Announcement:
The Department of Services for Children, Youth and their Families, the Division of Prevention and Behavioral Health Services/ Promoting Safe and Stable Families Program announces the opportunity to apply for the Fatherhood/Healthy Adult Relationship (FHAR) Grant in the amount of $3,000 each. Those eligible for the grants are the Delaware Fatherhood/Family Coalition (DFFC) members and other private and non-profit and profit organizations who wish to join the (DFFC). These grants are sponsored by Title IV-B subpart II federal funding with a state match.

Areas of Focus:
The mission of the Promoting Safe and Stable Family Program Child Welfare goal is to promote the well-being of children by strengthening and preserving families, in a safe and caring community, when safety can be assured. The focus is on building the resiliency of children through the support of their parents and the community.

Delaware Applicants must demonstrate how funds will be used to implement Prevention and/or Early Intervention programming focusing on Fatherhood/Healthy Adult Relationship. The Goal of this movement in 2011 is to increase a belief system where communities can make a difference in the lives of children. The objective is to enhance the positive influences fathers have in their children’s lives, positive co-parenting through healthy adult relationships and strengthening the DFFC coalition to create a union of many voices.

This year, applicants will have the opportunity to apply for funding in two areas under the FHAR grant: The primary audience/participants are directed towards adults.

1. Outreach and Information Dissemination Activities Focus. This area is a universal approach designed to promote the awareness, engagement and education of the public and/or the targeted audience on;
   - The importance of father involvement and healthy adult relationships;
   - The availability of father-directed or father-friendly services and resources which supports fathers and their involvement with their children; and
   - The importance availability of existing services and resources in the community that promote and support healthy adult relationships.

This grant is focused on social branding/social marketing and recruitment. The funding may be used for website development/enhancements designs/improvements,
print/radio/TV advertisements, or recruitment-orientated activities focused on the promotion of fatherhood, father involvement, and healthy adult relationships.

2. **Community Programming/Education Focus:** This area is a targeted approach designed to engage, educate, and infuse fatherhood and healthy adult relationship components into existing programs and services. The grant supports the growth of coalitions, professionals, community members, parents, groups, and organizations. Pilot programs focused on promoting greater father involvement in existing programs are also encouraged. The area of programming and education should help to develop/strengthen healthy adult relationships, parenting/co-parenting skills, and parent and child bonding activities with a primary focus on fatherhood involvement.

**Note:** If equipment such as computers, laptops, and other related equipment materials is desired, the equipment and their plans for use to support these activities must be included in the application. Use of these equipment/materials must clearly focus on activities that will help facilitate engaging community members around fatherhood and healthy relationship building.

**Awards:**
The amount of each Grant is **$3,000.** Organizations have the following options:

- **OPTION ONE:** To apply for the Outreach and Information Dissemination Activities Grant ONLY, not to exceed $3,000
- **OPTION TWO:** To apply for the Community Programming/Education Grant ONLY, not to exceed $3,000
- **OPTION THREE:** To apply for BOTH the Outreach/Information Dissemination and the Community Programming/Education grant, not to exceed $3,000

**Contact**
For further information, contact Carmella Giddins-Jones at (302) 892-6419, or Angela Bowden at (302) 633-2579; e-mail inquiries can also be sent to Carmella.Giddins-Joh@state.de.us or Angela.Bowden@state.de.us

**Important Dates:**
- Completed applications must be received by Friday, February 11, 2011 @ 4:30pm
- Notification of awards will be sent out by Friday, February 18, 2011
- All FHAR Grant awards must be spent by Friday, April 30, 2011
- All bills must be submitted by Monday, May 16, 2011

**Submission Requirements:**
- The narrative portion of the FHAR application must not exceed 3 pages in length (excluding forms or other pertinent documents).
- Applications must be typed, 12 font.
- If mailing or hand delivery, submit three (3) copies of the proposed application.
• **DO NOT** enclose the application in binders or specialize packaging.  
• Completed application must be date stamped by Friday, February 11, 2011 at 4:30 p.m.  
• **Applicants who apply for the Fatherhood/Healthy Adult Relationship (FHAR) Grant** cannot apply for the Alternative Community Grant.

