

Digital Inclusion Fund

Grant Application

Grant Applications will be accepted on a rolling basis at HuntingtonDigitalInclusionOCIC@occh.org. OCCH will make a funding decision shortly after receipt of the application. Applicants will either receive notice that they will be funded and can proceed, or applicants may be put on a waiting list to receive funding later in the year if funds are still available. Applicants will be accepted April 1 – October 1. Any remaining funds after October 1 may become available to applicants who were not initially awarded.

Complete applications (without attachments) should be 10 pages or less. Attachments may be included to document support from participating agencies/funders, or to provide other information as needed. Please send to the attention of The Digital Inclusion Fund by mail (88 E. Broad Street #1800, Columbus, OH 43215) or by e-mail (HuntingtonDigitalInclusionOCIC@occh.org).

Partner Information

Contact Person
(First and Last Name)

Partner Organization

Partner Street Address

City/County/State

Authorized Signer Name

Tax ID Number

Contact Phone Number

Contact Email

501(c)(3)	Yes	No
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Does the proposal include multiple properties?	Yes	No
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**If the applicant has selected yes,
complete the table in Attachment A.**



OCIC
OHIO CAPITAL
IMPACT
CORPORATION

An Affiliate of Ohio Capital Corporation for Housing



Funding Request

Program/ Project Name

Total Program Budget

Requested Amount

Grant Period From

Grant Period To

Proposed Number of Residents Served

Zip Code of Proposed Project Served

Describe your
proposal in 300
characters or less.

Describe the property
and residents of the low
income housing tax credit
property affiliated with
OCCH.



IMPACT

Please refer to the 2020 Digital Inclusion Fund Application Guide for guidance on the evaluation criteria that OCIC will use to review your application.

1.1 Program Design

Please describe the problem or need your proposal will address. Detail goals you hope to accomplish, and how the activities will have a meaningful impact on residents' lives.

1.2 Program Design

Describe how your program or service is designed to make an impact on the problem or need identified. Point to the specific activities you will undertake to bring about desired changes.

Applicants must complete the table in Attachment B.

1.3 Program Design

Describe if or how your program will continue once Digital Inclusion Funds have been expended.

1.4 Program Design

Describe any outreach efforts to residents that have occurred to date. Discuss how you will recruit residents and engage them in the activities described above.

1.5 Measurement of Key Indicators and Performance Metrics

Describe your ability to connect strategy to outcomes through a plan for monitoring and assessment of key indicators and performance metrics. Impact outcomes must be more robust than number of residents served.

NOTE TO APPLICANTS: OCIC staff will work with partners to create a measurement plan that will include a small set of critical measures and other indicators of performance. This approach will enable OCIC and grantees to assess how well funded programs are working to achieve short term, intermediate, and long-term success.

If awarded, do you agree to report to OCIC on key indicators and performance measures?	Yes
	No



2.1 Equipment Longevity

Please describe the plan for the security and longevity of equipment and service provided.

2.2 Ease of Implementation

Describe how there will be fairness in how the technology is distributed and the number of residents served. Describe your plan for ease of implementation.



2.3 Efforts to Achieve Value

Describe your efforts to achieve value, such as tapping into economies of scale in purchasing.



3.1 Staffing and Qualifications

Identify the members of the program team and their qualifications, including those team members from organizations other than the applicant. Discuss the track record of each organization as it relates to the services or programming in this proposal.

3.2 Current Services Offered

Describe any services or programming currently being provided to residents. If a service coordinator is available to the property, describe if the professional is located on site and how frequently they are in contact with residents.



4.1 Linkage to Existing Service Providing Agencies

Describe efforts to coordinate with existing service providing agencies in your community. Distinguish those activities that are the direct responsibility of the grantee from those that will be conducted by related programs or partner organizations.

4.2 Linkage to Existing Service Providing Agencies

If partnering with another organization, describe their history and experience relevant to the population to be served and the grant activities proposed.



Applicants must provide a detailed budget using the template provided in Attachment C.
Please use the space below to provide an explanatory narrative.

Provide an explanatory
narrative of the proposal
budget.