



Coronavirus Emergency Supplemental Funding (CESF) Program

APPLICATION PACKAGE

**Amended Document – See RED Text on
Page 2**

Eligible Applicants: California Counties

RFA Released: November 20, 2020

Proposals Due: ~~February 1, 2021~~
Amended to March 12, 2021

Grant Period: March 31, 2021 to January 31, 2022



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**Coronavirus Emergency Supplemental Funding
(CESF) Program**

**PROPOSAL PACKAGE
COVER SHEET**

Submitted by:

INSERT NAME OF APPLICANT COUNTY

Date Submitted:

INSERT DATE

CESF Program Proposal Checklist

A complete proposal package for funding under the Coronavirus Emergency Supplemental Funding (CESF) Program must contain the following items:

Required Items:		✓
1	Cover Sheet (previous page) <ul style="list-style-type: none"> • Insert Applicant Name and Date of Submission 	
2	CESF Proposal Checklist <ul style="list-style-type: none"> • Signed by the authorized signatory with a digital signature OR a wet signature in blue ink. 	
3	Applicant Information Form <ul style="list-style-type: none"> • Signed by the authorized signatory with a digital signature OR a wet signature in blue ink. 	
4	Proposal Narrative <ul style="list-style-type: none"> • 6 pages or less 	
5	Criteria for Non-Governmental Organizations (Appendix C) <ul style="list-style-type: none"> • Signed by the authorized signatory with a digital signature OR a wet signature in blue ink. 	
6	CESF Local Advisory Committee Membership Roster (Appendix D)	
7	Project Work Plan (Appendix E)	
8	Certification of Compliance with BSCC Policies on Debarment, Fraud, Theft and Embezzlement (Appendix J I) <ul style="list-style-type: none"> • Signed by the authorized signatory with a digital signature OR a wet signature in blue ink. 	
9	Budget Information (Budget Table & Narrative) <ul style="list-style-type: none"> • Use the BSCC provided template 	
Optional:		
	Governing Board Resolution (Appendix I H) <i>Note: The Governing Board Resolution is due prior to contract execution but is not required at the time of proposal submission.</i>	

I have reviewed this checklist and verified that all required items are included in this proposal packet.

X

Applicant Authorized Signature (see Applicant Information Form, Part L, next page)

Applicant Information Form: Instructions

- A. **Applicant:** Complete the required information for the local government submitting the form (i.e. <NAME> County).
- B. **Tax Identification Number:** Provide the tax identification number of the Applicant.
- C. **Project Title:** Provide the title of the project.
- D. **Project Summary:** Provide a summary (100-150 words) of the proposal. Note: this information will be posted to the BSCC's website for informational purposes.
- E. **Grant Funds Requested:** See page 3 of the Proposal Instructions Packet for funding by County.
- F. **Pass-Through Requirement:** Identify the dollar amount and percentage of grant funds that will be passed through to non-governmental, community-based organizations. At least 20 percent of the CESF award must be passed through to one or more CBOs in order to be eligible for funding.
- G. **Lead Public Agency (LPA):** Indicate which local public agency will be the Lead for the CESF Program
- H. **Project Director:** Provide the name, title and contact information for the individual responsible for oversight and management of the project. This person must be an employee of the Grantee.
- I. **Financial Officer:** Provide the name, title and contact information for the individual responsible for fiscal oversight and management of the project. Typically, this is the individual that will certify and submit invoices. This person must be an employee of the Grantee.
- J. **Day-to-Day Project Contact:** Provide the name, title and contact information for the individual who serves as the primary contact person for the grant. Typically, this individual has day-to-day oversight for the project. This person must be an employee of the Grantee.
- K. **Day-to-Day Fiscal Contact:** Provide the name, title and contact information for the individual who serves as the primary contact person for fiscal matters related to the grant. This may be the individual who prepares the invoices for approval by the Financial Officer. This person must be an employee of the Grantee.
- L. **Authorized Signature:** Complete the required information for the person authorized to sign for the Applicant. This individual must read the assurances under this section, then sign and date in the appropriate fields.