Faxed applications **WILL NOT BE CONSIDERED.**

All applications should be mailed, hand delivered or e-mailed.  
**E-Mail Address:**  Angela.Bowden@state.de.us

**Mailing Address:**  Delaware Fatherhood/Family Coalition  
Division of Prevention and Behavioral Health Services  
c/o Carmella Giddins-Jones  
Delaware Youth and Family Center  
1825 Faulkland Road;  **Murphy’s Cottage Room #G 28**  
Wilmington, DE  19805

**Hand Delivery:**  Location is the same as the Mailing Address
   *(Place Your Application in the Tray Labeled FHAR Grant)*

**Department Background:**

Our mission is to assist children, youth, and families in making positive changes through programs that support child and public safety, behavioral health and individual, family, and community well being.

The Department’s vision is “Our children, Our future, Our responsibility”. We want every child to be safe, stable, have self-esteem, and a sense of hope. Our vision is an effective System of Care approach which promotes supportive communities and strong families that nurture all children to their potential. The practice of the System of Care requires a public/private partnership, which assures that the voices of children and families, local communities, schools, businesses, the faith-based community, and public systems are engaged.

**Delaware Fatherhood/Family Coalition (DFFC) History:**

As an extension of the Promoting Safe and Stable Family Responsible Fatherhood Initiative, in the year of 2006, the Delaware Fatherhood/Family Coalition (DFFC) was established. The purpose continues to build upon the efforts of the community to increase community collaboration and strengthen resources which support the involvement of residential and non-residential fathers in the lives of their children, build upon healthy adult relationships, and decrease the barriers that may challenge these efforts.

**DFFC Intent:**
• Increase participation and sustainability of the Delaware Fatherhood/Family Coalition
• Strengthen the male leadership role to form a movement which supports father involvement and positive co-parenting.
• Reduce the stressors single parents face by involving non-residential parental support.
• Expand the community’s capacity to collaborate and provide supportive services for non-residential fathers
• Enhance the collaborative efforts of the community
• Create father-friendly environments and infuse fatherhood /healthy adult components into new or existing services
• Increase educational opportunities for parents, professionals, coalition members and lay persons.

Selection Criteria:
Applicants whose applications meet all eligibility requirements and submission requirements will be evaluated and rated by a peer review panel. The maximum score for each criterion is indicated below:
- Applicant Information (5 points)
- Narrative Program Design (35 points)
- Management and Organizational Capability (15 points)
- Project Evaluation (10 points)
- Budget (20 points)
- Written organization of the submitted proposal (10 points)
- Five point preference is given to existing DFFC members (5 point)

Application Review Process:
Automatic Disqualification:
- Attachment A - Eligibility Checklist – boxes not check, no signature.
- 501 (c) 3 not attached, and signature not provided or a certified certificate of status/good standing from Delaware’s Division of Corporation.
- Application - late submission.

Review Process
- Upon acceptance, a panel will review, rate, and make recommendations on all applications according to specified criteria.
- The Selection Criteria for each competitive program will rate each applicant’s responsiveness to the program application requirements and their commitment to the intent of the DFFC mission.
- The Panelist recommendations are advisory only, as the designee for the Division will make the final award decision.
GRANT APPLICATION
Program Narrative Section

Applicant must complete the following sections.
(Organize your responses to the order of the questions)

I. APPLICANT INFORMATION
1. Name of applicant agency
2. Address of applicant agency
3. County of applicant agency
4. Federal Employer Identification Number (Tax ID Number)
5. Attach Confirmation of 501(c)(3) status
6. Name, title, phone number, fax number and e-mail of the person who will be responsible for the Fatherhood/Healthy Adult Relationship Grant
7. Name, phone number, and e-mail of the Fiscal or Financial Officer
8. Description of the agency including mission and vision statement

II. Narrative for Proposed Program Description
The Applicant must briefly, yet clearly:
1. Identify the type of grant, the intended use, the goals, expected outcomes and how do you intend to accomplish your goals through your description of how you will use the funding.

