**REQUEST FOR APPLICATIONS (RFA)**



**Application Deadline: November 17, 2023**

The Arkansas Department of Finance and Administration (DFA) is seeking applications for funding from organizations eligible to apply under the Pregnancy Help Organization (PHO) Grant Program. This grant program was established for the purpose of encouraging females facing unwanted pregnancy to give birth to their unborn child. DFA is the designated state entity to administer the PHO Grant Program in accordance with Act 187 of 2022 Pregnancy Help Organization Grant | Department of Finance and Administration (Arkansas.gov). This is a state-funded grant program.

**Application Release Date**

November 17, 2023

**Available Funding**

$1,000,000

Due to the limited amount of funding available, application requests should be limited to only those costs needed to support a successful program. To better accomplish statewide distribution of funding, DFA recommends applicants to submit applications requesting no more than $40,000 in funding support.

**Project Period**

January 1, 2024 to June 30, 2024

Funding for the PHO Grant Program is only available for the project period above. Funding beyond June 30, 2024 is not anticipated. Applicants should propose only those costs for activities that will be completed by the end of the project period unless those activities will be sustained from other financial sources beyond June 30, 2024.

**Eligible Organizations**

Eligible organizations include Pregnancy Resource Centers within the State of Arkansas. Pregnancy Help Organization (PHO) means *….”an organization existing as of January 1, 2022 that: seeks to provide a range of services to individuals facing an unintended pregnancy with the intention of encouraging pregnant women to give birth to their unborn children; and does not perform, prescribe, provide referrals for, or encourage abortion or affiliate with any organization that performs, prescribes, provides referral for, or encourages abortion.”*

“Pregnancy Help Organization” includes without limitation

1. Organizations traditionally known as "crisis pregnancy organizations"
2. Maternity homes
3. Adoption agencies and
4. Social services agencies that provide material support and other assistance to individuals facing an unintended pregnancy to help those individuals give birth to their unborn children.

**Allowable/Non-allowable Activities**

DFA Intergovernmental Services reserves the right to determine allowable and non-allowable costs.

Allowable costs include those costs related to:

* activities in direct support of the pregnant females (clients),
* project material and supplies,
* advertising of available services,
* brochures and publications explaining services and available resources,
* rent of facilities where services are provided,
* utilities of facilities where services are provided,
* contracts for client-focused professional services (mental health counseling, etc.)
* staffing for the duration of the project

Each item for which funding is requested must be explained in detail within the budget narrative section of the grant application. DFA-IGS will evaluate the requested budget in conjunction with the project narrative and proposed service area.

Non-allowable activities include funding for community awareness events, food and beverages, and salary support for employees beyond the project period.

**Submission**

* Please make sure all items are included in submitted applications. Incomplete applications will be removed from consideration.
* Submit an electronic copy of the application, **as one file**, to include: organizational information, grant plan (narratives, descriptions and budget) and signed assurances and certification form electronically to the email at [IGS.Applications@dfa.arkansas.gov](mailto:IGS.Applications@dfa.arkansas.gov).
* Applications must be submitted by 4:30pm November 17, 2023 to be considered for funding.
* **Late applications will not be considered for funding.**

**Evaluation & Award**

Applications will be reviewed and evaluated for eligibility, reasonability of proposed costs relative to proposed service area, and proposed measurement of anticipated outcomes. Applications not meeting the eligibility required for funding will be removed from further consideration.

**Awards to PHOs**

The anticipated date for issuance of award is the week of January 5, 2024 with project start date to begin January 1, 2024. The award document must be signed by a duly authorized official of the PHO and returned to DFA-IGS by January 12. All signed documents must be received by DFA-IGS before funds can be disbursed to the recipient entity.

**Funds Disbursement**

Following the receipt of award documents signed by a duly authorized official, DFA-IGS will disburse award funds to approved applicants in two increments based on the schedule below:

January 17, 2024 – One half of approved budget

April 17, 2024 – Remaining award balance

Funds may only be spent for approved budget line items.

