

2020 – 2021

Hawaiian Home Lands Trust Grant

Project Implementation Grant Application – COVID-19 Relief

Request for Proposals number: RFP-21-HHL-001

Grant Deadline: 4:00 PM (HST), Wednesday, December 9, 2020

THIS IS NOT A POSTMARK DATE

Mailed applications must be received before or on the deadline and sent to:

Department of Hawaiian Home Lands
Project Implementation Grant – COVID-19 Relief (PLO)
PO Box 1879
Honolulu HI 96805

Hand delivered applications (includes private courier service such as Federal Express, United Parcel Service, etc.) must be received before or on the deadline at:

Department of Hawaiian Home Lands
Project Implementation Grant – COVID-19 Relief (PLO)
91-5420 Kapolei Parkway
Kapolei HI 96707

Project Implementation Grant applications will not be accepted at any Department of Hawaiian Home Lands (DHHL) District Office nor by fax or email.

Contact:

Ms. Gigi O. Cairel, Grants Specialist
Planning Office

Department of Hawaiian Home Lands

Mail address: PO Box 1879, Honolulu HI. 96805

Street address: 91-5420 Kapolei Parkway, Kapolei HI. 96707

Phone: 808.675.6682

Email: DHHL.Planning@hawaii.gov

Overview

The Department of Hawaiian Home Lands (DHHL) announces the availability of \$500,000 for competitive grant funds for the Project Implementation grant to support COVID-19 Relief efforts addressing the most urgent needs in the native Hawaiian community, including but not limited to food, housing, health or to provide support to manage the ongoing impact of the COVID-19 pandemic, including but not limited to technology for virtual work or education. The primary purpose of this grant is to rapidly deploy resources for immediate relief to beneficiaries of the Hawaiian Homes Commission Act (HHCA) of 1920, as amended, that are impacted during the COVID-19 pandemic. DHHL seeks projects that can demonstrate a measurable positive impact for HHCA beneficiaries in light of the COVID-19 pandemic.

Nonprofits are eligible to apply. Partnerships and teams consisting of beneficiaries and non-beneficiaries are encouraged to apply, provided that the project provides immediate relief for HHCA beneficiaries impacted during the COVID-19 pandemic. Maximum grant award per organization is \$200,000. Maximum grant time period to fully expend funds is 24 months.

Background

Native Hawaiian Development Program Plan (NHDPP) Every two years and pursuant to Hawaii Administrative Rules Chapter 6.1, DHHL prepares the NHDPP for review and approval by the Hawaiian Homes Commission (HHC). The NHDPP is also made available for public comment and beneficiary consultation. The current interim NHDPP was approved by the HHC in June 2020 for the period July 1, 2020 to June 30, 2022. The purpose of the NHDPP is to improve the general welfare and conditions of native Hawaiians through education, economic, political, social, cultural, and other programs. The NHDPP is important because it enables DHHL to implement programs and services covering Individual Development and Community Development for the beneficiaries served by the Hawaiian Home Lands Trust.

Hawaiian Home Land Trust Grants Pursuant to Hawaii Administrative Rules Chapter 6.1, and as part of the NHDPP, Hawaiian Home Land Trust Grants are made available to nonprofit organizations, whereby the proposed project serves and benefits HHCA beneficiaries. With this grant, DHHL is implementing the Community Development component in the NHDPP.

HHC has approved \$500,000 for this Project Implementation Grant for COVID-19 Relief. Grant funds for this grant program are provided from the Native Hawaiian Rehabilitation Fund (NHRF). Un-allocated, un-encumbered, and un-spent funds will be returned to NHRF.

Eligibility information

Eligible applicants are:

- Nonprofits organized as a federal 501c3 tax-exempt nonprofit corporation.
- Nonprofits using a fiscal sponsor with federal 501c3 tax exemption.

