## City of Rockville

# Eligibility Questions

Thank you for choosing to apply for the Community Services and Enrichment Grant Program. The City of Rockville provides grants annually to local organizations that partner with the city to support community services and enrichment in the city. **Only organizations that**provide community services and/or enrichment programs to

individuals residing in the corporate city limits of Rockville are eligible to apply. If there are any

individuals residing in the corporate city limits of Rockville are eligible to apply. If there are any eligibility requirements your organization or program does not meet, it is not eligible for the City of Rockville Community Services and Enrichment Grant

Program. Please complete the following eligibility quiz to determine your program's eligibility for this grant.

# Is your organization a 501(c)(3) that provides services and/or programs to Rockville residents?\*

To determine if your organization serves individuals residing in the corporate city limits of Rockville, use the Rockville Address and Residency Check featured map to view the city limits of Rockville and check the Rockville residency status of an address.

#### **Choices**

Yes

No

# Required Attendance: Application Technical Assistance Session\*

To encourage the submission of quality applications, a staff member from all applicant organizations must attend one of the mandatory technical assistance sessions, held virtually. Please select a specific session you want to attend or have already attended.

#### Choices

Undecided, but plan to attend one of these sessions.

Tuesday, September 9th, 10:00-11:00a.m.

Wednesday, September 17th, 2:00 – 3:00 p.m.

Wednesday, September 24th, 4:00 – 5:00 p.m.

# Required Supplemental Documents\*

During the application process, your program will be asked to provide the following supplemental documentation (please check each to acknowledge that you can provide those documents):

### Choices

Audit, Financial Statement, or compilation for most recent completed operating year.

IRS Form 990 for most recent completed operating year.

Board Roster identifying officers, term limits, addresses, and phone numbers.

Report from the last formal and/or informal evaluation of the program (if applicable).

Printed On: 21 July 2025

Document of Application Submission Authority signed by the Executive Director and Board President.

# **Grant Requirements**

If your application is approved, there are reporting and insurance requirements that your organization must comply with. Please review the requirements below and acknowledge the appropriate measures by which your organization can comply with these requirements.

Note that reporting standards may differ for some programs, depending on the type of unit of service provided and program – project timeline.

# If your application is approved, will you be able to provide supporting documentation with invoices?\*

Please be aware that quarterly invoices submitted by you in this Community Services and Enrichment Grant Program, should your program be funded, will be reimbursements for expenses incurred per your grant budget. Therefore, when creating your program budget, please keep in mind that we will require receipts and documentation of expenses you have incurred in the quarter for which you are invoicing.

### **Choices**

Yes

No

# If your application is approved, will your organization meet the following reporting deadlines?\*

- Quarter 1 (July 1 through September 30, 2025): Report after October 1, 2025
- Quarter 2 (October 1 through December 31, 2025): Report after January 1, 2026
- Six-month program measures report due January 15, 2026
- Quarter 3 (January 1 through March 31, 2026): Report after April 1, 2026
- Quarter 4 (April 1 through June 30, 2026): Report after July 1, 2026
- Year-end program measures report after July 4th, 2026

Note that reporting standards may differ for some programs, depending on the type of unit of service provided and program – project timeline. Specific deadlines for reports will be confirmed in awarded grantee agreements once adopted by Mayor and Council.

#### Choices

Yes

No

## Communication Requirements\*

If your application is approved, your organization will meet the requirement that all communication from the City of Rockville must receive a reply from your organization within 10 weekdays.

#### Choices

Yes

No

## Health Insurance Portability and Accountability Act (HIPAA) Compliance\*\*

## The Community Services and Enrichment Grant

**Program** requirement is that your program serves Rockville residents living within the city limits. The City of Rockville will require you to provide client identifier (i.e. client initials or case number, NOT the name of the client) with client address to verify the Rockville residency of some of your service population. If your application is approved, your organization will be required to comply with HIPAA regulations if your agency is a healthcare provider. If your agency is not a healthcare provider, your clients need to consent in someway to their address being provided to the City of Rockville for grant reporting requirements.

By clicking yes below, you understand and agree that you will be solely responsible for developing, implementing, and obtaining from all of your clients a signed authorization that will enable you to use or disclose personal client information in order to obtain payment from your funders, to verify service utilization, and for other operational purposes.

#### Choices

Yes

No

## Insurance Requirements\*

If your application is approved, your organization will meet the below requirements for insurance coverage:

Prior to the execution of the contract by the City, the Grantee must obtain at their own cost and expense and keep in force and effect during the term of the contract including all extensions, the following insurance with an insurance company/companies licensed to do business in the State of Maryland evidenced by a certificate of insurance and/or copies of the insurance policies. The Grantee's insurance shall be primary.

Grantee's insurance coverage shall be primary insurance as respects the City, its elected and appointed officials, officers, consultants, agents and employees and any insurance or self-insurance maintained by the City shall be excess of the Grantee's insurance and shall not be called upon to contribute with it.

View the City of Rockville insurance requirements here.

### Choices

Yes

No