

Wyoming Community Development Authority  
155 N. Beech  
P.O. Box 634  
Casper, WY 82602  
307-265-0603

Rev 11/30/09

**WCDA Community Pride and Revitalization Program (CPR)**  
A Homeowner Rehabilitation Program Utilizing Volunteer Labor

**Application Form**

**2010 Program Year - Open Application Period**  
**Application Deadline - First Come First Served**

The Program at Work:

Over the past few years, both the Cities of Casper and Cheyenne have been working with a volunteer labor organization called *World Changers*. Each summer this organization spends one or two weeks in these two communities bringing in over one hundred young people (high school and college age) to provide the labor for housing renovations. Typically, these renovations are for elderly, disabled and low-income households. Casper and Cheyenne target their programs towards renovations like painting, roofing, window & door replacements, furnaces, hot water heaters, and cost effective energy conservation items. **Both communities are making a big difference by utilizing volunteer labor to provide these much needed renovations.** Smaller communities also have programs at work such as *Christmas in April* or *Paint Your Heart Out*. These are the types of volunteer labor homeowner rehabilitation programs that the Wyoming Community Development Authority (WCDA) is targeting with a matching funds program called the **Community Pride and Revitalization Program (CPR)**.

Eligible Applicants are Cities, Towns or Counties. The Applicant may partner with one or more community based or faith based organizations that have developed a program that encourages volunteer labor for homeowner rehabilitation. Applications should be submitted to the WCDA office. Applications may be submitted at any time and are subject to available funding.

**1. APPLICANT (Grantee):**

- a. Name: \_\_\_\_\_  
CITY/TOWN/COUNTY
- b. Mailing Address: \_\_\_\_\_
- c. Phone: \_\_\_\_\_ Fax: \_\_\_\_\_
- d. Contact Person: \_\_\_\_\_
- e. Email Address: \_\_\_\_\_
- f. Responsible Individual: \_\_\_\_\_
- g. Tax Identification Number: \_\_\_\_\_

**FUNDING REQUEST:**

WCDA will match dollar for dollar the amount that the Applicant is willing to commit to the program. WCDA’s funding is for the reimbursement of materials only. WCDA will reimburse the Applicant for materials that are not supplied or funded by another funding source. The Applicant must provide a cost breakdown at the end of the project that shows where the matching funds were used and the actual material costs expended by the Applicant. CPR funds may not be used for administrative fees. There is no requirement for the source of the Applicant’s contributions/match. It may come from local donations, foundation grants or city, state or federal funding, etc. Materials that are donated will count as match and are not eligible for CPR reimbursement. Each source must be verified with a letter of commitment or a written agreement from the funding source. Volunteer labor is a key component of this program. Applicants should identify what groups will be involved in providing the volunteer labor. If individual donations are used as match, the Applicant must be able to certify to WCDA that these funds are available and to be used for this purpose. Applicants who have all of the match firmly committed at time of application will receive a preference for funding under this program. If funding is not committed please indicate when a decision is to be made on the matching funds.

The maximum amount funded per year to any one program will be \$20,000; the minimum amount will be \$5,000. **The funding available for 2010 is \$30,000.00.**

Total amount of funding requested for your program:

\$ \_\_\_\_\_

List the sources, amounts of the match funds, and whether the match is tentative or a firm commitment:

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

**3. APPLICATION SUBMISSION REQUIREMENTS:**

A narrative describing:

- 1) Problem(s) to be solved and how the money will be used. Please include a project budget / sources and uses statement.
- 2) State the number of persons (estimate) who will benefit and their income levels. (Indicate data sources)
- 3) Indicate who will be assisting with the program (partners), their role and their experience with such a program.

- 4) List how the volunteers are recruited and selected.
- 5) Indicate outcome of previous CPR award(s), if applicable.

**4. PROGRAM DESCRIPTION:**

- a. Program Name: \_\_\_\_\_
- b. Program Eligibility and Problem to Be Solved: (Briefly describe the program attaching a more detailed description to include the items below.)

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Please attach a copy of detailed program specifications. (The Program description should include an explanation of how homeowners will be selected for the program and if that process has already taken place, what types of renovations will be considered, whether or not a community has selected a targeted neighborhood, how the targeting was determined, who will be administering the program, and their capacity and experience with this type of program. In addition, a very specific timeline for the program's start and completion dates. The program dollars requested from WCDA should only be enough to be utilized in one program year. The Applicant may apply in subsequent years for additional funding, if available. Previous Grantees must have closed out their prior grant with WCDA and drawn down all funding prior to applying for another program year.)

**5. APPLICANT ACKNOWLEDGEMENTS & CERTIFICATION:**

The applicant acknowledges that:

- 1) Final work programs must be submitted within 45 days of notification of grant award.
- 2) If circumstances arise that a project, as applied for, cannot be completed with available funds, the recipient will be required to complete the project with its own funds or reimburse WCDA if the project is not undertaken.
- 3) The applicant will be required to submit a report at the conclusion of the program year. Each report shall set forth in narrative form the work accomplished, the dollars used and beneficiary information (number of

households, household size, marital status, race, type of household, and household income).

- 4) The applicant certifies that the program will follow all applicable federal, state or local laws and regulations.

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Applicant's Signature - Authorized City, Town or County Official

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Date