



## **2025 Genesee County Veteran Organization Relief Program Application Instructions and Guidance**

### **Program Overview**

This program will be available to non-profit 501(c)(19)/501(c)(3) organizations to enhance existing activities/programming that address the needs of Genesee County veterans and/or recognize the service of our local veterans.

### **Eligible Applicants**

Any non-profit organization with an IRS 501(c)(19)/501(c)(3) designation that CURRENTLY offers specific programs to and for the benefit of veterans of the United States Armed Forces in Genesee County. Priority will be given to entities that do not already contract with Genesee County to provide services to veterans and those who did not previously apply.

### **Funding**

Funding of up to \$10k will be awarded on a first-come, first-served approved application basis until all funding has been allocated. Applicants will be notified if their request has been approved or denied within 60 days of receipt of their application. The award is up to \$10k, which will be awarded on a reimbursement basis. Before providing funding, organizations must submit an approved invoice of at least \$2,500 for reimbursement. The term will be for one year from the award date.

### **Compliance**

Compliance with Genesee County's Purchasing Policy is required. Please review before submitting your application to ensure the proposed activity can meet the requirements.

### **Examples of possible funding awards include:**

- Enhancement/expansion of a program/service currently offered to veterans;
- New programming for veterans provided by an agency that already provides services to veterans;
- Purchase plaques, banners, or monuments to honor veterans;
- Expenses associated with an event to honor veterans; and
- General capital infrastructure to facilities, including physical structures (roof, windows, doors, etc.) HVAC, plumbing, electrical, security, furniture, fixtures, and equipment. The structure's primary purpose must be for veterans' services.

## **Ineligible Expenses**

- Services provided to veterans by an agency that currently does not serve veterans;
- Ongoing/operating expenses;
- Ongoing Programming;
- Restoring Fund Balance/Reserve Accounts;
- Vehicles or maintenance of vehicles; and
- Services currently provided by Genesee County.

## **Other Information**

- Applications will be accepted from February 18, 2025, through March 14, 2025.
- Only one application per organization will be accepted.
- An organization's application should be submitted by the Post Commander, Board Chair, Executive Director (ED), Chief Executive/Elected Officer (CEO), or an individual authorized to submit on behalf of the ED/CEO. Do not apply unless you have received authorization from the ED/CEO.
- Insurance requirements per Risk Management. All organizations receiving funds from Genesee County must ensure they have adequate insurance for the activities they provide as outlined in the MOU.
- Organizations will have 12 months to expend all awarded funds after contract execution.
- Invoices/receipts must be obtained for all expenses. Expenses without appropriate invoices/receipts may be subject to recapture.
- Invoices/receipts for expenses must be submitted for reimbursement within two months of expenditure.
- The department will not reimburse for any sales tax incurred by a tax-exempt organization, except when the exempt status is not recognized out-of-state.
- RECAPTURE: Outstanding funds will be recaptured.
- Pictures of what was purchased and/or an event/program in action are required and must be shared with Genesee County Department of Veterans Services.
- Genesee County Department of Veterans Services staff cannot assist in developing your program design or in drafting your application.

## **Application Review**

All applications will be reviewed for eligibility by the Genesee County Department of Veterans Services with notification if their request has been approved or denied within 60 days of receipt application.

For more information, contact:  
Genesee County Department of Veterans Services  
1101 Beach St., 2<sup>nd</sup> Floor  
Flint, MI 48502  
Email: [v@geneseecountymi.gov](mailto:v@geneseecountymi.gov)  
Website: [https://www.geneseecountymi.gov/departments/veterans\\_services/index.php](https://www.geneseecountymi.gov/departments/veterans_services/index.php)



## 2025 Genesee County Veteran Organization Relief Program

### Applicant Information:

<b>Name/Organization:</b>	Click or tap here to enter text.
<b>Contact Email:</b>	Click or tap here to enter text.
<b>Phone Number:</b>	Click or tap here to enter text.
<b>Address:</b>	Click or tap here to enter text.
<b>Tax ID Number</b>	Click or tap here to enter text.
<b>Website:</b>	Click or tap here to enter text.

### Brief Biography/Organization Overview (max 200 words):

Click or tap here to enter text.

**Project Information (100-point scoring system):**

<b>Project Title:</b>	Click or tap here to enter text.
<b>Project Start/End Dates:</b>	Click or tap here to enter text.
<b>Project Summary:</b> Briefly describe the program for which you are requesting funding and how the program activities incorporate Genesee County Department of Veterans Services' mission to "Strengthen the lives of Genesee County Veterans and their families through compassionate service, supportive resources, and professional advocacy. Please provide sufficient detail of the program and proposed use of funding. Include years of service, type of service(s) provided, targeted population, the history of service provided to the veteran community, qualifications of agency staff and location of services. Provide a summary of your proposal, explaining which allowable activities you are requesting funding for and how you propose to use funding to carry out the eligible activity. How would these funds assist your organization in meeting its goals and objectives? Please include any innovative program services that should be considered in review of this proposal. <i>(20 points – rated on ability to address the needs of Genesee County veterans)</i> Click or tap here to enter text.	

**Capacity and Experience:** Outline the capacity and experience of your agency and staff. Describe your administrative capability to manage funding and comply with all the federal and state requirements. What programs has your organization managed in the past? Have you been audited or monitored by any funding provider in the last two years? If so, when, by whom, and are there any unresolved findings?

*(20 points – rated on relevant experience with funds serving the Genesee County veteran population)*

Click or tap here to enter text.

**Partnerships/Collaborations:** Describe what partnerships, collaborations, and/or coordination with other agencies will occur and the benefit of such linkages. Please discuss the need for the activity for which your organization is seeking funding, in relation to other agencies.

*(10 points – rated on level of partnership with other Genesee County agencies for veteran services)*

Click or tap here to enter text.

**Veteran Impact:** Please describe the impact that will result from your activity being funded. Identify the number of veterans served under this program and the anticipated number to be served if this program is funded. Include results of those services. *(10 points – rated on effect for veterans)*

Click or tap here to enter text.

**Measuring Success:** How does your agency track and measure the success of your veteran assistance programs? How is this communicated? *(10 points - rated on ability to measure success)*

Click or tap here to enter text.

**Challenges:** Describe any challenges your agency has recently faced in serving veterans. How did you address those challenges? *(10 points – rated on insightful response)*

Click or tap here to enter text.

**Budget (10 points – rated on detail):**

Total Project Cost:	Click or tap here to enter text.
Detailed Budget Breakdown (Include specific items and costs, include separate page as necessary):	Click or tap here to enter text.

**Additional Information (10 points – rated on insightful response):**

**Sustainability:** How will the project be sustained after the funding period?

Click or tap here to enter text.

**Other Funding:** Any other funding sources secured or pending? If yes, please provide details:

Click or tap here to enter text.

**Genesee County Priorities:** Genesee County Board of Commissioners believes in making a positive impact for county residents through four common purpose priorities. These priorities include 1. Healthy, livable & safe communities 2. Long term financial stability 3. Inclusive, collaborative culture 4. Community growth. Based on the four priorities listed above, which priority best represents your project's scope of work and why?

Click or tap here to enter text.

**Declaration:**

By submitting this application, I certify that all information provided is accurate to the best of my knowledge. I understand that if awarded funding, I am obligated to utilize the funds solely for the purpose outlined in this application and to provide a report on the project's outcomes within one year of the award.

**Authorized Applicant's Name/Title (Typed):** Click or tap here to enter text.

**Authorized Signature:**

**Date:** Click or tap to enter a date.

**Additional Information:**

Click or tap here to enter text.