2. Define how the grant will support your efforts to engage parents, focusing on fathers (residential, non-residential, and paramours) to strengthen the relationship between parents and their children.

3. Describe the target population, and specify why there is a need for this proposed service for your population.

4. State how your organization can support the intent of the Delaware Fatherhood/Family Coalition.
   a. Describe the efforts you will put forth as a champion of the DFFC to mobilize the community.
   b. Provide information for the organization’s representative who will actively participate on the Delaware Fatherhood/Family Coalition. (See Attachment B)
5. Identify days of the week, and hours of the day when the activity will occur. The timelines must also show completion date of the program: 
*Deadline Date is 4/30/11*

6. Address how progress will be monitored toward achieving the program goals and objective and applicant must describe how they will measure success.

7. Identify the principal individuals, their positions in the program and who will perform what functions (s).

8. Convey how the agency or staff involved in the project has experience implementing this project/program.
III. **BUDGET**

The applicant must provide a proposed Budget Detail Worksheet that is complete, detailed, reasonable, and cost effective in relation to the activities to be undertaken. This worksheet must include calculations to show how the applicant arrived at the total amount of the requested award. See attached budget form. **Please remember to recalculate all budgets to ensure calculation accuracy.**

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**Budget Detail Worksheet**

**Purpose:** The Budget Detail Worksheet is a guide to assist you in the preparation of the budget narrative. All required information must be provided. Any category of expense not applicable to your budget may be deleted.

<table>
<thead>
<tr>
<th>A. Personnel - List each position by title and name of employee, if available. Show the annual salary rate and the percentage of time to be devoted to the project. <strong>NO OTHER EMPLOYMENT COST IS INCLUDED AS PART OF THE GRANT</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name/Position</td>
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<tr>
<td>Ex. Jane Doe</td>
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</table>

**TOTAL**

<table>
<thead>
<tr>
<th>B. Travel - Itemize travel expenses of project (e.g., admission fees, bus transportation, etc.) Show the basis of computation (e.g., 50 individuals x admission fees). Show the cost for bus or van transportation (e.g. 1 bus/van at $ X). Travel is limited to mileage, common carrier (bus or van), admission fees, parking and meals.</th>
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</thead>
<tbody>
<tr>
<td>Purpose of Travel</td>
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**TOTAL**

<table>
<thead>
<tr>
<th>C. Consultants/ Professional Services – Services performed by people who are not employed by your agency. (Educators, website developers, Advertisement companies, etc.)</th>
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<tbody>
<tr>
<td>Name of Consultant</td>
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</table>
**D. Supplies/Materials** – List items (e.g. postage, telephone, office supplies, educational supplies, computer programs, ink cartridges, etc.) by type and the basis of the computation. For example, provide a monthly telephone cost and state how many months of telephone usage.

<table>
<thead>
<tr>
<th>Description</th>
<th>Computation</th>
<th>Cost</th>
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**TOTAL**

**E. Capital Cost** - List items by type (computers, printers, etc/ ) Show the basis for the computation.

<table>
<thead>
<tr>
<th>Description</th>
<th>Computation</th>
<th>Cost</th>
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<td></td>
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</table>

**TOTAL**

**Budget Summary** – When you have completed the budget worksheet, transfer the totals for each category to the spaces below.

