**OHIO CDC ASSOCIATION 2020 VISTA SUB-SITE
APPLICATION COVER PAGE**

Please fully complete this application and submit by 5:00 pm on December 13, 2019. Your application will not be considered if it arrives after the deadline, is incomplete, or does not follow the provided application format. The application form contains six tabs of basic organizational or project questions. You will then be able to upload two files: one Word file of this application document and one PDF file that will contain your organization’s articles of incorporation, list of current board members, and VISTA project supervisor’s resume. The application is available here: <https://www.formpl.us/form/5767574260285440>

For questions on the 2020 VISTA Sub-site Application contact:
 Alana Perez, VISTA Program Manager, Ohio CDC Association
 aperez@ohiocdc.org or (614)-461-6392 x. 204

NAME OF ORGANIZATION:

STREET ADDRESS:

CITY, STATE, ZIP:

PHONE: FAX: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EIN Number:

SUPERVISOR NAME AND TITLE:

SUPERVISOR PHONE: SUPERVISOR EMAIL:

PERSON AUTHORIZED TO SIGN CONTRACTS NAME, TITLE, AND EMAIL:

**Applicant Checklist**

*Please send sections 1- 7 as a Word document:*

1. Cover Page \_\_\_\_\_\_\_
2. Narrative (Page 2) \_\_\_\_\_\_\_
3. Milestones (Pages 3 - 5) \_\_\_\_\_\_\_
4. Supervision (Page 6) \_\_\_\_\_\_\_
5. Sub-site VISTA Project Description\* (Page 7 - 8) \_\_\_\_\_\_\_
6. AmeriCorps VISTA Assignment Description (VAD)\* (Page 10 - 12) \_\_\_\_\_\_\_
7. On-Site Orientation Form\* (Page 13 - 15) \_\_\_\_\_\_\_

*Please attach section 8 – 10 in a separate pdf document:*

1. Organization Articles of Incorporation \_\_\_\_\_\_\_
2. List of Current Board Members \_\_\_\_\_\_\_
3. Supervisor’s Resume \_\_\_\_\_\_\_

\*If your organization is requesting the support of two VISTA Members for separate projects, please provide answers for each project for these sections. Do not submit two separate applications.

**NARRATIVE**

***The narrative serves as a blueprint for the Applicant’s proposed sub-site VISTA project. Each question should be separately answered.* Keeps each question and section separate and do not exceed character limit. *Character limit includes spaces. Please do not include any charts or graphs.***

**Organizational Background**

The CNCS VISTA program mission is to increase capacity for low-income people to improve the conditions of their own lives.

* 1. Please provide a brief narrative with a mission statement, brief organization history, current programs and your organization’s experience working with volunteers. When writing this, consider how CNCS’s mission fits into your organization’s mission, history, and programs. **(2000 characters or less – spaces included)**
	2. Will there be any major changes in your funding level, programming, or staff over the next 12 months? If yes, please explain. **(500 characters or less – spaces included)**

**Sub-site VISTA Project Design**

1. a) Please provide an overview of your organization’s sub-site VISTA project using the OCDCA VISTA Project Goals in Section 4 as guidance for development. Be certain to demonstrate a link between the CNCS anti-poverty mission and the OCDCA VISTA Project Goals. **(2000 characters or less – spaces included)**

b) Create a bulleted list of the objectives of your sub-site’s VISTA project as a whole (i.e. when the project is complete, what objectives will it be fulfilling). **(2000 characters or less – spaces included)**

c) Describe your organization’s plan to ensure the sustainability of the proposed sub-site VISTA project upon VISTA Member withdrawal utilizing the three (3) phase structure described in Section 2, with timeline estimations for each phase. **(2000 characters or less – spaces included)**

1. How will the project bring individuals out of poverty? **(1000 characters or less – spaces included)**

# MILESTONES

***Insert the projected 2019 service year VISTA project milestones. Please keep in mind that because VISTAs are forbidden from providing direct service, many of the milestones seen below are intended to capture outcomes that were made possible because of the efforts of VISTA capacity building. For example, the number of individuals receiving asset training/counseling should be captured if the VISTA had a part in promoting the training, conducted research that brought the training to fruition, or recruited volunteers to deliver training.***

**Goal: To build the capacity of CDCs to provide affordable housing.**

Number of housing units to be constructed or rehabbed by your organization: \_\_\_\_\_\_\_