CESF Applicant Information Form

A. APPLICANT < Name> County		B. TAX IDENTIFICATION NUMBER			
NAME OF APPLICANT		TAX IDENTIFICATION #:			
STREET ADDRESS		CITY	STATE	ZIP CODE	
MAILING ADDRESS (if different)		CITY	STATE	ZIP CODE	
C. PROJECT TITLE:					
D. PROJECT SUMMARY (100-150 words):					
E. GRANT FUNDS REQUESTED: See page 3 for funding by County			F. PASS-THROUGH FUNDS: Applicants must pass through a minimum of 20%		
\$			\$ and %		
G. LEAD PUBLIC AGENCY:					
H. PROJECT DIRECTOR:					
NAME		TITLE	TELEPHONE NUMBER		
STREET ADDRESS			FAX NUMBER		
CITY		STATE	ZIP CODE	EMAIL ADDRESS	
I. FINANCIAL OFFICER:					
NAME		TITLE	TELEPHONE NUMBER		
STREET ADDRESS			FAX NUMBER		
CITY		STATE	ZIP CODE	EMAIL ADDRESS	
PAYMENT MAILING ADDRESS (if different)		CITY	STATE	ZIP CODE	
J. DAY-TO-DAY <u>PROGRAM</u> CONTACT:					
NAME		TITLE	TELEPHONE NUMBER		
STREET ADDRESS			FAX NUMBER		
CITY		STATE	ZIP CODE	EMAIL ADDRESS	

K. DAY-TO-DAY FISCAL CONTACT:			
NAME	TITLE	TELEPHONE NUMBER	
STREET ADDRESS		FAX NUMBER	
CITY	STATE	ZIP CODE	EMAIL ADDRESS

L. AUTHORIZED SIGNATURE			
By signing this application, I hereby certify that I am vested by the Applicant with the authority to enter into contract with the BSCC, and that the grantee and any subcontractors will abide by the laws, policies and procedures governing this funding.			
NAME OF AUTHORIZED OFFICER	TITLE	TELEPHONE NUMBER	EMAIL ADDRESS
STREET ADDRESS	CITY	STATE	ZIP CODE
EMAIL ADDRESS			
APPLICANT'S SIGNATURE (Signed by the authorized signatory with a digital signature OR a wet signature in blue ink.) X			DATE

Authorized Signature: Must be a representative with the authority to sign documents and obligate the applicant

CONFIDENTIALITY NOTICE

All documents submitted as a part of the Coronavirus Emergency Supplemental Funding (CESF) Program are public documents and may be subject to a request pursuant to the California Public Records Act. The BSCC, as a state agency, may have to disclose these documents to the public. The BSCC cannot ensure the confidentiality of any information submitted in or with this proposal. (Gov. Code, §§ 6250 et seq.)

CESF Proposal Narrative

The Proposal Narrative section may not exceed **six (6) numbered** pages in totality and must be submitted in Arial 12-point font with one-inch margins on all four sides and at 1.5-line spaced. The CESF Local Advisory Committee Roster and Project Work Plan do not count towards the six-page limit. See **page 11** of the Proposal Instructions Packet for corresponding Criteria.

1. Project Need

2. Project Description

3. CESF Local Advisory Committee

CESF Budget Section

As part of the application process, applicants are required to submit the CESF Budget Attachment, which is an Excel Workbook that can be accessed using the link below. See **page 12** of the Proposal Instructions Packet for corresponding Criteria.

➤ To Access the CESF Budget Section, **click [here](#)**

Applicants are solely responsible for the accuracy and completeness of the information entered in the Budget Table and Budget Narrative. The Budget Table must cover the entire grant period. For additional guidance related to grant budgets, refer to the [BSCC Grant Administration Guide](#).

Mandatory Documents Reminder

- Criteria for Non-Governmental Organizations Receiving BSCC Grant Funds
 - Please see Appendix C in the Proposal Instructions Packet.
- CESF Local Advisory Committee Membership Roster
 - Please see Appendix D in the Proposal Instructions Packet.
- Project Work Plan
 - Please see Appendix E in the Proposal Instructions Packet.
- Certification of Compliance with BSCC Policies on Debarment, Fraud, Theft and Embezzlement
 - Please see Appendix I in the Proposal Instructions Packet.