Other eligibility criteria for all applicants:

- Applicants or their fiscal sponsors must provide proof of compliance as required by Hawaii Revised Statutes (HRS) § 103D-310. The required certificates are as follows and must be included with the applicant's grant application.
 - Original Tax Clearance Certificate issued by the State of Hawaii Department of Taxation (certificate must be dated less than six (6) months before the grant application deadline)
 - Certificate of Compliance issued by the State of Hawaii Department of Labor and Industrial Relations (DLIR)
 - Certificate of Good Standing issued by the State of Hawaii Department of Commerce and Consumer Affairs

In lieu of the items above, the applicant may submit a consolidated Certificate of Vendor Compliance (CVC) as issued by the State Procurement Office (SPO) via the on-line system, Hawaii Compliance Express (HCE). The CVC must be dated less than six (6) months before the grant application deadline. Details regarding this on-line system may be viewed at <http://vendors.ehawaii.gov/hce/>. Applicants are encouraged to register with HCE as soon as possible. It may take up to 10 business days for a newly registered entity to obtain a compliant certificate.

Applicants or their fiscal sponsors are advised to maintain compliance status in the HCE on-line system at all times during which applicant and fiscal sponsor have an active DHHL grant award or a grant application under consideration by DHHL. Note that a compliant CVC is required at time of grant application, grant agreement execution, and at time of final grant payment.

- Applicants, including fiscal sponsors, with delinquent DHHL grant deliverables, reports, invoices, etc. are not eligible. If such matters are resolved before the grant application deadline, a grant application may be submitted.

Eligible projects are:

- Programs and services providing immediate relief to HHCA beneficiaries impacted by the COVID-19 pandemic. This includes, but is not limited to, services and immediate assistance that keeps HHCA beneficiaries housed, fed, healthy and safe.

Funding Priorities

This grant is intended to help and support nonprofits that can rapidly deploy resources for immediate relief to HHCA beneficiaries impacted by the COVID-19 pandemic. Funds may be used to support nonprofits to maintain or expand programs and services and that can demonstrate a measurable positive impact for HHCA beneficiaries.

Deadlines, Processing Time, and Project Timeframes (subject to change)

Scheduled Date	Activity
October 26 – 28, 2020	Grant Informational Meetings (via teleconference) are optional. Go to the DHHL website for how to join the teleconference – www.dhhl.hawaii.gov .
Wednesday, December 9, 2020 by 4:00 PM HST	DEADLINE for Grant Application Original must be received at DHHL Kapolei before or by 4:00 PM 12/9/2020. No email nor fax accepted.
December 2020	DHHL review of grant applications.
January 2021	DHHL Recommendations submitted to the Hawaiian Homes Commission regularly scheduled meeting.
February – March 2021	Notifications to all applicants. Begin contracting process with awardees. Scope, budget, timeline negotiations and adjustments, if necessary.
May 2021	Estimated Grant start date
May 2023	Estimated Grant end date. Un-spent funds will be returned to NHRF.

Dates subject to change

Decision-making Process

Grant proposals are reviewed by a DHHL Committee and may be comprised of DHHL staff and individuals from across the state. The DHHL Committee reviews the proposed project goals, work plan scope, budget and timeline, and potential benefit to HHCA beneficiaries. DHHL then makes recommendations for funding to the HHC for final approval.

Submitting an Application

Applicants are advised to read all the material contained in this application kit carefully. It is important that your proposal address each section of the application and that all required forms are completed, signed, and included in the proposal. Applications with any missing items will be returned without being reviewed. A checklist is provided to help you organize your proposal. See page 29.

Only the original proposal in paper hard copy needs to be submitted. Proposals are not accepted by fax or by email nor accepted at any DHHL District Office. It is recommended that you keep a copy of your entire proposal. Proposals must be received at DHHL Kapolei before or on the deadline to the addresses given on the top page of this application packet. Late proposals and/or incomplete proposals will be returned without being reviewed.

Grant Application Instructions

A complete DHHL grant application consists of four (4) parts:

- Part 1. Application cover sheet
- Part 2. Proposal request including scope, budget and timeline
- Part 3. Required forms and attachments
- Part 4. Other materials

This application packet contains all of the instructions and required forms for a complete grant application. All grant applications must be submitted on the forms provided in this packet. Separate sheets may be attached as long as they follow the same format as provided in this application packet. Use the grant application checklists on page 29 to organize your application submittal. Incomplete applications will automatically be returned without review.