<table>
<thead>
<tr>
<th>Budget Category</th>
<th>Amount</th>
</tr>
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<tbody>
<tr>
<td>A. Personnel</td>
<td></td>
</tr>
<tr>
<td>B. Travel</td>
<td></td>
</tr>
<tr>
<td>C. Consultants/Professional Services</td>
<td></td>
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<tr>
<td>D. Capital Costs</td>
<td></td>
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<tr>
<td>E. Supplies/Materials</td>
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</tbody>
</table>

**TOTAL Grant Amount** __________

*Total Budget should not exceed $3,000*
Please remember to verify all computations to ensure budget accuracy.

**Attachment A - Eligibility Requirements**
(Requires check off in boxes and signature)

**Please closely review eligibility requirements carefully before applying**

☐ Agree to become a member, support and participate in the DFFC.
  (All applicants are required to sign up or update their membership form, see attachment B.)

☐ Attend the town meetings and the 2nd Annual DFFC Conference
  • Note: No registration fee is required to attend the meetings/summit. However, it is required that monies be set aside in your budget for at least one representative attendance to cover lodging, travel, and meal for the summit. (At least $250 per person). If you chose to pay from another source, please notate it on the budget as in-kind.

☐ Non-profit - A nonprofit, or part of or affiliated with an eligible organization or entity.
  • Agency must attach to the application proof of nonprofit status 501 (c) (3) from the United States Internal Revenue Service.
  • The document must have the agency’s current name and address. To obtain an updated copy of your 501c3 document, contact 1-877-829-5500.
  • An organization that does not possess a 501c3 may operate under an organization that possesses a 501c3, provided one organization is designated as the primary and responsible applicant.
  • EI # must be provided with application submission, unless those applying for the FHAR Grant for the first time. File a W-9 electronically with the State’s Department of Finance via the Division of Accounting website: [http://accounting.delaware.gov/](http://accounting.delaware.gov/). Reporting of the EI# must be provided for payment.

Profit – A profit organization must submit a certified certificate of status/good standing from Delaware’s Division of Corporation. [http://corp.delaware.gov/onlinestatus](http://corp.delaware.gov/onlinestatus)

☐ Acknowledge this is a cost reimbursable grant. The applicant must be able to pay for the program services first and will be reimbursed of incurred cost, not to exceed the grant amount.

☐ Agree to submit data on target population and program activities based on expected outcomes proposed in the application.

☐ Agree to advertise the Delaware Fatherhood/Family Coalition in partnership with the Promoting Safe & Stable Families Program/PBHS in advertising your program service or activity in statement as the funding source.

☐ Agree to submit a final report on Monday, May 16, 2011 with the final bill describing how the program goals and objectives were met.
I have read and understand all of the eligibility requirements as part of my application submission. I also understand that if any box listed is not checked and the 501(c)(3) is not attached; the application will be automatically disqualified from further review.

___________________________    ________________
Responsible Program Director           Date
# Attachment B

## DFFC Membership Application

### Name

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<th>Last</th>
<th>First</th>
<th>Middle Initial</th>
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<th>Address</th>
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<tr>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>Email Address</th>
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<thead>
<tr>
<th>Phone (home)</th>
<th>Business Phone</th>
<th>Fax Number</th>
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### Organization

... (Blank space for organization details)

### Brief Description of Organization

... (Blank space for brief description)

### Brief Description of the services, resources, skills and/or experience you can bring to the coalition

... (Blank space for description)

I am interested in participating and/or finding out more information in the following:

- [ ] Advertising
- [ ] Fatherhood Summit
- [ ] Programming
- [ ] Education
- [ ] Recruitment
- [ ] Resources/Services

### Contact:

**Sheldon Nix, Ph.D., M.S.W.**  [snix@lwlf.org](mailto:snix@lwlf.org)  The Life Center, 807 N. Union Street, Wilmington, DE 19805  (302) 656-1100

**Mary E. Polk, DPBHS Program Manager**  [Mary.Polk@state.de.us](mailto:Mary.Polk@state.de.us), 1825 Faulkland Road, Murphy Cottage, Wilmington, DE 19805  (302) 892-4512