Number of affordable housing units made available for low-income people:

Dollar value of cash resources developed to assist with affordable housing efforts: \_\_\_\_\_\_\_

Dollar value of in-kind resources developed to assist with affordable housing efforts: \_\_\_\_\_\_\_

Number of staff and community volunteers that received training (of one or more types):

Number of engagement tools developed for affordable housing programs and services: \_\_\_\_\_\_\_

Number of volunteers recruited to assist with supporting affordable housing efforts: \_\_\_\_\_\_\_

Number of volunteer hours completed to assist with supporting affordable housing efforts: \_\_\_\_\_\_\_

Number of beneficiaries that received services in affordable housing as a direct result of capacity building efforts by VISTA:

**Goal: To build the capacity of CDCs to increase employment opportunities.**

Dollar value of cash resources developed to assist with employment efforts: \_\_\_\_\_\_\_

Dollar value of in-kind resources developed to assist with employment efforts: \_\_\_\_\_\_\_

Number of volunteers recruited to assist with supporting employment opportunity efforts: \_\_\_\_\_\_\_

Number of staff and community volunteers that received training (of one or more types):

Number of engagement tools developed for employment programs and services: \_\_\_\_\_\_\_

Number of economically disadvantaged individuals receiving job training or other skill development services:

Number of events attended/coordinated to promote capacity building efforts in employment services: \_\_\_\_\_\_\_

Number of beneficiaries that received services in employment opportunities as a direct result of capacity building efforts by VISTA:

**Goal: To build the capacity of CDCs to provide housing counseling**

Number of housing units to be constructed or rehabbed by your organization: \_\_\_\_\_\_\_

Dollar value of cash resources developed to assist with housing counseling efforts: \_\_\_\_\_\_\_

Dollar value of in-kind resources developed to assist with housing counseling efforts: \_\_\_\_\_\_\_

Number of Veterans to receive housing counseling because of a direct result of capacity building efforts by VISTA: \_\_\_\_\_\_\_

Number of engagement tools developed for housing counseling programs and services: \_\_\_\_\_\_\_

Number of volunteers recruited to assist with supporting housing counseling efforts: \_\_\_\_\_\_\_

Number of staff and community volunteers that received training (of one or more types):

Number of beneficiaries to receive housing counseling as a direct result of capacity building efforts by VISTA: \_\_\_\_\_\_\_

**Goal: To build the capacity of CDCs to increase and maintain assets for individuals**

Dollar value of cash resources developed to assist with asset efforts: \_\_\_\_\_\_\_

Dollar value of in-kind resources developed to assist with asset efforts: \_\_\_\_\_\_\_

Number of Veterans to receive asset development and preservation training and/or one-on-one counseling in such areas as financial literacy, home repair, microenterprise, etc. as direct result of capacity building efforts by VISTA: \_\_\_\_\_\_\_

Number of volunteers recruited to assist with supporting financial asset development efforts: \_\_\_\_\_\_\_

Number of staff and community volunteers that received training (of one or more types):

Number of beneficiaries to receive asset development and preservation training and/or one-on-one counseling in such areas as financial literacy, home repair, microenterprise, etc. as direct result of capacity building efforts by VISTA: \_\_\_\_\_\_\_

Number of individuals to receive counseling and tools to start or improve business practices:

Number of engagement tools developed for financial asset programs and services: \_\_\_\_\_\_\_

**Goal: To build the capacity of CDCs to increase access to fresh and healthy foods**

Dollar value of cash resources developed to assist with affordable housing efforts: \_\_\_\_\_\_\_

Dollar value of in-kind resources developed to assist with affordable housing efforts: \_\_\_\_\_\_\_

Number of engagement tools developed for food security programs and services: \_\_\_\_\_\_\_

Number of volunteers recruited to assist with supporting food security efforts: \_\_\_\_\_\_\_

Number of staff and community volunteers that received training (of one or more types):

Number of individuals getting support, education and/or referrals for hunger:

Number of individuals who will utilize SNAP benefits for healthy food options as a direct result of food security capacity efforts: \_\_\_\_\_\_\_

**Goal: To build capacity to increase energy and water efficiency in housing.**

Dollar value of cash resources developed to assist with energy efforts: \_\_\_\_\_\_\_

Dollar value of in-kind resources developed to assist with energy efforts: \_\_\_\_\_\_\_