PART 1. The Application Cover Sheet: On the application cover sheet, provide basic contact information for your organization or fiscal sponsor, if applicable, the amount of DHHL grant funds you are requesting, and any match funds and/or in-kind donations. The application cover sheet must be signed by a board-authorized person to act on behalf of the applicant organization. For most organizations, this is the board president or executive director. If using a fiscal sponsor, a board-authorized person to act on behalf of the fiscal sponsor must also sign the application cover sheet and complete the Fiscal Sponsor contact sheet.

PART 2. The Proposal Request: The proposal request section is the main part of your proposal. See pages 13-17. This is the section that DHHL will rely on to understand your proposed project and to decide whether to recommend funding. This section should be detailed, well-organized, and easy to understand. The application forms explain what your proposal should cover.

A budget information sheet is included in this packet. See pages 16-17. You must use this form to present your budget request, include both a Project Expense Budget and Project Income Budget. This form lists the total amount of all your project expenses (i.e. personnel, travel, equipment and supplies, contract services, etc.). And, this form lists the total amount of all your anticipated project income (match funds and in-kind services, if any). In addition, you must provide a detailed narrative explanation and calculations to best describe how you arrived at each expense item.

Match funds and In-Kind Donations (Optional). For this grant program, matching funds and in-kind services are not required, but are encouraged. Additional points will be given to applicants with match funds and in-kind donations. If you plan to provide match funds and/or in-kind donations, they must be available within the same time period as the proposed project.

Acceptable documentation include, but are not limited to, the following:

- Copy of a bank statement from the applicant.
- Copy of the confirmed funding commitment such as award letter, fully executed grant agreement, or copy of check from the funding source.
- Copy of signed letter on donor's letterhead verifying the type of donation, dollar value and stating the donation is for the purpose of the proposed project.

Due to the time sensitive nature of these funds, please provide a quarterly spend down plan to demonstrate your cash flow needs for the maximum two (2) year grant period. Also include a narrative to explain how you determined this spend down plan.

PART 3. Required Forms and Attachments, unless otherwise noted:

- Signed “Assurance of Service to native Hawaiians.”
- Signed “Assurance of Acknowledgement of Support.”
- Board member list including board position or title, contact information, and term of office.
- Articles of Incorporation with the stamp showing they were filed with the State Department of Commerce and Consumer Affairs.
- Bylaws signed by the board secretary and indicating the date of the board meeting when the bylaws were adopted.
- Board resolution approving the submittal of this proposal and identifying the person(s) the board has authorized to sign documents on behalf of the organization. The board secretary, or other board member, must sign this resolution and provide the date the board adopted the resolution.
- Signed Certification statement that your organization has written policies and procedures pertaining to conflict of interest and nepotism.
- Most recent financial statement, Treasurer’s report, or IRS Form 990.
- Hawaii Compliance Express Certificate of Vendor Compliance or the three (3) individual certificates from the Department of Taxation, Department of Labor and Industrial Relations, and Department of Commerce and Consumer Affairs.

- US Internal Revenue Service 501c3 determination letter, if applicable.
- Assurance of Dedicated Matching Funds and In-kind Services, if applicable.
- Fiscal sponsor agreement, if applicable.

If using a Fiscal Sponsor, please provide the following:

- Board member list including board position or title, contact information, and term of office.
- Board resolution approving the submittal of this proposal and identifying the person(s) the board has authorized to sign documents on behalf of the organization. The board secretary, or other board member, must sign this resolution and provide the date the board adopted the resolution.
- Signed Certification statement that your organization has written policies and procedures pertaining to conflict of interest and nepotism.
- Hawaii Compliance Express Certificate of Vendor Compliance or the three (3) individual certificates from the Department of Taxation, Department of Labor and Industrial Relations, and Department of Commerce and Consumer Affairs.

(4) Other materials:

- **Teams & Partnerships** Teams and partnerships are encouraged to apply. You may include with your application package a list of partners, description of partner roles, qualifications, and any prior experience working together.
- **Support letters and other materials** You may also include with your application package letters of support and any other material (e.g. previous grant reports, workshop evaluation summaries, testimonials, brochures, photos, news articles, etc.) that you think will help the DHHL understand your proposed project. Support materials may come from HHCA beneficiaries, community organizations, elected officials, government agencies, and any other stakeholders.

