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| DAD-BEBD-012.docs (rev. 12/2023) |
|  | Wisconsin Department of Agriculture, Trade and Consumer ProtectionDivision of Agricultural Development2811 Agriculture Drive, PO Box 8911, Madison, WI 53708-8911Phone: 608.590.7239 |
| Wisconsin Farm to School Grant Application | s. 93.49 Wis. Stats. |
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| FULL LEGAL NAME OF APPLICANT      |
| CONTRACT SIGNER NAME       | CONTRACT SIGNER TITLE       |
| STREET ADDRESS      | CITY      | STATEWI | ZIP      |
| MAILING ADDRESS (IF DIFFERENT FROM STREET ADDRESS)      | CITY      | STATEWI | ZIP      |
| PROJECT COORDINATOR      | PROJECT COORDINATOR TITLE       |
| BUSINESS PHONE: (   )     -      | E-MAIL      |
| PROJECT TITLE      |
| COUNTY OF PROJECT LOCATION:      | COUNTIES IMPACTED BY PROJECT WORK:       |
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| Grant Request: $       |
| Certification: I certify to the best of my knowledge that the information in this application is true and correct and that I am legally authorized to sign and submit this application on behalf of this organization, which is legally eligible to enter into a grant contract. |
| AUTHORIZED SIGNATURE (TYPED SIGNATURE IS ACCEPTABLE)      | TITLE      | DATE      |
|  |
| Lead Applicant Category: Choose the appropriate category for the lead applicant |
| [ ]  K-12 School/School District |
| [ ]  Early Childcare Education (ECE) Center |
| [ ]  Afterschool Youth Program |
| [ ]  Other Youth Program that serves local food or provides agricultural/food education  |

Completing this form is required to apply for a Wisconsin Farm to School Grant. Personally identifiable information you provide may be used for purposes other than that for which it was collected. Wis. Stat. § 15.04(1)(m).

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| Wisconsin Farm to School Project Narrative |
| Project Description: The project description must include a summary of the project suitable for the public and should be limited to 500 characters. It should be a self-contained description of the project. (500 characters) |
|       |
| Project Category: Choose the appropriate category(ies) for this project *(check all that apply)* |
| [ ]  Build/expand farm to school team |
| [ ]  Develop farm to school plan |
| [ ]  Increase capacity to prepare and serve local food |
| [ ]  Increase local procurement |
| [ ]  Increase agricultural education |
| [ ]  Other farm to school effort. Please describe in one sentence: |
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| Farm to School Background: Describe past and current farm to school activities, practices, developments and efforts. |
|       |
| Project Justification: Describe the project need or opportunity. If proposing to fund an existing effort or program, describe how this will increase or expand current farm to school programs. Describe how this project will achieve farm to school goals.       |
| Project Team: List all key partners directly involved in the project and farm to school activities. Outline their role in the project. Highlight the team’s (you and partners’) expertise or experience working together and describe how it is relevant to this project.  |
|       |
| External Project Support: Describe how this project is supported by the community and external partners not directly involved in the farm to school team. Discuss how external partners will be engaged.  |
|       |
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| Work Plan: Describe the major steps/activities needed to complete your project, who is responsible for the step, and the timeline for each step/activity. *(add/subtract lines as necessary)*  |
| **Project Activity** | **Who** | **Timeline** |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
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| Measurable Outcomes & Impact: Based on the type of project that you are undertaking, please describe what outcomes will result of this project. Provide both short term impacts/deliverables and long term results/goals. Discuss who will benefit and how they will benefit. Describe how this project will result in farm to school activity(ies) that will continue after the grant ends.  |
|       |
| ***Project Management:*** Describe the systems, policies and plans in place to ensure effective partner engagement and leadership. Describe the process or plan for ensuring that the project stays on track and results in findings that can be shared. |
|       |
| Project Evaluation: Describe your plan to document success, project achievements, challenges and next steps. Describe how both quantitative data and qualitative success stories will be gathered. Outline what types of formats will be utilized (example include but are not limited to: written, visual, audio and video formats) and how they will be used in the project.  |
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| Project Budget  |
| Grant budgets can range up to $40,000. *Add or subtract budget lines as necessary. Indirect costs are not allowable.* |
| **Personnel** |
| **Name & Position** | **Salary/Hourly Rate** | **% time/# of Hrs.** | **Fringe & Fringe Rate** | **Matched** | **Requested** | **Total** |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
| Personnel subtotal |       |
| **Travel** |
| **Description** | **Miles** | **Rate** | **Matched** | **Requested** | **Total** |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
| Travel subtotal |       |
| **Equipment (under $5,000)** |
| **Description** | **# of items** | **Cost per item** | **Matched** | **Requested** | **Total** |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
| Equipment subtotal |       |
| **Supplies** |
| **Description** | **# of items** | **Cost per item** | **Matched** | **Requested** | **Total** |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
| Supplies subtotal |       |
| **Contractual** |
| **Contractor & description of services** | **# of hours/units** | **Rate** | **Matched** | **Requested** | **Total** |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
| Contractual subtotal |       |
| **Other** |
| **Description** | **# of items** | **Cost per item** | **Matched** | **Requested** | **Total** |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
| Other subtotal |       |
| **Grant Budget Total** |       |

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| Budget Justification: Describe every single project expenses listed in the budget table above. Provide a description and justification for both matched and requested budget line items. List additional details and explanation for each expense. Explain how each expense is necessary and how it will help achieve project goals. Add lines as necessary.**Personnel** |
|      **Travel**     **Equipment (under $5,000)**     **Supplies**     **Contractual**     **Other**      |