**Expense Reports**

Expense reports and supporting documents are required to be submitted to DFA-IGS based on the schedule below. Reports must use the forms provided by DFA-IGS and will list actual expenditures per approved budget line item and total funds spent. Documents to substantiate amounts spent (such as invoices and receipts) must be included with each expense report submitted. Funds not spent by the report date may be used in the next disbursement cycle. All funds must be spent by the June 30 expiration date of the grant award. Funds not spent by June 30, 2024 must be returned to DFA-IGS within 30 days of the project expiration date.

April 9 – Expenditures January 1 - March 31, 2024

July 9 – Expenditures April 1 - June 30, 2024

**Unauthorized Use of Funds**

DFA-IGS will review expense reports and supporting documents to validate recipients’ use of funds. Any funds not spent in accordance with the approved budget must be refunded to DFA-IGS within 30 days of notification.

**Application Deadline**

**Deadline for receipt of proposals (only electronic copies will be accepted): November 17, 2023 by 4:30 PM.**

Applications and required documents are due by Friday, November 17, 2023 to Department of Finance and Administration-Intergovernmental Services. Applications should be submitted electronically to the address at [IGS.Applications@dfa.arkansas.gov](mailto:IGS.Applications@dfa.arkansas.gov).

**Contact Information**

For questions or additional assistance, contact DFA-IGS via email at IGS.Applications@dfa.arkansas.gov or call the IGS Fiscal Support Supervisor at 501-324-9494.

**Proposal Application**

Applications should be completed and submitted in the following order and in accordance with the instructions provided. Pages must remain numbered.

1. Application Checklist

2. Organizational Information

3. Grant Plan (to include items 4-8)

4. Narrative describing current activities

5. Narrative describing the range of services the entity proposes to provide using grant funds

6. Description of the experience the entity has in providing the proposed services

7. Proposed service area

8. Description of the entity’s management and key staff, include information on their experience working with individuals facing unwanted pregnancy

9. Proposed monthly budget with line items specifically detailing the proposed expenditures

10. Assurances & Certification form signed by an authorized official of the entity.

**Budgets**

**Applicants** **must submit** program and budget proposals reflecting activities for the period of **January 1, 2024 to June 30, 2024**.

**Required Attachments**

Attachments should be received in the order requested per the checklist.

**All applicant information and attachments requested in this RFA are for the period of January 1, 2024 through June 30, 2024.**

We look forward to receiving your application.

**Funding Requirements**

If a PHO is approved to receive funds, expenditures must begin within fifteen (15) days of receipt. All funds received must be spent by June 30, 2024. Activities will be monitored through quarterly financial reporting to DFA-IGS. Failure to submit any requested or mandatory documentation, including, but not limited to quarterly reports and supporting documentation may result in the withholding of future funds until the PHO is in compliance.

**Quarterly Reporting**

Each PCO is required to submit quarterly financial reports. Quarterly reports are due by April 9th, and July 9th,. **Future funding for the year may be withheld until all financial reports are received and approved**. PCOs are responsible for providing accurate data for each reporting period.

**Budget Modifications**

Budget modifications will not be allowed for this project. Applicants are encouraged to carefully consider their budget needs and finalize their requests prior to application submission.

**Extensions:**

Grant extensions are not available. The project period expires June 30, 2024 and unused funding must be returned to DFA-IGS.

**Application Checklist**

\_\_\_\_\_ Application Checklist

\_\_\_\_\_ Organizational Information

\_\_\_\_\_ Grant Plan (to include items 4-8)

\_\_\_\_\_ Narrative describing current activities

\_\_\_\_\_ Narrative describing the range of services the entity proposes to provide using grant funds

\_\_\_\_\_ Description of the experience the entity has in providing the proposed services

\_\_\_\_\_ Proposed service area

\_\_\_\_\_ Description of the entity’s management and key positions, include information on their experience working with individuals facing unwanted pregnancy

\_\_\_\_\_ Proposed monthly budget with line items specifically detailing the proposed expenditures

\_\_\_\_\_ Assurances & Certification form signed by an authorized official of the entity.

**Attachments required:**

1. Complete PHO staff listing with names and job titles
   1. Identify any positions that will work under the funded project

b. Submit job descriptions for any who will work under the funded project.

