**VCTC 2024 CALL-FOR-PROJECTS**

**FOR FTA 5310, FTA 5307 JARC, and CPUC AFA Funds**

**Project Application**

**Project Applicant Information**

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| **Lead Agency or Organization:** | | | | |
| **Mailing Address:** | | | | |
| **City:** | | **State:** | | **Zip:** |
| **Contact Person Name:** | | | **Phone:** | |
| **Title:** | **E-mail:** | | | |
| **Applicant Eligibility (check all that apply):**   * **Private Non-Profit Organization** * **State or Local Government** * **Public Transportation Operator** * **Other:** | | | | |
| **APPLICATION SIGNATURE (Required)** The undersigned affirms that the statements contained in the application package are true and complete to the best of their knowledge.  **Name:**  **Title:**  **Phone Number and Email:**  **Authorizing Signature – Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | |

**Project Information**

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| 1. **Project Title:** |
| 1. **Brief Project Description:** |
| 1. **Project Type: (Check all that apply)**   **Traditional Section 5310 project examples include:**   * buses and vans * wheelchair lifts, ramps, and securement devices * transit-related information technology systems, including scheduling/routing/one-call systems * mobility management programs which can include travel training and volunteer driver programs * acquisition of transportation services under a contract, lease, or other arrangement * Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   **Nontraditional Section 5310 project examples include:**   * travel training * volunteer driver programs * building an accessible path to a bus stop, including curb-cuts, sidewalks, accessible pedestrian signals or other accessible features * improving signage, or way-finding technology * incremental cost of providing same day service or door-to-door service * purchasing vehicles to support new accessible taxi, ride sharing and/or vanpooling programs * mobility management programs * Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   **JARC project examples include:**   * projects designed to transport low-income persons or welfare recipients to jobs and employment-related activities. * projects designed to transport workers to suburban employment opportunities. * Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   **Access-for-All project examples include:**   * Wheelchair accessible vehicle(s) * WAV service * Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. **Is the proposed project consistent with the VCTC Coordinated Public Transit-Human Services Plan** <https://www.goventura.org/wp-content/uploads/2022/07/ITEM-10_ATTACHMENT-COORDINATED-PUBLIC-TRANSIT-HUMAN-SERVICES-TRANSPORTATION-PLAN.pdf>      * **Yes** * **No**   **Check all Coordinated Plan Prioritized Strategies that this Project Addresses (page 84):**  **1.1 \_\_\_\_\_ 1.2 \_\_\_\_\_ 1.3 \_\_\_\_\_ 1.4 \_\_\_\_\_**  **2.1 \_\_\_\_\_ 2.2 \_\_\_\_\_ 2.3 \_\_\_\_\_ 2.4 \_\_\_\_\_**  **3.1 \_\_\_\_\_ 3.2 \_\_\_\_\_ 3.3 \_\_\_\_\_ 3.4 \_\_\_\_\_ 3.5 \_\_\_\_\_**  **4.1 \_\_\_\_\_ 4.2 \_\_\_\_\_ 4.3 \_\_\_\_\_ 4.4 \_\_\_\_\_**  **5.1 \_\_\_\_\_ 5.2 \_\_\_\_\_ 5.3 \_\_\_\_\_ 5.4 \_\_\_\_\_ 5.5 \_\_\_\_\_**  **6.1 \_\_\_\_\_ 6.2 \_\_\_\_\_ 6.3 \_\_\_\_\_ 6.4 \_\_\_\_\_** |
| 1. **US Census Urbanized/Rural Areas served by the project (see map and check all that apply):**  * Oxnard/Ventura/Port Hueneme/Ojai/Point Mugu/Ojai Valley * Thousand Oaks/Moorpark/Conejo Valley/Santa Rosa Valley/CSUCI * Simi Valley * Camarillo/Somis * Rural (includes Santa Paula, Fillmore, Piru, Upper Ojai)   Note: if the project will expand your current service area, please explain how:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. **If selected for funding, will the applicant sign an agreement to meet all reporting and other requirements of the grant, (for example for FTA funding activities such as record keeping, reporting, civil rights, ADA, preventative maintenance, competitive procurement, and Buy America, plus allowable overhead rate of 10% for private non-profits only) for items funded through this grant?**  * Yes * No |

**7. Financial Request Information:**

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| --- | --- | --- | --- | --- | --- | --- |
|  | **5310** | **JARC** | **AFA** | **Matching Funds** | **Other Funds** | **Total Project Cost** |
| **FY 24/25** | $ | $ | $ | $ | $ | $ |
| **FY 25/26** | $ | $ | $ | $ | $ | $ |
| **Total** | $ | $ | $ | $ | $ | $ |

Source of Local Match:

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

1. **Public Agency Transit Operators (For 5310 Projects Only)**:

Do you know of any nonprofit organizations that are readily available in your service area to provide the proposed service?

