CSBG Subgrantee Application Form

Please complete the following application to be considered for a CSBG subgrant. Submit your completed form and all attachments by May 15th 2026.

1. Organization Information

• Organization Name:

• EIN (Tax ID):

• Mailing Address:

• Phone Number:

• Website:

• Executive Director Name & Email:

2. Primary Contact for this Application

• Name:

• Title:

• Phone Number:

• Email Address:

3. Proposed Service Area (Carbon, Crook, Goshen, Niobrara, Washakie, Weston)

• List the counties your organization will serve:

4. Mission Statement

• Briefly describe your organization's mission and primary focus:

5. Program Description

• Describe the services your organization proposes to provide with CSBG funding. Including how services address local needs:

6. Target Population

• Describe the demographics and needs of the population you intend to serve:

7. Outcomes and Evaluation

• List 2-3 key outcomes you plan to achieve and how you will measure them:

8. Staffing Plan

• Describe the staff that will deliver these services. Include qualifications and FTE (full time equivalents):

9. Prior Experience with Federal/State Grants

• Who is your grant manager and briefly describe their experience managing grant funding:

10. Budget Summary

• Provide an estimated budget and attach a full budget narrative.

• Please format the budget as follows:

• CSBG Expenditures

• Agency Capacity Building (Professional Development, Travel to Professional Development)

• Employment (Client Services such as Coaching, Job Referrals, Employment Supplies)

• Education (Adult Ed, Before/After School Programs, Parenting Supports, College & K-12 School Supplies)

• Income, Asset Building (Financial Literacy, Coaching, Benefit Coordination, (Child Support, Vet Benefits, SSI/SSDI, TANF, etc)

• Housing (Deposits, Rent, Mortgage, Temporary Housing, Transitional Housing, Rental Counseling, Utility Payments, etc.)

• Health (Doctor Visits, Dentist Visits, Family Planning, Contraceptives, Substance Screenings, Mental Health Services, DV Services, Parenting Classes, Food Boxes or distribution)

• Civic & Community Involvement (Citizenship Classes, Volunteer Training, Leadership Training)

• Support Services (Case Management, Transportation, Identification Documents, Emergency Clothing)

• Linkages (Activities that build partnership related to community initiatives, collaborations, and staff time attending collaborative meetings)

• Memberships Supporting CSBG

• CSBG Conference Expenses

• CSBG Direct Salaries & Wages

11. Required Attachments Checklist

- ❑ Cover Letter
- ❑ Board Roster
- ❑ Budget & Narrative
- ❑ 501 (c)3 Document
- ❑ Most recent Financial Statement/990
- ❑ Organizational Chart
- ❑ Client Demographic Summary
- ❑ Wyoming Secretary of State Good Standing Certificate
- ❑ SAM.Gov Current registration
- ❑ Current Insurance Certificate ($1,000,000 each occurrence, $1,000,000 personal injury and advertising injury, $2,000,000 general aggregate, and $2,000,000 products and completed operations.)

12. Send Applications to:

• intake@wyohelp.com or

• WYO HELP, 1933 Main Street, Torrington WY 82240