1. Current Board of Directors listing with names, positions, and contact information

**Organizational Information**

Applicant Organization:

Mailing Address:

Physical Address:

☐ Check box if organization started since January 2, 2023

Phone: ( ) Fax: ( )

Contact Person: Title:

Name of Person Responsible for Financial Matters:

Phone: ( ) Fax: ( )

Email:

Signature of Executive Director:

Printed Name of Executive Director:

Signature of Board Chair or President:

Printed Name of Board Chair or President:

**Grant Plan**

Please explain how your PCO plans to create, maintain, and/or expand services with the funds available through this RFA.

**Narrative describing proposed activities**

**Narrative describing the range of services the entity proposes to provide using grant funds**

**Description of the experience the entity has in providing the proposed services**

**Description of proposed service area**

**Description of the entity’s management and key staff, include information on their experience working with individuals facing unwanted pregnancy**

**Proposed monthly budget with line items specifically detailing the proposed expenditures**

**Project Evaluation**

Please use the space below to describe any evaluation methods the PCO will use to measure outcomes for the funded project. (i.e., surveys, questionnaires, etc.).

**PRC Requested Budget for State Funds**

**January 1, 2024 - June 30, 2024**

**Expenses**

* activities in direct support of the pregnant females (clients),
* project material and supplies,
* advertising of available services,
* brochures and publications explaining services and available resources,
* rent of facilities where services are provided,
* utilities of facilities where services are provided,
* contracts for client-focused professional services (mental health counseling, etc.)
* staffing for the duration of the project
* staff training

\*Direct Client Support:

Salaries:

Fringe:

Other (Please specify):

Staff Training

Material & Supplies

Advertising

Brochures/publications

Professional Services

Operational:

Rent

Utilities

Other (Please specify):

**Total Expenses:**

**Budget Narrative - Provide a detailed description of each cost item in the budget section and how each will be utilized in the project**

**ASSURANCES & CERTIFICATION**

By executing these assurances, the applicant agency agrees that any award under this RFA will be administered, and activities or services provided, in accordance with applicable state laws and regulations. This agency agrees to use any funds awarded under this RFA only for those activities described in this application.

The applicant agency agrees to the following:

1) It shall maintain records that document the nature and outcomes of its activities, including records necessary for the appropriate accounting of funds received and disbursed.

2) It shall make available to DFA-IGS, its authorized officials or the Arkansas Legislature all records or documents related to activities funded under this RFA.

3) It shall make timely financial reports to DFA-IGS as required.

4) It shall protect confidentiality and prevent the inappropriate disclosure of information related to clients.

5) No person shall, on the basis of sex, race, disability, or religion be excluded from participation in, be denied the benefit of, or be subjected to discrimination under any program or activity funded in whole or part by awarded funds. Applicable laws include but may not be limited to 1) Title VI of the Civil Rights Act of 1964, 2) Title IX of the Education Amendments of 1972, 3) Section 504 of the Rehabilitation Act of 1973, and 4) Age Discrimination Act of 1975.

6) It shall initiate proposed activities within 15 days of award.

7) It shall, where allowable and if applying for program funding which includes expenses for activities conducted previously which would have been eligible for funding by this source, provide necessary documentation requested to verify those activities.

8) It shall be willing to collaborate locally and statewide.

9) It shall submit final report of project measurement and outcomes.

10) It shall not permit any funds to be paid to any current or past member of the Arkansas legislature or current State employee without receiving approval from DFA-IGS beforehand.

To the best of my knowledge and belief, all information in this application is true and correct. This application has been duly authorized by the applicant's governing body and **a copy of this finalized document will be provided to each member of the governing body.** The applicant will comply with all assurances and requirements should this project be awarded funding. Furthermore, I understand that this program will be required to complete financial reports (format to be provided by DFA-IGS) should the project be awarded funds.

**By signing below, I also certify that my PHO does not perform, prescribe, provide referrals for, or encourage abortion or affiliate with any organization that performs, prescribes, provides referral for, or encourages abortion.**

Signature of Executive Director Date

­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­

Signature of Board Chair or President Date