

2019-2020

CITIES, COUNTIES, AND OTHER GOVERNMENT ASSOCIATIONS - INNOVATION FUNDING

Eligibility requirements

To be eligible for Innovation Funding:

- The applicant organization must be:
 - A Sourcewell member city or county;
 - Located within the geographic boundaries of Region 5, which includes the Minnesota counties of Cass, Crow Wing, Morrison, Todd, and Wadena;¹
 - That has not received Innovation Funding for the proposed project for the previous two (2) years.
- The proposed project must:
 - Fall within the scope of Sourcewell's enabling statute, Minnesota Statutes § 123A.21, subdivision 7, and serve a public purpose as defined on the attached Public Purpose Checklist;
 - Depend on Sourcewell funding for no more than one (1) year;
 - Be collaborative and regional in nature, benefiting more than one organization;
 - Be innovative, which means it must cause a change in process, approach, product, or service that produces better results; and
 - Not involve:
 - Lobbying, political, or religious activities;
 - Discrimination or illegal activities;
 - Mandated work; or
 - Funding for operating Costs.
- An Innovation Funding application must:
 - Be submitted by the **Application Deadline: May 8, 2019**;
 - Include all required information and attachments, including:
 - A signed resolution in support of the project from the governing body of the applicant city or county and, if applicable, each collaborating city and county; and
 - A completed Public Purpose Checklist (see attached); and
 - Request funding for no more than one (1) year.

Application review process

Step 1: Sourcewell staff and CCOGA Advisory Committee will initially review each application to ensure the criteria outlined above have been met. Applications that do not meet the criteria will be eliminated from the review process.

Step 2: Applicants that pass the initial review will have an opportunity to present their projects to their peers on **Innovation Funding Review Day: May 22, 2019**. Representatives from each city and county in attendance will then vote for the project(s) they believe merit Innovation Funding. Each entity will receive one vote, and projects will be ranked according to the votes. Award recipients will be announced at the end of the day, but no funds will be granted or guaranteed until Step 4 is complete.

¹ If the proposed project is a collaborative effort between two or more cities or counties, the application must be submitted by a city or county that is a Sourcewell member willing and able to act as fiscal host and project manager.

Step 3: At the June meeting of the Sourcewell Board of Directors, Sourcewell staff will present the voting results from Innovation Funding Day for approval.

Step 4: Upon approval by the Sourcewell Board, Sourcewell staff will provide an Innovation Funding Agreement and further instructions to each award recipient.

CONTACT INFORMATION

For more information about Sourcewell, Innovation Funding, or this application, please contact Anna Gruber at 218-895-4135 or anna.gruber@sourcewell-mn.gov.

Completed applications can be submitted by email to: anna.gruber@sourcewell-mn.gov or by U.S. Mail to:

Innovation Funding Program
Sourcewell
Attn: Anna Gruber
202 12th St. NE, P.O. Box 219
Staples, MN 56479

INNOVATION FUNDING APPLICATION

Organization Information

1. Please provide the following information for the city or county that will serve as physical host and project manager:

City/County Name:

Tax ID Number:

Physical Address:

Mailing Address:

Website:

Project Point of Contact Name, Email Address, and Telephone Number

2. Please provide the following information for each city and county that will collaborate on the project:

City/County Name:

Tax ID Number:

Physical Address:

Mailing Address:

Website:

Project Point of Contact Name, Email Address, and Telephone Number

Attach a resolution in support of the project from each city or county's governing body. A sample resolution is attached.

Project Information

Please provide the following information specific to the proposed project:

3. Project title.

4. A description of the proposed project, including, but not limited to: (a) the population and geographic region to be served; (b) how the project will impact Region 5; and (c) whether and how the project can be replicated to serve other cities and counties in Region 5 and beyond.

5. A description of the public purpose the project will serve and how.

Attach a completed Public Purpose Checklist to support the statements above.

6. An overview of action steps and a proposed timeline.

7. An explanation of how the project is innovative. (I.e. How will it result in a changed process, approach, product, or service that produces better results?)

8. If you plan to hire staff or consultants to assist with the project, whether the individuals have been identified, their names, and an explanation of their roles and responsibilities.

9. If the project involves the purpose of equipment to be shared regionally, a detailed description of the process you will use to share the equipment, whether and how the cost of any insurance and liabilities policies will also be shared, and whether you will charge other entities to participate in the sharing.

NOTE: if these topics are not addressed in the resolutions from collaborating cities and counties named in #2 above, please attach a separate resolution from each city and county pledging their support of the plan outlined here.

10. At least three (3) specific project goals.

11. At least three (3) benchmarks to measure progress toward the goals listed above.

Please provide the following information regarding project costs and funding and complete the budget table below.

12. The amount requested from Sourcewell.

13. If Innovation Funding is approved, a description of specifically how it will be used to support the project.

14. Other sources of funding, not including in-kind donations, and amounts received from each.

15. If the project is expected to continue beyond one year, a description of how it will be financially sustained if Innovation Funding is received in Year One.