Note: DHHL grant reviewers can only evaluate grant applications based on the actual materials included in your application package. Reviewers are not allowed to go on the internet to view a website, documents stored in the cloud or search for other materials not included in your original submitted grant application package. Therefore, it is highly encouraged that you submit supporting information and materials as part of your original grant application package.

Packaging Your Application

Your proposal package should be printed on 8 1/2 x 11 inch white paper and use 12 point font size (minimum). All pages should be numbered, including the attachments. All pages should be printed on one side only. To secure the proposal, please use staples, paper clips or binder clips. Please do not provide any special binding, cover or tab dividers. The sections should be in the order as listed in the application checklists on page 29. Be sure to keep a copy of your entire application submittal for your records, including a copy of all attachments.

Submitting Your Application

You only need to submit one, original copy of your application package. Your application must be received before or on the deadline to the DHHL office in Kapolei on the island of O'ahu. Applications will not be accepted at any DHHL district office nor by fax or email.

Application evaluation criteria

Applications will be evaluated using the following criteria:

Organizational Capacity – 25 points

This rating factor evaluates the applicant's capacity (ie, people resources, administrative systems, technical expertise) to rapidly deploy DHHL grant funds and provide immediate relief and assistance to HHCA beneficiaries impacted by the COVID-19 pandemic.

Reviewers will look for:

- Your leadership, communication and management abilities demonstrated through examples of past projects and accomplishments.

- Your experience planning and successfully carrying out similar projects on a similar scale, particularly in rapidly deploying resources and providing immediate assistance for HHCA beneficiaries.
- Specific skills, training, or qualifications that will contribute to the success of the project.
- Fiscal soundness including responsibly handling DHHL Trust grant funds, adequate bookkeeping and recordkeeping systems.

Project Description – 10 points

This rating factor evaluates the applicant’s understanding and familiarity with HHCA beneficiary needs and how the proposed project will address immediate relief efforts as a result of the COVID-19 pandemic. Reviewers expect to see:

- A clear description of the project, including a general scope of work and specific outcomes.
- How your organization determined that the proposed project is needed and will address HHCA beneficiary needs directly resulting from the COVID-19 pandemic. If a needs assessment, survey, client intake reports, or similar were done, please attach a copy.
- Factual or statistical information or other evidence that your proposed project will achieve the intended results and have positive impact on HHCA beneficiaries impacted by the COVID-19 pandemic.

Target Population – 20 points

This rating factor evaluates your organization’s ability to reach out to and work with HHCA beneficiaries, to immediately implement COVID-19 relief assistance, and maximize the number of beneficiaries served by your project. Reviewers expect to see:

- A clear role for beneficiaries in the project.
- A realistic plan for getting and maintaining beneficiary involvement in a meaningful way.
- A strategic use of partnerships to achieve a successful project.
- A communication plan on how you will keep beneficiaries informed during the project and grant period.

Soundness of approach – 40 points

This rating factor evaluates the quality and feasibility of your project design and proposed work plan. The reviewers will consider:

- Project design including details about the proposed activities, clear and realistic outcomes, qualified people to carry out the work, and a viable timeline.
- Ability and capacity to rapidly deploy resources to assist beneficiaries and to fully expend funds within a maximum two-year period.
- If the overall approach, including budget, is realistic.
- If the proposed approach will result in the outcomes stated in the proposal.

Sustainability – 5 points

This rating factor evaluates your preparedness to maintain your project after the grant is completed. It also looks at how you will adjust your plans if you do not receive the amount you requested. The reviewers will be looking for:

- How your organization currently supports itself and existing programs/services.
- A realistic plan for sustaining the proposed project in the future.

- A contingency plan should the proposed project be funded for a partial amount or not funded at all.

