

APPLICANT INFORMATION

Eligible organizations are those in counties with population of 40,000 or less. This organization will act as the legal applicant to contract with the Office of Rural Prosperity for the program. This organization will contract employment with the selected Champion in a manner that fits within the organization and allows for tracking work hours and payments. This is a reimbursement grant of wages paid to the Rural Champion.

Organization Name*

Organization and Project Contact*

First Name, Last Name

This will be the primary contact for the Rural Champions program grant. This person will supervise the selected Rural Champion and assist with reporting requirements.

PROJECT NARRATIVE

Numerous communities have identified programs or projects that could benefit them but have not been able to make progress. Many times, this is due to not having the capital or capacity of a dedicated individual to see a project through to completion. This grant program should help the community make progress on this challenge, that could only be completed if someone were to dedicate all of their time to this project.

In the following section, describe the scope of the project. Explain why this project is needed in order to see progress or success happen in this community, county, or region. Please be as concise and succinct as possible.

Project Category

Select... Child care, Housing, Placemaking/Arts, Health, Grocery/Food Access, Entrepreneurship, Community/Economic Development, Trails, Sustainability- business or environment, other

These are suggested topics. If the category that best fits your project is not listed, select Other and describe your proposed project focus in the narrative question below.

Project Description and Scope Summary*

Explain your project proposal in detail. How does it relate to the project category and what is the potential impact? Consider how the project fulfills the organization's mission and contributes to the community.

Project Selection*

Please describe how your community or team determined this project priority, including level of community involvement or feedback you received to determine this as a priority. Has the community had meetings, town halls, or strategic doing sessions that have identified this challenge? Why did you decide on this for the Rural by Choice Champion project?

Project Readiness*

Describe previous work that has been completed on this project. Have any previous programs been accessed? What obstacles are you experiencing that are limiting progress on the project outcome. What has been done - whether successfully or unsuccessfully to address the challenge?

Benefit to Community*

Describe how having a Champion will help the community make progress on this project.

Describe Community Partnerships*

Describe partners or organizations that have been or will be involved in this project at the local, regional, or state levels. This will assist in identifying additional resources and programs to support the proposed project.

Goals and timeline*

Describe the anticipated timeline for the project and goals that will be used to measure success and determine project completion. This will provide a starting point for the Champion; they will finalize the timeline as part of initial strategic planning.

Upload letters of support for the proposed project.*

Upload letters from organizations, community, volunteers, leadership, etc., that support this project.

CHAMPION SELECTION

The person who will serve as your "Champion" for this proposed project must be identified at time of application.

This person will contract with the host organization for one year, October 1, 2024 - September 30, 2025. Occasional travel will be required by the Champion for meetings and/or trainings throughout the project year and should be acknowledged in the acceptance letter.

Name and Contact Information of the Selected Champion*

First Name, Last Name, Email, Phone

Has the Champion participated in training sessions at the Kansas Leadership Center (KLC)? If so, which sessions have they attended? (Select all that apply)

When Everyone Leads

Your Leadership Edge

Lead for Change

No

Champion's Experience and Qualifications *

Provide a brief description of the Champion's experience, their work in the community, and how the selection was made.

MATCHING FUNDS

Matching Funds-Outline the matching funds (both cash and in-kind) for this project. Briefly provide plans for securing any matching funds not yet secured.*

A minimum of 25% match will be required of \$5,200. Match can include items such as a provided work area, provided computer and technology access, travel reimbursements, augmented pay, etc. Communities that have matching salary support will receive additional points in the review process. The grant is in form of reimbursement of wages. Documentation of wages paid and matching funds will be reported on a quarterly basis.

STATEMENT OF ASSURANCE

I am authorized to act on behalf of the organization and personally certify that by submitting this application for consideration of funding by the Kansas Department of Commerce under the Rural Champion program, all information provided and presented here in is true and accurate. The organization understands that if the project submitted under the Rural Champion program is chosen to be awarded for funding, the organization will be responsible for completing necessary forms, contracts, and financial information for the Kansas Department of Commerce prior to the disbursement of any funding.

I understand the project must be completed within 12 months from commencement on October 1, 2024, to be completed by September 30, 2025. Projects that will require construction can be given additional time to complete, up to one year, as long as the start of construction begins before October 1, 2025. I understand we will be required to submit progress reports, proof of approved expenditures, and other necessary documents on a quarterly basis. I also understand that these do not solely encompass all the requirements that I may be obligated to perform if selected as a recipient under the Rural Champions program and that the Kansas Department of Commerce reserves the right to rescind the selection and awarding of any funding under the Rural Champions program should any information in this application and supporting documentation be inaccurate or by failing to provide the documentation required of Champions program recipients.