* Yes
* No

**Project Screening Information**

**I. GOALS AND OBJECTIVES** *(Maximum 20 points)*

1. Briefly describe how your project addresses the gaps and barriers identified in the VCTC Coordinated Public Transit-Human Services Plan (reference item or page number):
2. Briefly explain how the project increases or enhances availability of transportation specifically for the targeted population. An estimate of the total number of trips provided or the total number people assisted by this project is required.

**II. PROJECT IMPLEMENTATION PLAN (***Maximum 30 points***)**

1. Describe your operational plan, including a breakdown of the project tasks, staffing, deliverables, costs per task, and timeline. This is required for all projects, new as well as on-going projects and for all funding types. (If the grant funds will be used to pay for staff time, please use a separate line for each staff person making sure to note the tasks they will be performing, deliverables, hours, costs and start and completion dates.)

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| --- | --- | --- | --- | --- |
| **SCHEDULE**  *(month/year)* | | | | |
| **Project Tasks and Key Personnel** | **Deliverables** | **Cost** | **Start Date** | **Completion Date** |
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**III. PROGRAM PERFORMANCE INDICATORS** *(Maximum 20 points)*

1. What are the performance goals of this project? Provide the following for all fields that apply to your project and proposed funding type:

* Total Amount of Grant Funds Requested divided by the total number of estimated one-way trips provided over the life of the project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  + (*Note: for vehicle purchase projects the total life of the project is defined as the useful life of the vehicle e.g. 5 years for a van or 12 years for a bus).*
* Total Amount of Grant Funds Requested divided by total number of trips to jobs to be provided over the life of the project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Schedule Coordination and Service Level Projects:
  + Current number of one-way trips provided (per month): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  + Total Amount of Grant Funds Requested divided by the Total number of estimated one-way trips provided over the life of the project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  + Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Requested grant funds divided by revenue miles: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Total grant funds divided by the number of seniors and persons with disabilities provided with transportation assistance over the life of the project (e.g. Travel Training projects, Trip-Planning projects, schedule coordination assistance, Voucher/Ticket Programs etc…): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Total Grant Funds divided by other indicators (as appropriate): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IV. COMMUNICATION AND OUTREACH** *(Maximum 20 points)*

1. Briefly describe the public outreach activities undertaken to develop the scope of work for the proposed project. Also, list and attach letters of support for the proposed project (e.g. Health and Human Services Agencies, public and/or private sector, non-profit agencies, transportation providers, seniors and the disabled, employee groups, etc.).

**V. EMERGENCY PREPAREDNESS** *(Maximum 5 points)*

1. Describe the emergency planning and drill activities within your agency and in cooperation with the county. Indicate the drill(s) you have participated or are scheduled to participate.

**VI. MATCHING FUNDS** *(Maximum 5 Points)*

1. A maximum of 5 points will be awarded to projects providing 20% or more in matching funds. Private nonprofit organizations will automatically be awarded five (5) points for match under these scoring criteria. Please identify below your proposed project’s match strategy or your non-profit status:

**Bonus Points for Non-Transit Operator Applicants**: Eligible projects submitted by non-profit transit operators will receive an additional five (5) points in the scoring criteria. For the purposes of this criterion “transit operators” are defined as agencies that receive from VCTC as a matter of course, a share of 5307 funds for on-going transit services.

* **Applicant is a non-profit and non-transit operator**
* **Applicant is a private or public transit operator**

**Application Submittal Instructions**

**Submission Deadline:**

Completed applications along with all the required materials must be received at the VCTC by e-mail to [gvelasquez@goventura.org](mailto:gvelasquez@goventura.org) by **July 26, 2024, at 5:00 pm.**

**Application Form**:

The application is formatted for applicants to write and work directly in the document; however the applicant may make minor formatting adjustments to the document as necessary for the purpose of including tables, photos, or other materials that aid in completing each section. Alternatively, labeled photos or other information may also be attached to the back of the application. Be sure to reference the Application Question Number on the Attachment

**For Electronic Submission:**

* Please combine all pages of the application into one PDF.
* Submit the PDF of the application to [gvelasquez@goventura.org](mailto:gvelasquez@goventura.org)
* The pdf must be able to be printed on 8.5” x 11” paper.
* The application must be signed.
* Please label the e-file beginning with the name of your organization and the project title. For example: ABCOrganization\_Wheelchair\_Accessible\_Van\_Purchase\_Project
* If you are submitting more than one application, please submit one PDF for each application.