



Friends of CASA Grant Request Instructions

GRANT SUBMISSION INSTRUCTIONS

1. Save the grant request form with name of 'YYMMDD_DependencyCaseNumber'.
Example: A grant request created on December 1, 2021 for dependency case SEA 12-9-99999-9 would be named '211201_SEA129999999.pdf'
2. Complete the grant request form and submit to your CASA Supervisor for approval.
3. Enter your CASA Supervisor's name and date of approval on the form.
4. Email the completed form to liaison@friendsofcasakc.org with subject line "FUNDING REQUEST for X-X-XXXXX-X \$999" and cc: your CASA Supervisor and Kathy.McCormack@kingcounty.gov. Your supervisor may send the form on your behalf.

GRANT FORM INSTRUCTIONS

Grant Purpose

- Provide the dependency case number(s) and child(s) initials. Please *do not use* full names.
- Provide a brief summary of why this grant is required and how it will directly benefit the child(ren)'s wellbeing or support the goal of achieving permanency for the child(ren).

Grant Amount Requested

- Provide the total cost related to the requested services, products or goods being requested and the amount you are requesting from Friends of CASA (FOC).
 - For example, if a service costs \$500 and DCYF is paying \$250, the Total would be \$500 and FOC Grant \$250. If no other parties are involved, enter the same amount in both fields.
- Briefly note sources that have been asked but declined to provide funding (e.g. DCYF, Treehouse, etc.). Remember to explore DCYF [concrete funds \(https://www.dcyf.wa.gov/4500-specific-services/4519-concrete-goods\)](https://www.dcyf.wa.gov/4500-specific-services/4519-concrete-goods) with your social/case worker.

Payment Method

- Select 'FOC Purchase/Pay Provider' if you are requesting Friends of CASA:
 - Pay a service provider or company directly. This is typical for items such as therapeutic services, attorneys, rent and utilities, etc..
 - Purchase goods for delivery to the caregiver/child. This is typical for household goods, special equipment, etc..
 - Use 'Special Instructions' to specify whether the provider will invoice FOC and how frequently (e.g. monthly) or other non-standards instructions, as needed.
 - Example: 'Therapist will invoice FOC monthly.' or the 'Attorney will send a final bill upon completion of services, expected to be in January 2022'.
 - Example: 'Rent check should be made out to XYZ Company and sent to caregiver to deliver to rental office'.
- Select 'Gift Card' to request a gift card. This option should be used when exact costs can be estimated but aren't known exactly in advance (e.g. purchasing clothing).
 - Provide the preferred retailer in Direct Purchase: Store Name field (e.g. Walmart).
- Select 'Reimburse Caregiver' to request a caregiver or other entity be reimbursed for an expense that has already been incurred. A copy of the receipt must be attached.
 - *Note:* This option is NOT recommended as grant approval is not guaranteed.
- Attach additional documentation such as receipts, etc. as appropriate.

FOC PURCHASE INFORMATION

- This section only applies to product purchases and gift cards.
- Skip this section if you are requesting Friends of CASA pay a service provider or reimburse a caregiver.
- For a product(s) purchase, specify the product name(s) and provide a link to the requested product(s).
- For a gift card, provide the name of the preferred store/vendor.

DELIVERY INFORMATION

- In this section, specify where payment or goods will be sent.
- If Friends of CASA is paying a service provider or company for services:
 - The Payee Name is the name to be printed on a check. This is typically a business name.
 - Enter the Name, Email Address and Phone Number of the person to be contacted in the event we have questions or need additional information to fulfill the request. This is typically the provider themselves or someone at the provider's office.
 - The company or provider's website is optional but helpful in the event we need to follow-up or request further information for payment. If the vendor is requesting electronic payment via an online payment site, that link should be entered here.
- If Friends of CASA is purchasing the product(s) enter the name, delivery address, email address and phone number of the person (e.g. the caregiver) to whom the purchased items should be delivered or sent.
- Gift cards will be sent electronically to the named contact and email address specified. This is typically the caregiver.
 - If the retailer does not support eGift Cards the gift card will be sent to the mailing address.
 - If you need a physical Gift Card or the card will be picked up by another party specify this in 'Special Instructions'.
 - Example: *'Caregiver doesn't have email access so a physical gift card is requested.'* In this case, provide caregiver name and mailing address.
 - Example: *'The SW or CASA will pick up the gas card and deliver to the family.'* In this case, provide SW/CASA name and contact information (email, phone).

Demographics

- While optional, this information helps us better understand the profiles of the children Friends of CASA is helping support and identify overall trends related to placement.
- This information is not considered in determining whether or not to approve a grant request.

Questions

If you have questions while filling out this form, please consult with your CASA Supervisor. If they are not able to address the question, inquiries can also be sent to liaison@friendsofcasakc.org.