

Grants & Financial Assistance Approval Form

	Authorized Approver	Signature	Date	
*1	Department Director	Approved		
	Insert Name	By: Roberty Bowden		
Email form to Grants Development Supervisor to continue approval process in Workday (effective 3/19/2014).				
*Department Directors may provide signature on paper above <u>OR</u> wait to approve from Workday inbox.				

Following are the financial, programmatic, legal and procurement considerations for your review:

Today's Date: City Council Dat	e: Application Deadline: 20 June 2015			
Name of Grant: Florida Division of Cultural Affairs- General Program Support				
Short description of the project or program that will be pursued with grant funding:				
Programming at the gardens enhances the quality of life for the citizens of Orlando.				
Short description of the problem or need for the project or program:				
General operating budget support				
Anticipated timeline of project or program: Fiscal year 2015-2016				
Name of Initiating Department/Division/Office: Orlando Venues/Leu Gardens				
GOC Liaison Name: Kim Robinson	Telephone #: 3668			
Programmatic Considerations	Indicate Response Here			
1. How does the proposed project align with City's priorities and department's core services?	Programming at the gardens enhances the quality of life for the citizens of Orlando. The gardens serve over 149,000 visitors annually.			
2. Does the proposed project provide or expand essential services to address critical needs?	Yes. The grant will enable the gardens to offer quality educational programming for children and adults.			
3. Does the proposed project impact other City departments?	No.			
4. Does the applying department have the capacity to manage this project?	Yes.			
5. Does the applying department have the capacity to fulfill the financial and administrative requirements of the grant?				
6. Is this a collaborative effort with an externa organization?	1 No.			

Financial Considerations		Indicate Response Here
1.	What is the total anticipated project cost?	NA
2.	How much does the Department anticipate receiving from the grantor? If not receiving cash, include the value of property, equipment, or services.	Up to \$150,000
3.	What are the match requirements and funding source(s)?	\$1 for \$1, annual budget expenditures meet match.
4.	If applicable, identify the amount and funding source(s) that support the remainder of the project or program cost.	NA
5.	Will the grant be used to fund salaries, wages or benefits and other associated personnel costs?	No

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6.	Will the receipt of this grant cause the City to	No
	incur additional or future operating costs?	
7.	What is the CIP number and/or financial project	This is not a CIP project.
	number associated with this project?	
8.	Will this program generate revenue?	No.
9.	Is supplanting allowed?	
10.	Does the grantor require any special ways to manage the receipt of grant funds?	Quarterly reports.
11.	Does the grant require continuation of the project	No.
	or program beyond the grant period of	
	performance?	
Le	gal Considerations	Indicate Response Here
	Provide a short description of unique contract	NA
	requirements that the City Attorney needs to be	
	made aware of, or needs to clarify for the	
	Department before the Department applies for the	
	grant.	
Pr	ocurement Considerations	Indicate Response Here
1.	Provide a short description of any special	NA
	procurement requirements that need to be	
	disclosed and evaluated at the time of application.	
2.	Does the receipt of the grant involve the lease or	No.
	purchase of real estate? If so, please describe the	
	real estate need and add the Real Estate Division	
	Manager as an impacted department director, by	
	adding a row under the first department director	
	in the transmittal sequence on page one of this	
	form.	