This application is for organizations seeking funding from the Maryland Department of Labor under the Maryland New Start Grant Program. Please complete all fields of this application and submit it with all required documentation by **11:59 PM on 07/21/2023.** Prior to submission, review the required and optional documents table below to ensure a complete application.

Applicants should carefully review the *New Start Grant Program Policy* prior to completing this application. The Policy provides details on required program components and key terminology associated with this program.

**New Start Grant Program Initial Application Submission Checklist**

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| **REQUIRED DOCUMENTS** | **OPTIONAL DOCUMENTS** |
| * **New Start Grant Application**
 | * **Additional Letter(s) of Support**
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| * **New Start Program Budget (.xlxs)**
 | * **Sample Program Curriculum**
 |
| * **Letter of Support (1)**
 | * **Program Promotional Materials**
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| * **Letter of Support (2)**
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**Submission Instructions**

Completed Applications should be submitted via email to Casey Tiefenwerth at casey.tiefenwerth1@maryland.gov. Submissions should include all required documents listed above and should be submitted as a file transfer or as attachments to a single email.

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| **SECTION 1: APPLICANT INFORMATION** |
| **1** | **Organization Name** |  |
| **2** | **Employer Identification Number** (FEIN) |  |
| **3** | **Point of Contact Name** |  |
| **4** | **Point of Contact Title** |  |
| **5** | **Point of Contact Email Address** |  |
| **6** | **Point of contact Phone Number** |  |
| **7** | **Organization Street Address** |  |
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| **SECTION 2: PROGRAM & ORGANIZATION INFORMATION** |
| **8** | **Provide a brief overview of the organization and the organization's experience serving incarcerated and previously incarcerated individuals.** |
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| **9** | **Provide a brief overview of the organization’s relationships and partnerships with local businesses. Specify local business partners that will engage with the proposed program and detail their involvement in the project. Applicants are encouraged to provide Letters of Support and/or Memorandums of Understanding, if available.** |
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| **10** | **Provide a brief overview of the organization’s relationships with agencies, organizations, or institutions that serve incarcerated and previously incarcerated individuals. Specify any agencies that will engage with the proposed program and detail their involvement. Applicants must provide a Letter of Support and/or Memorandum of Understanding from at least one correctional institution (see question 14). Letters from additional partners are optional but encouraged.** |
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**Instructions for Section 3: Program Design Plan**

The Maryland New Start Act of 2022 requires applicants for this program to deliver services to two distinct populations: (1) previously incarcerated individuals who meet the definition of “*covered individuals,*” as defined in the New Start Grant Program Policy, **AND** currently incarcerated individuals. Please review the Program Policy’ participant definitions and details on required program components prior to completing Section 3 of this application.

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| **SECTION 3: PROGRAM DESIGN PLAN** |
| **11** | **Provide an overview of the proposed program. Summarize:**1. The program’s overall mission/goals;
2. The program’s method of instruction or training;
3. Program delivery setting and format (location, in person, virtual, etc.);
4. The skills and experience participants can expect to gain; and
5. If the program is associated with a credential or course credit.
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| **12** | **Describe the organization’s strategy for engaging previously and currently incarcerated participants. Specify:**1. The intended participant populations;
2. A recruitment or outreach plan; and
3. A plan for delivering programming to incarcerated participants.
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| **13** | **Entrepreneurship development programming supported by the New Start Grant Program must be based on a nationally recognized model.** 1. Describe the training curriculum for the proposed program; and
2. Identify how the curriculum has been validated by national agencies or organizations.
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| **14** | **The New Start Grant Program requires that applicants must, at a minimum, provide incarcerated participants with an opportunity to engage in a business plan competition. Applicants may additionally provide other services and training opportunities for incarcerated individuals according to their program design. Describe:**1. A plan for providing a business plan competition for currently incarcerated individuals, including connections or agreements with correctional or detention institutions and prior experience with programming in a correctional or detention setting; and
2. Any additional planned programs or services that will be offered to currently incarcerated individuals.