Match funds and/or In-kind donations (optional)

* Additional points will be given to applications with the following match:

- 5 points – 50% or more of project total
- 3 points – Between 25% and 49% of project total
- 1 point – Between 10% and 24% of project total

- Match may be any combination of cash and/or in-kind donations.
- Match will be re-verified at time of grant award.
- Examples for match calculation:

Total project cost	DHHL Funds	Match	% of Total Project Cost
\$200,000	\$100,000	\$100,000	50% (5 points)
\$ 50,000	37,500	12,500	25% (3 points)

Post Award Process

For those organizations that are awarded funding, DHHL prepares a Grant Agreement in State Contract Form detailing the requirements, terms and conditions of the grant award. Those organizations that are not approved for funding are provided with a written summary of comments from DHHL.

Department of Hawaiian Home Lands

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Project Implementation Grant – COVID-19 Relief
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PART 1. Application Cover Sheet

Department of Hawaiian Home Lands

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Application Cover Sheet

Print or Type

Name of organization			
Mailing Address	<i>Town</i>	<i>Zip</i>	
Street Address	<i>Town</i>	<i>Zip</i>	
Contact Person	<i>Name</i>		<i>Title</i>
Contact information	<i>Telephone</i>	<i>Fax</i>	<i>Email</i>

Please inform DHHL, in writing, within 10 business days should the contact person change.

We are (check only one):

- A federal tax-exempt 501c3 nonprofit corporation
 Using a fiscal sponsor that is a 501c3 nonprofit corporation
 Name of fiscal sponsor: _____

Federal Employer Identification Number (FEIN) _____

State of Hawaii General Excise Tax (GET) Number _____

Total Amount of DHHL funds requested	\$
Total funds from other sources (Optional)	+
Value of In-Kind Donations (Optional)	+
TOTAL Project Cost	=

Proposed project period _____ to _____

Note: Proposed project start date should be at least six months from the grant application deadline)

I certify that the governing body of the organization approves this grant application.

Signature *Date*

Print name & title

Fiscal Sponsor Signature *Date*

Print name & title

Fiscal Sponsor Contact Sheet

Print or Type

Name of organization			
Mailing Address		<i>Town</i>	<i>Zip</i>
Street Address		<i>Town</i>	<i>Zip</i>
Contact Person	<i>Name</i>	<i>Title</i>	
Contact information	<i>Telephone</i>	<i>Fax</i>	<i>Email</i>

Please inform DHHL, in writing, within 10 business days should the contact person change.

Federal Employer Identification Number (FEIN) _____

State of Hawaii General Excise Tax (GET) Number _____

Department of Hawaiian Home Lands

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PART 2. Proposal Request

Department of Hawaiian Home Lands

Hawaiian Home Lands Trust Grant

Request for Project Implementation Grant – COVID-19 Relief

Request for proposals number: RFP-21-HHL-001

Write your proposal by responding to the following six (6) questions. Attach additional sheets if needed. Responses may include and are not limited to a narrative, newsletter, annual report, photos, brochures, maps, and drawings.

1. Describe your organization, partners and fiscal sponsor (if any), including how your organization currently serves HHCA beneficiaries.

2. Describe the proposed project you are requesting funds for.

Be specific and detailed and include the following information:

- Purpose and goals of the proposed project. Is this a new project or an existing one?
- Scope of work outlining the activities and tasks you will carry out along with an estimated work schedule.
- How your organization determined that the proposed project is needed and will address HHCA beneficiary needs directly resulting from the COVID-19 pandemic. If a needs assessment, survey, client intake reports, or similar were done, please attach a copy.
- Factual or statistical information or other evidence that your proposed project will achieve the intended results and have positive impact on HHCA beneficiaries impacted by the COVID-19 pandemic.

3. Describe how HHCA beneficiaries will be involved in the planning, implementation and evaluation of the proposed project.

- Describe your organization's plan to reach out to and work with HHCA beneficiaries for your proposed project.
- Indicate how many HHCA beneficiaries will be assisted by this proposed project.
- Describe your organization's current projects serving HHCA beneficiaries
- In a given year, what is the average number of HHCA beneficiaries that your organization serves?

4. Provide a detailed work plan for this project.

The work plan is your opportunity to describe exactly what you will be using the grant funds for. It should provide the details of how your project will be carried out. You should include specific activities, when they will be conducted, who will be involved, what you expect to achieve with each activity (the outcome), and what resources will be used.