16. Complete the table below to explain, in detail, the annual costs related to the project and the source of funds proposed to cover that cost. Insert additional lines to identify, with specificity, other costs related to the project.

	Innovation Funding	Other Sources	TOTAL
Wages and Benefits			
Taxes, Insurance, and Related Costs.			
Equipment			
Supplies			
Consulting Fees			
Meeting Expenses			
Travel for Participants			
Travel for Staff/Consultants			
Postage, Printing, Advertising, etc.			
Training and Seminars			
In-kind Donations	N/A		
Other			
Other			
TOTAL COSTS			

Organizations must not depend on Innovation Funding for more than one (1) year.

Certification

I certify that the information contained in this application and in any related attachments is true and correct to the best of my knowledge and belief, and that I have the authority to apply for Innovation Funding in the amount requested.

I further certify that if Innovation Funding is awarded pursuant to this application, my organization will execute the Innovation Funding Agreement prior to receiving or expending any funds.

Finally, I certify that no funds awarded as a result of this application will be used to pay capital expenses, costs incurred prior to receipt of the award, or loans or reimbursement to individuals or businesses; or to fund political, religious activities, discriminatory, or illegal activities.

Signature

Signature

Printed Name

Printed Name

Title

Title

Organization

Organization

Date

Date

Add signature blocks as needed to include a signature for each collaborating organization.

SAMPLE BOARD RESOLUTION

BOARD RESOLUTION

At the meeting of the [insert name governing body of city or county] on [insert date of meeting], the following resolution was proposed and approved:

Be it resolved:

That the [insert name of governing body of city or county] fully supports the city or county in collaborating with [insert name of collaborating cities and counties] in implementing [insert title of project] to [insert description of project]. The [insert name of governing body of city or county] further supports the city or county in submitting an Innovation Funding application to Sourcewell to request financial support for [insert title project].

Signed: (President) or (Chairperson)

PUBLIC PURPOSE CHECKLIST

1. Will the proposed project promote public health, safety, general welfare, security, prosperity, or the contentment of a community as a body?

_____ If No, **STOP**. Public expenditure is not authorized because the project will not further a public purpose.

_____ If Yes, identify which of these purposes will be furthered by the project and how, and continue to Step 2.

2. Will the proposed project primarily benefit the public and not private individuals or entities?

_____ If No, **STOP**. Public expenditure is not authorized for projects that primarily benefit private individuals or entities unless that benefit is only incidental to the project.

_____ If Yes, identify the population that will benefit from the proposed project, and continue to Step 3.

3. Will the proposed project involve any of the programs and services Sourcewell may provide by enabling statute, including, but not limited to: (1) administrative services; (2) curriculum development; (3) data processing; (4) distance learning and other telecommunication services; (5) evaluation and research; (6) staff development; (7) media and technology centers; (8) publication and dissemination of materials; (9) pupil personnel services; (10) planning; (11) secondary, postsecondary, community, adult, and adult vocational education; (12) teaching and learning services, including services for students with special talents and special needs; (13) employee personnel services; (14) vocational rehabilitation; (15) health, diagnostic, and child development services and centers; (16) leadership or direction in early childhood and family education; (17) community services; (18) shared time programs; (19) fiscal services and risk management programs, including health insurance programs providing reinsurance or stop loss coverage; (20) technology planning, training, and support services; (21) health and safety services; (22) student academic challenges; and (23) cooperative purchasing services?

_____ If No, **STOP**. Innovation Funding cannot be awarded for projects that do not involve the programs and services outlined in the enabling statute.

_____ If Yes, identify the programs and services the proposed project will involve, and continue to Step 4.

4. Can the proposed project be implemented in a manner that ensures no conflicts of interest exist or any existing conflicts may be resolved?

_____ If No, **STOP**. Public expenditure is not authorized for any project that may involve conflicts of interest.

_____ If Yes, identify any conflicts of interest that have been resolved and how, and continue to Step 5.

5. Will the proposed project serve the best interests of Sourcewell and Region 5?

_____ If No, **STOP**. Public expenditure not authorized when it may conflict with the best interests of the public entities involved.

_____ If Yes, describe how and continue to Step 6.

6. Is the proposed project permitted under the laws, rules, or policies that govern the city or county and Sourcewell?

_____ If No, **STOP**. Public expenditure is not authorized when it may conflict with the laws, rules, or policies that govern the public entities involved.

_____ If Yes, continue to Step 7.

7. Will Sourcewell and the collaborating organizations be able to satisfy all terms, conditions, policies, procedures, and other requirements associated with the proposed project?

_____ If No, **STOP**. Public expenditure is not authorized for any project that will prevent the public entities involved from complying with any associated requirements.

_____ If Yes, continue to Step 8.

8. Will the proposed project be implemented in a manner that ensures no public funds will be used to purchase or make a gift, donation, prize, or payment for dues to participate in a private organization?

_____ If No, **STOP**. Public expenditure is not authorized for these activities.

_____ If Yes, the proposed project serves a public purpose.