



## **Request for Proposals**

### **Senior Center Program/Congregate Meals/Home Delivered Meals/Outreach Targeted Toward Minorities Age 60+**

**Goal:** To support Northeast Iowa Area Agency on Aging's efforts to provide senior programming, congregate meals and home delivered meals, and outreach to minorities age 60 years of age and older plus spouse regardless of age.

**Amount of funds available:** \$25,000 plus 15% match required (\$3,750)

Desired project location: Black Hawk County

Minimum project components that grantees must fulfill:

- Senior center based programming to improve the lives of older persons, including the preparation of a monthly program calendar
- Providing an appropriate location to hold daily congregate meals (NOTE: the meals provided by NEI3A)
- Coordinating a home delivered meal program including recruiting, training, scheduling of volunteers to deliver the meals (NOTE: the meals provided by NEI3A)
- Identify and contact older persons qualifying for services (outreach services)
- Make appropriate referrals to NEI3A for persons needing additional services
- Comply with required reporting requirements by NEI3A and federal, state, and local requirements including completing the Aging and Disability Network Consumer Intake Form one time a year on participants.
- Provide monthly rosters of participants and narrative report of findings, concerns, issues, solutions.

**Eligible applicants:** Single organization or a collaboration of organizations who are able to fulfill minimum project components.

**Project period:** July 1, 2023 – June 30, 2024

**Direct questions to:** Greg Zars, 319-874-6842 or [gzars@nei3a.org](mailto:gzars@nei3a.org)

**Submit one digital copy of your proposal to the following email addresses:**

[gzars@nei3a.org](mailto:gzars@nei3a.org)

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[kshannon@nei3a.org](mailto:kshannon@nei3a.org)

**Proposals due: May 30, 2023 by 12:00 noon to the NEI3A office**

Include the following:

- Cover Page
- Name and address of organization
- Name, telephone and e-mail address (if applicable) of the project contact person
- Title of project
- Narrative

Address the above-named requirements under minimum project components. Describe the capabilities and experience to carry out the specifications including staff members who would be working on this project, their qualifications and certifications. Describe any community services you would use to support required programming.

- Workplan with timelines
- Itemized Budget including 15% required match
- List of current Board members
- Copy of most recent audit