

**City of Seattle Sweetened Beverage Tax (SBT)
Prenatal-to-Three Community Grant Program
Grant Application**

Organizational & Program Information	
Organization Name	
Primary Contact Name & Role	
Primary Contact Phone Number	
Primary Contact Email Address	
Name of Proposal	
Intended Outcomes Impacted	<p>Check all that apply</p> <ul style="list-style-type: none"> <input type="checkbox"/> Access to Needed Services <input type="checkbox"/> Healthy & Equitable Births <input type="checkbox"/> Parental Health & Emotional Wellbeing <input type="checkbox"/> Nurturing & Responsive Child-Parent Relationships <input type="checkbox"/> Optimal Child Health & Development
Total Funding Request Between \$10,000 - \$150,000	
Priority Populations to be Served	<ul style="list-style-type: none"> <input type="checkbox"/> BIPOC Communities <input type="checkbox"/> Immigrant Communities <input type="checkbox"/> Refugee Communities <input type="checkbox"/> People with low income <input type="checkbox"/> Emergent Bilingual Communities <input type="checkbox"/> Other marginalized population(s) served:
Zip Codes to be Served (List zip codes where service delivery is planned to take place)	
Fiscal Sponsor (If applicable)	
Number of Staff	
Approximate Annual Budget	

<p>Has your organization or program previously received public funding? Check all that apply.</p>	<p><input type="checkbox"/> Yes, previously funded by DEEL</p> <p><input type="checkbox"/> Yes, previously funded by City of Seattle</p> <p><input type="checkbox"/> Yes, previously funded by King County</p> <p><input type="checkbox"/> Yes, previously funded by Washington State</p> <p><input type="checkbox"/> Not previously funded by a government agency</p>
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Project Narrative

Answer the following questions. Try to keep each written response to a page or less. You may also supplement your responses with documents that support or illustrate your responses.

1. This funding is intended to support priority populations - BIPOC Communities, Immigrant Communities, Refugee Communities, People with low income, Emergent Bilingual Communities. **Describe how your organization’s leadership and project staff reflect the culture and demographics of community you seek to support.**

2. Community engagement allows us to identify and understand a community’s unique needs, allows us to co-create culturally affirming solutions to addressing those needs, and positions us well to execute these ideas with humility and sensitivity. **How has your organization established authentic connections to the community you plan to serve?**

3. Whether it is supporting the health and emotional wellbeing of parents and guardians, supporting families’ access to needed services like food and housing, or supporting equitable births, the prenatal to three period presents an exciting opportunity to have a profound impact on maternal and infant mortality as well as lifelong health and wellbeing. **Provide a brief summary of the proposed project, speaking to each of these prompts:**
 - a. **The need(s) being addressed in the proposed project**
 - b. **How the activity or activities will address the identified need**
 - c. **How the proposed program addresses a need not currently being met in the community**

4. **Describe how the proposed activities are likely to exert a sustained, powerful, and positive influence on one or more of the grant’s desired outcomes:** Access to Needed Services, Healthy & Equitable Births, Parental Health & Emotional Wellbeing, Nurturing & Responsive Child-Parent Relationships, Nurturing & Responsive Child Care, Optimal Child Health and Development.

Acknowledgement of COVID-19 Vaccine Requirement for City of Seattle Contractors

On September 28, 2021, Mayor Durkan issued Executive Order 2021-08: COVID-19 Vaccination Requirements for City Contractors requiring City of Seattle contractors and volunteers be fully vaccinated if their work involves being on-site or in-person. If you are awarded a contract as a result of this RFP, [you will need to submit this attestation form](#) to the City of Seattle before you can begin performing services. For instructions on completing the form, [review this How-to Guide](#). If you have concerns about meeting this requirement, please reach out to DEELFunding@seattle.gov. You can read more information about the [COVID-19 Vaccination Requirements for City Contractors and Volunteers here](#). Please check the box below to confirm:

- I have (1) read the [Executive Order](#), (2) understand the Executive Order, and (3) I will comply with the Executive Order.

To the best of my knowledge and belief, all information in this application is true and correct. The document has been duly authorized by the governing body of the applicant who will comply with all contractual obligations if the applicant is awarded funding.

Name and Title of Authorized Representative
<i>Signature of Authorized Representative and Date</i>