter prepared by a Department Director, then s/he will submit the request to the Chair of the BoCC, who may then approve and sign a letter of support on behalf of Alachua County.

It is the policy of Alachua County that the Chair of the BoCC may provide a letter of support on behalf of Alachua County without review and approval by the full BoCC when and if the process specified in these instructions have been completed. The BoCC will be notified by the County Manager at the next scheduled regular meeting of the BoCC regarding the provision of a letter of support provided through this process.

Adopted: August 27, 2002

Ā	gency/Entity Requesting Letter of Su	ipport	
		3.	
	Contact Person	Phone Number	er
		5.	
	Date of Request	Date Needed	

6. Description of proposed project or program. Please provide a brief statement of the work being proposed, including who will be served, by what activities, over what time period, by whom, using what resources, in coordination with whom, in what geographic area.

7. Proposing Agency/Entity is (check one)

A

- □ Incorporated and IRS Recognized Non-Profit
- □ Incorporated For- Profit
- Governmental Agency

- 8. Is proposing Agency/Entity currently receiving funding from Alachua County?
 - □ ĬYĔS
 - □ NO
- **9**. If Yes, for what project(s), for what time period, and how much funding is being provided?
- **10**. Will funding or other resources be sought from Alachua County to support the proposed project?
 - □ YES
 - □ NO

(If **Yes**, please provide details on a separate sheet.)

- **11**. Are proposed services currently being provided by any other service provider within the geographic scope of the project?
 - □ ŸEŚ
 - □ NO

If **Yes**, please provide information about how the project avoids duplication of services and administration. Use additional pages if needed

12. What other local organizations are being asked to support the proposed project by way of letters of support? Please list entities and contact persons.

NAME OF ORGANIZATION/AGENCY

<u>CONTACT</u>

13.	Are matching funds or in-kind contributions required by the application process? YES NO NO
	If Yes , please explain sources and amount of required match and/or in-kind contributions. Use additional pages if necessary

14. Acknowledgment of nature of support from Alachua County.

The requesting agency/entity understands that written support from Alachua County for a grant/funding application in no way whatsoever creates any obligation on the part of Alachua County to financially or materially support the proposing agency/entity or the proposed project/program. Contingent on approval of the request for a letter of support by an Alachua County Department Director and the County Manager, the manager may produce such a letter, intended solely for the purpose of assisting and supporting the grant/funding application process of the requesting agency/entity. Any other use of such a letter of support is unauthorized and invalid. Execution by Alachua County to perform or not perform any function.

The information and statements submitted within this request are true and accurate to the best knowledge of the undersigned agency representative, and the above acknowledgment is hereby agreed to by the undersigned individual who is duly authorized to so act on behalf of

NAME OF AGENCY/ENTITY TYPED OR PRINTED					
SIGNATURE			TITLE		
NAME TYPED OR PRINTED					
DATE					
For Completion by an Alachua County	Depa	rtment Di	ector		
				hat the	
				hat the	
Manager Approve Disapp	orove		est. Date		e Co
Manager Approve Disapp	orove	the reque	est. Date		e Co
DEPARTMENT DIRECTOR For Completion by County Manager -		the reque	Date	Dis	Coun e Co appr



Administration Randall H. Reid County Manager **M**ike Byerly, *Chair* Cynthia Moore Chestnut, Vice Chair Rodney J. Long Lee Pinkoson Penny Wheat

SAMPLE LETTER OF SUPPORT FOR GRANT APPLICATION

Date

To Whom It May Concern:

Alachua County is very interested in addressing (insert the issue being addressed by the grant application.) (State why the issue is of concern to the county and its citizens.)

(State knowledge of proposal, knowledge of agency submitting proposal, and encouragement of funding entity to provide resources to address issue identified above.)

(State that the need to address the issue is significant, and that other resources to address the need are insufficient to address or impact the need.)

(State that the proposed project appears to avoid duplication problems, and that the proposing organization would coordinate with appropriate partners to ensure efficient and effective use of grant funds. Address in-kind or other matching being proffered by the proposing entity.)

(Conclude with general statement of confidence in and support for the organization seeking assistance, based on past experience with the applicant entity, local reputation for effectiveness, etc. Again encourage positive response from funding entity, and indicate Alachua County's intent to encourage local support for the proposed project, if funded.)

Sincerely

Chair, Alachua County Board of County Commissioners