
American Rescue Plan Act Funding Request
Application For
Afterschool/Summer STEAM Enrichment Programs

The Inc. Village of Hempstead is accepting grant requests for programs that focus on afterschool and Summer STEAM Enrichment Programs. The Village of Hempstead has identified the recovery of nonprofits hard hit by the COVID-19 public health emergency as a priority for funding.

The American Rescue Plan Act (ARPA) funding award is for eligible programs with award amounts up to \$55,000. The ARPA funds are to assist in the recovery from the COVID -19 pandemic. State and Local Fiscal Recovery Funds may be used to cover eligible costs that were incurred during the period that begins March 3, 2021 and ends on December 31, 2024.

Submission:

Application must be submitted to the Inc. Village of Hempstead Community Development Agency (CDA) at 50 Clinton Street, Suite 504, Hempstead, New York 11550.

Selection and Review:

The nonprofit must be in the Village of Hempstead and serve the Hempstead community. All grants will be awarded as determined to be in the best interest of the Village of Hempstead.

Reporting and Monitoring:

Recipients of ARPA funds are required to submit various financial and programmatic reports as a condition of award acceptance. Future awards and funds may be withheld if these reports are delinquent. The awardee will send quarterly progress reports to the Inc. Village of Hempstead Community Development Agency. January, February, and March (due April 1st) April, May, and June (due July 1st) July, August, and September (due October 1st) October, November, and December (due January 1st) while the program is in operation.

A program closeout report is due upon completion of the program described in the application. The awardee will keep a record of payments made with the ARPA funding to include in the quarterly progress reports.

All progress reports will outline the number of participants from the Village of Hempstead and accomplishments the program has had based on the ARPA Funding Request Application.

The Village of Hempstead CDA will make site visits to review the program and its participants.

(Note: Please provide answers on a separate sheet if necessary)

1. Legal Name of the Organization:

2. Doing Business as (DBA) name:

3. EIN Number:

4. Street Address:

City: _____ State: _____ Zip code: _____

5. Phone number:

6. Project Contact:

7. Project Contact phone number:

8. Project Contact phone email address:

9. DUNS number

10. Please provide a completed W-9 as an attachment.

11. Provide a copy of the organization's bylaws.

12. Describe the community need that your organization will target with the use of ARPA funds and how the Village of Hempstead community will be impacted:

13. Describe the impact the COVID-19 pandemic has had on your organization and program(s):

14. Describe in detail how your program will target the given need established outlined in question 12 above:

15. Amount of ARPA funding requested for the program: _____

16. Dates the program will begin and date of anticipated program completion

Start date: _____ Program completion date: _____

17. Describe your plans to maintain this program once the ARPA funds are implemented:

I, _____ certify that any false statements, concealment of information, submission of altered documents, use of funds for ineligible purposes, or similar actions are considered fraudulent and may result in repayment of the grant award or other legal action.

_____	_____
Printed Name	Title
_____	_____
Signature	Date

For Village of Hempstead Community Development Agency:

Reviewed and Approved: _____

Name and Title Date

For Inc. Village of Hempstead:

Reviewed and Approved: _____

Name and Title Date