

PHMDC Healthy Communities Innovation Fund Application

With funding provided by the City of the Madison, Public Health Madison & Dane County is excited to release a request for proposals for the 'Healthy Communities Innovation (HCIF) Fund'. The purpose of the HCIF is to support local organizations and programs that are working to address health and racial equity in Madison. We invite Madison-based community groups or individuals to submit grant proposals to use Healthy Communities Innovation funding to advance opportunities for healthy living for communities of color and low income populations. Local projects and partnerships are the key for all people in our communities to have fair and just access to the conditions that promote health. PHMDC is dedicated to eradicating health inequities through a commitment to antiracism and community collaboration.

A total of \$7,000 will be made available. Up to 5 awardees will be chosen with anticipated award amounts ranging from \$1,000 - \$3,000. Awards will be determined by a panel of PHMDC staff and community partners.

Selected projects must begin between November 24, 2017 and December 31, 2017 and be completed by June 30, 2018. Public Health Madison & Dane County will follow up with awardees during 2018 to highlight impact stories and discuss project progress.

The application deadline is Friday, October 27th, 2017 at 4:30 pm. Applications can be submitted via email to astevenson@publichealthmdc.com or mailed to

Attn: Alia Stevenson
City-County Building, Room 507
210 Martin Luther King, Jr. Boulevard
Madison, WI 53703

All applicants will be notified by November 10, 2017.

Application

Organization name and/or name of program, project, or initiative:

Street address:

City:

Zip code:

Organization website and/or Facebook page:

Organization contact person:

Title:

Phone:

Email:

- Amount requested: (award amounts will range from \$1000-\$3000)
- Anticipated project timeline (start and end date):
- Is your organization a Madison based community group or non-profit with a Federal Tax ID number? Yes / No
 - If so, please list your Federal Tax ID number:
 - If not, please list the name of your fiscal sponsor *and their Federal Tax ID number.*
- Please identify the population and geographic area (must be in Madison) your proposal seeks to impact:

Application Questions

1. With which healthy community goal does your proposal most closely align?

(check 1 box) [PHMDC Strategic Plan](#)

- Healthy Beginnings:** So children born in our community get off to a healthy and safe start.
- Healthy Eating and Active Living:** So the people of our community are more physically able to enjoy long, fulfilling lives
- Healthy Minds, Healthy Bodies:** So the people in our community are free from injury, trauma, and disease

- **Healthy Places to Live, Learn, Work, and Play:** So the physical environments in our community are healthy and safe
2. **What does your proposal seek to accomplish? Include a description of project(s) and activities.** (Please keep response to 500 words or less)

 3. **Please describe how your proposal advances the goal that *health outcomes in our community will not be determined by race, class, gender, income, or other group status*.** (Please keep response to 500 words or less)

 4. **Does this request support a new initiative/program/activity or is it supplemental to an ongoing effort?**
 - a. If this is a new project, please briefly describe how your organization plans to continue and build upon this work and/or the impacts of this work over time:

 - b. If this is an existing project, please briefly describe how your organization will leverage these funds to boost existing efforts. How will your organization continue and build upon this work and/or the impacts of this work over time?