Number of volunteers recruited to assist with energy efforts: \_\_\_\_\_\_\_

Number of staff and community volunteers that received training (of one or more types):

Number of engagement tools developed to promote and educate on energy and water efficiency and conservation: \_\_\_\_\_\_\_

**Supervision**

* 1. Describe your organization’s VISTA recruitment process and how, if chosen as a sub-site, it would go about evaluating the suitability of VISTA candidates. **(1000 characters or less – spaces included)**
	2. Describe the supervision that will be provided to the VISTA Member. Please make sure to describe how the VISTA Member and sub-site VISTA supervisor will determine if activities and milestones are being met. **(1000 characters or less – spaces included)**
	3. How will your organization support the professional development of your VISTA Member and recognize the accomplishments of the VISTA Member? **(500 characters or less – spaces included)**

# SUB-SITE VISTA PROJECT DESCRIPTION

***Should your site be selected, the answers to these questions will be used by OCDCA to post the VISTA Member position directly to the CNCS online application database. Please keep that in mind when writing the description. Character allotment includes spaces, and must be followed. If selected, OCDCA will not modify the description. The description will be cut at point character allotment goes over, which would create a harder recruitment process for your organization.***

Organization Name & Address:

VISTA Supervisor Name/Title/Phone #/Email:

In what metropolitan area will the VISTA serve?

Provide a brief 2 line description of the sub-site VISTA project. This is what a potential applicant will see before clicking the position open to see more. Making this as exciting and interesting as possible will help you get more applicants. **(200 Characters or less – spaces included)**

Enter your sub-site VISTA project description. **Do not use bullet points.** **(2000 characters or less – spaces included)**

VISTA Member duties. This is the complete job description that applicants will see. Given the rules and purpose of VISTA, please remember VISTAs cannot do direct service, and “other duties as assigned” should not be listed. **Do not use bullet points.** **(1000 characters or less – spaces included)**

Does your organization require a separate application?

Minimum age:

Desired education level:

Skills you would like your VISTA Member to possess – check all that apply:

\_\_\_ Counseling \_\_\_ Leadership

\_\_\_ Architectural Planning \_\_\_ Medicine

\_\_\_ Business/Entrepreneur \_\_\_ Public Health

\_\_\_ Communications \_\_\_ Public Speaking

\_\_\_ Community Organization \_\_\_ Recruitment

\_\_\_ Computers/Technology \_\_\_ Teaching/Tutoring

\_\_\_ Conflict Resolutions \_\_\_ Trade/Construction

\_\_\_ Education \_\_\_ Writing/Editing

\_\_\_ Fine Arts/Crafts \_\_\_ Youth Development

\_\_\_ First Aid \_\_\_ General Skills

\_\_\_ Fundraising/Grant Writing \_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_ Law

Do you have any language requirements?

**VISTA Assignment Description (VAD) Guidelines**

Please use the following guidelines when creating your VAD:

* Goals listed should be one of the OCDCA VISTA Project Goals. DO NOT Create your own goal:
	+ To build the capacity of CDCs to provide affordable housing.
	+ To build the capacity of CDCs to increase employment opportunities.
	+ To build the capacity of CDCs to provide housing counseling.
	+ To build the capacity of CDCs to increase and maintain assets for individuals.
	+ To build the capacity of CDCs to increase access to fresh and healthy foods.
	+ To build the capacity of CDCs to increase energy and water efficiency in housing.
* There should be one planned period of work for each activity. Please list the planned period of work as “Month Year – Month Year” (ex. June 2019 – June 2020). **Steps should not have separate planned periods of work**
* Do not reuse VADs that have been used by previous VISTAs. VADs should reflect the growth of the VISTA Project in years two and three.
* Activities should be a complete statement, and there should always be a “why” component in the activity. An example of a good activity statement is, “Identify and implement new marketing and outreach strategies to increase community resident participation in [organization]’s financial planning program.”