*The grantee’s ability to provide services to incarcerated individuals must be substantiated by a letter of support and/or MOU from a correctional institution indicating active or planned program partnerships and all necessary security approvals. Support letters and MOUs for Maryland State correctional facilities must specifically be approved by the Department of Public Safety and Correctional Services (DPSCS) Office of Programs, Treatment and ReEntry Services. Letters and MOUs from local and federal facilities must be signed by the facility warden/director.* |
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| **15** | **The New Start Grant Program requires that applicants offer participants opportunities for executive mentoring as a component of entrepreneurship development. Describe:**1. The program’s plan for delivering executive mentoring including any proposed timeline, activities, or outcomes; and
2. Any connections or existing relationships with business leaders or business mentors.
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| **16** | **Describe any supportive, wraparound, job-readiness, or reentry services offered by the program. Specify:**1. How the services will address participants’ individual needs and barriers;
2. Strategies to prevent recidivism and supervision violation; and
3. Community resources or partner organizations involved in delivery of the planned services.
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| **17** | **Describe how the program will assess participants’ business viability and suitability for small business financing and business development services.** |
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| **18** | **Complete the chart below to identify the number of participants to be served by the proposed program.** |
| **A** | Number of previously incarcerated participants to be served, annually.*Review the Program Policy definition of “covered individuals.”* |  |
| **B** | Number of incarcerated participants to be served, annually. |  |
| **C** | Total number of participants to be served by the program, annually.*Sum of (18A + 18B)* |  |
| **19** | **Describe the organization’s implementation plan and timeline for the proposed program. New Start Program Grants commence July 1. Specify:**1. Program dates and important milestones associated with the program (enrollment periods, completion dates, etc.); and
2. Key staff involved in delivery and administration of the program, including new positions that may be supported by New Start Grant program funding. Include position titles.
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| **SECTION 4: PROGRAM EVALUATION AND REPORTING TARGETS** |
| **20** | **Complete the chart below to identify the program’s targeted key performance outcomes.**  |
| **A** | Number of participants expected to be enrolled in ongoing entrepreneurship development programming, annually. |  |
| **B** | Number of participants expected to graduate/complete entrepreneurship programming, annually. |  |
| **C** | Number of participants expected to be prepared to pursue small business or entrepreneurial financing, annually. |  |
| **D** | Expected average attendance rate for programming. *(percentage)* |  |
| **E** | Target recidivism rate\* for participants and program completers/graduates.*\*The percentage of participants who have not been charged with a new criminal violation or a violation of a condition of parole or probation during the calendar year of the program.* |  |
| **F** | Number of participants expected to earn a credential or course credit, annually. *(if applicable)* |  |
| **G** | Number of participants expected to be served through wraparound, reentry, or job readiness services, annually. |  |
| **H** | Target participant satisfaction rate, based on participants' evaluation of the program |  |
| **21** | **Describe how the applicant will track and evaluate each of the performance outcomes identified above in questions 19A-H. Specify how the applicant will evaluate participant satisfaction with programming (19H). Where appropriate, identify what actions qualify for a performance outcome.** *Example: define how a participant is counted as “completed” or “graduated” from programming.* |
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| **22** | **Describe any assessment tools, exams, or other metrics that will be used during programming. Indicate when the assessments are offered and any performance goals.** |
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**Instructions for Section 5: Program Financial Information**

Complete this section and provide financial information for the New Start Program grant requested. Information in this section **must** be consistent with an itemized New Start Program Budget. The Program Budget should be completed and submitted as an Excel document (.xlsx) along with this application. Please reconcile Section 5 of this application with the associated Program Budget prior to submission.

Cost per participant (Question 23B) should be calculated as total amount requested (23A) divided by total number of participants served from Question 18C.

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| **SECTION 5: PROGRAM FINANCIAL INFORMATION** |
| **23** | **Provide the following financial information about the funding requested.** |
| **A** | Total grant amount requested | $ |
| **B** | Cost per participant  | $ |
| **C** | Amount of non-State resources committed to the proposed program | $ |

**Commitment of non-State Funds**

The New Start Grant Program requires that applicants can demonstrate that at least 25% of the requested grant amount can be sourced from new or existing non-State funding sources, including indirect costs and in-kind contributions. Applicants must clearly identify those committed non-State resources in the itemized New Start Grant Program Budget and include the total amount in Question 23C from Section 5 of this application. Review these items prior to submitting this application.

**Applicant Affirmations and Submission**

Prior to signing below, review all sections of this application for completion and accuracy. Review the New Start Grant Program Policy for any additional requirements associated with this program. Ensure that all required attachments and any desired optional attachments are included in the final submission. Very submission information, time, and date on the New Start Grant Program solicitation.

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|  | **AFFIRMED** |
| The undersigned affirms that the applicant organization is in good standing with the Comptroller of Maryland and the Maryland Department of Labor. | [ ]  |
| The undersigned affirms that the contents of this application are true, verifiable, and in compliance with all requirements put forth in the program policy. | [ ]  |

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| **Applicant Full Name** |  |
| **Applicant Title** |  |
| **Applicant Email** |  |
| **Applicant Phone Number** |  |

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| **Applicant Signature** | **Date** |
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Completed Applications should be submitted via email:

Casey Tiefenwerth at casey.tiefenwerth1@maryland.gov.