

Application Instructions

SECTION I. APPLICANT INFORMATION

- A. Name of community/county/entity applying for CENA funds and the county in which they are located. (Atoka, Bryan, Carter, Coal, Garvin, Johnston, Love, Marshall, Murray, Pontotoc)
- B. Name of your contact person and the sites county district number it is located in. (#1, #2, #3)
- C. Mailing address, phone number, fax number, and e-mail of site.
- D. Physical address of site if different from C.
- E. The FEIN (Federal Employer Identification Number) of the applicant.
- F. Name of Board President and their information.
- G. Reimbursements person and their information.
- H. To whom and where to mail reimbursement if different from C.
- I. Population of entity that is 60+
- J. Total Funding Budet available for the operational year without CENA funding.
- K. What is the OK Senator & House District of the project location? **Pick one item from the drop down list**
- L. What is the US Senator & House District of the project location? **Pick one item from the drop down list**
- M. **Pick one item from the drop down list** (Daily, Weekly, Monthly, Annually) if weekly # days per week, if monthly # of days per week, if annually # of days
- N. **Pick one item from the drop down list** (Daily, Weekly, Monthly, Annually) if weekly # days, if monthly # of days, if annually # of days
- O. Give the number of persons served on a single day only. Enter a number for those served on site and for those served in carry out, including separate totals for above and below 60 years of age.
- P. Insurance carried by the entity for the site. **Pick one item from the drop down list** (General Liability, Building, Contents, All, GL/Bldg, GL/Content, Bldg/Contents)
- Q. **Pick one item from drop down list** (Yes, No)
- R. Tell us what was applied for if you answered yes to Q.

SECTION II. PROJECT INFORMATION

- A. A complete explanation of the equipment. For example, Commercial Refrigerator, current is not working at all and is 20 years old. Do you have 3 quotes for the equipment to upload? Are the quotes for like kind items? Are you needing these funds in addition to budget funding? Do you have funds to put towards the equipment already? Are you doing fundraising for the equipment? **Each project description must be specific enough that it can be audited by SODA AAA**
- B. Describe the location of the project using street names, etc. in such a way that someone from SODA AAA can drive to the project site. If no street names are used, include a map.
- C. The total number of people benefiting from the project. In some cases, this will be the entire community or the 2010 Census number may be used. In other cases, the number will reflect only a portion of the population.
- D. What is the total grant amount you are applying for? CENA amounts may change each year. The current maximum application amount will be listed on item #3 of the SODA CENA application page when the site opens each year.

- E. Total other Fundraising/Grants (type and amount). This will be for any other fundraising or grants used towards funding site.
- F. Local Effort (type and amount). This can include other funding from meal charges to under 60, city, county support towards funding the site.
- G. The project cost. This is the amount of the grant request, plus other fundraising/grant, plus local effort (E+F+G=H). **The computer will total this for you and it must match the project budget you submit.**

SECTION III. PROJECT IMPACT

- A. Must clearly be demonstrated that the project will have a significant impact on the nutritional and physiological well-being of your community/county. It is absolutely essential that you make the project narrative concise and understandable as to what you want to accomplish.
- B. Must clearly explain how the public in your area knows of your hours, services and more.