# AmeriCorps VISTA Assignment Description (VAD)

The VAD is an outline for the VISTA year. It is meant to be a working document. VISTAs are not allowed to participate in activities not associated with activities on the VAD. If there are activities that your organization has all staff members help out with and the VISTA will be included in, please put those activities in the VAD. For example, if everyone helps out with an annual fundraiser of annual conference, please list that on the VAD. VAD should focus on building capacity of a project that fights poverty. It should not include any direct service. Please delete empty sections of the VAD template that you do not use.

|  |  |
| --- | --- |
| **VISTA Project:** Ohio CDC Association VISTA Project | **VISTA Member Name:** TBA |
| **Sub-site Name:**  | **Assignment Area:** Economic Opportunity | **Date:** June 2020 – June 2021 |

|  |  |
| --- | --- |
| **AmeriCorps VISTA Activities and Steps Checklist** | **Planned Period of Work** |
| **Goal***: (DO NOT create your own goal; utilize the OCDCA VISTA Project Goals)* |  |
| **Activity 1:**Step 1: Step 2: Step 3:  | (List only ONE period of work) |
| Activity 1 Comments/Summary of Accomplishments: | **Activity 1 Completed (date):** \_\_\_\_\_\_\_\_\_ |
| **Activity 2**: Step 1: Step 2: Step 3: | (List only ONE period of work) |
| Activity 2 Comments/Summary of Accomplishments: | **Activity 2 Completed (date):** \_\_\_\_\_\_\_\_\_ |
| **Activity 3**: Step 1: Step 2: Step 3:  | (List only ONE period of work) |
| Activity 3 Comments/Summary of Accomplishments: | **Activity 3 Completed (date):** \_\_\_\_\_\_\_\_\_ |
| **Goal** *: (DO NOT create your own goal; utilize the OCDCA VISTA Project Goals)* |  |
| **Activity 1:**Step 1: Step 2: Step 3:  | (List only ONE period of work) |
| Activity 1 Comments/Summary of Accomplishments: | **Activity 1 Completed (date):** \_\_\_\_\_\_\_\_\_ |
| **Activity 2**: Step 1: Step 2: Step 3: | (List only ONE period of work) |
| Activity 2 Comments/Summary of Accomplishments: | **Activity 2 Completed (date):** \_\_\_\_\_\_\_\_\_ |
| **Activity 3**: Step 1: Step 2: Step 3:  | (List only ONE period of work) |
| Activity 3 Comments/Summary of Accomplishments: | **Activity 3 Completed (date):** \_\_\_\_\_\_\_\_\_ |
| **Activity 4**: Step 1:Step 2: Step 3: | (List only ONE period of work) |
| Activity 4 Comments/Summary of Accomplishments: | **Activity 4 Completed (date):** \_\_\_\_\_\_\_\_\_ |

AMERICORPS VISTA ON-SITE ORIENTATION PLAN

Name and address of sub-site organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dates of Training: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **AMERICORPS VISTA OSO GUIDELINES**

Following AmeriCorps VISTA Pre-Service Orientation, each AmeriCorps VISTA volunteer will receive on-site orientation with the sub-site organization. The orientation will be one of the first planned activities with the AmeriCorps VISTA(s) and should occur within the first week the AmeriCorps VISTA(s) is assigned to the sub-site. Your organization may have an orientation already in place for new employees. If so, you are encouraged to involve the AmeriCorps VISTA(s) in this orientation, and to build upon it to achieve the goals of AmeriCorps VISTA on-site orientation. Following training, each AmeriCorps VISTA volunteer should know the following:

1. Mission, background, and purpose of the sub-site organization.
2. Background of the community, and identification of community leaders, especially those involved in the service activities.
3. Information about the low-income population served by the project.
4. Purpose of the sub-site VISTA project and the relationship between the sub-site organization and the community served.
5. Potential resources (funds, materials, people) that can be applied to help achieve VAD milestones and OCDCA VISTA Project goals.
6. Supervisory and support structure for the VISTA Member, i.e., expectations regarding attendance, reporting, accountability, workplace rules and so on.
7. Clarification of individual VADs and how the VISTA Member’s progress in achieving VAD milestones will be assessed.
8. OSO Plan should be at least one week long. The most effective OSO plans are typically 2 weeks, with follow-up activities throughout the first month.

***Please give AmeriCorps VISTA Member an opportunity to evaluate the training at the end of OSO.*AMERICORPS VISTA OSO AGENDA**

 Complete a section for each activity or session, which will be part of the on-site orientation.

Date: Title: Trainer or Presenter:

Time:

Description of subject matter:

Objectives of activity or session:

Date: Title: Trainer or Presenter:

Time:

Description of subject matter:

Objectives of activity or session:

Date: Title: Trainer or Presenter:

Time:

Description of subject matter:

Objectives of activity or session:

Date: Title: Trainer or Presenter:

Time:

Description of subject matter:

Objectives of activity or session: