

Area Agency on Aging 1-B
Request for Proposals for FY 2020 – 2022
Application for OAA Title III/State Funds and Application Checklist

Please complete this checklist of **Required Application Materials** to verify all items are being submitted. Sign and date the form and include as the first page of your application.

I. Application

- A. Organization Information (Organization Name, Address, Program Contacts, Etc.)
- B. Narrative
 - Organization History and Experience
 - Program Description and Need
 - Program Implementation
 - Quality Assurance
 - Staffing and Organizational Chart
- C. Financial Management
- D. One-Year Targeting Plan(s)

II. Budget Documents

- A. Social Services Budget Summary
- B. Congregate and Home Delivered Meal Program Budget

III. Service Delivery Forms – *Nutrition Services Applicants Only*

- A. Food Specifications
- B. Congregate Site Operations
- C. Operational Resources
- D. Central/Satellite Kitchens

IV. Local Match Letter (Original)

V. Letters of Support (Minimum of 2 Required)

VI. Subcontracting Request for Approval Form (If Applicable)

VII. Request of Waiver of Service Provision Standard Form (If Applicable)

Applicants Signature & Title: _____

Date: _____