In addition to a narrative description of your workplan, provide a summary in table form using the format below. Include (1) a list of all proposed activities, (2) the expected outcome of each activity, (3) who will be responsible for carrying out each activity, and (4) the expected start and end dates for each activity.

Activity	Outcome	Who responsible	Start date	End Date

If you will be using this grant to hire a consultant, describe what they will do and attach their resume or statement of qualifications.

5. Provide a plan for how the project will be sustained after the DHHL grant is over and a contingency plan if you only receive partial funding from DHHL.

- Describe how you will maintain the project after the grant funds are spent. If funds are to be used for construction, explain how the facility will be maintained and managed (operations, maintenance, and repairs) and will be financially supported.
- Explain what you will do if you only receive a portion of the funds you are requesting or the proposed project is not awarded funds from DHHL.

6. Provide a detailed budget breakdown using the budget information sheet on pages 16-17.

Include both an Expense Budget and Income Budget using the attached forms on pages 16-17. The totals for each should be the same. Also include a budget narrative to explain each budget expense item and to show the calculations of how you arrived at each budget figure. Explain how you will adjust the budget if not all anticipated funding is received. Match funds and in-kind donations are optional for this grant program. Additional points will be given for match funds and/or in-kind donations.

- If the proposed project is part of a larger project supported by other funding sources, please identify the other funding amounts and sources, provide the total planned budget, and explain the need for DHHL grant funds.

Department of Hawaiian Home Lands

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Budget Information

Applicant Name: _____

Fiscal Sponsor Name: _____

Instructions:

- 1) Please complete each form for the Project Expense Budget and Project Income Budget. You may attach separate sheets, as long as the same format is used. The totals for the Expense and Income Budgets (in the right bottom corners of the expense and income sections) should be the same.
- 2) Attach separate sheets with a budget justification narrative including details and cost calculations for all budget items.

Project Expense Budget

DESCRIPTION	DHHL FUNDS REQUESTED	OTHER FUNDS	IN-KIND	TOTAL
PERSONNEL (employee only)				
Salary				
Fringe				
TOTAL PERSONNEL				
NON-PERSONNEL				
Travel				
Lease/purchase equipment				
Supplies				
Contract Services (please specify):				
Insurance				
Fiscal sponsor fee, if applicable				
Other (please specify):				
Contingency (for construction projects)				
TOTAL NON-PERSONNEL				
TOTAL EXPENSES				

Project Income Budget

	Cash	In-Kind	Total	Status* (secured, committed, or pending)
DHHL Project Implementation – COVID-19 Relief grant				Pending
Applicant organization				
Other (List)				
TOTAL INCOME				

- Applicant will be asked to re-verify match funds and in-kind donations at time of grant award notification.
- Status – Please use the following terms to describe the status of each cash and in-kind donation:
 - **Secured** - Donation is on hand. Attach the signed and fully executed agreement (copy of check, grant agreement, contract, memorandum, etc.).
 - **Committed** - Donation is committed but not yet readily available.
 - **Pending** - Your organization has made a request (verbal, letter, written application or otherwise) and is awaiting a decision from the donor.

Quarterly spend down projection. Please fill in table below. And, provide a brief narrative on how you determined this cash flow projection.

Year 1	Quarter 1	Quarter 2	Quarter 3	Quarter 4	TOTAL
	\$0.00	\$0.00	\$0.00	\$0.00	\$
Year 2	Quarter 5	Quarter 6	Quarter 7	Quarter 8	
	\$0.00	\$0.00	\$0.00	\$0.00	\$
				TOTAL	\$
				Grant Request	

Department of Hawaiian Home Lands

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**PART 3. Required Forms and
Attachments**

Department of Hawaiian Home Lands

Hawaiian Home Lands Trust Grant

Assurance of Service to native Hawaiians

Instructions: Insert organization's name in the blank. Form must be signed by an authorized person of the organization.

Article XII, Section I of the Hawaii State Constitution created the Native Hawaiian Rehabilitation Fund or "NHRF," whose funds are derived from thirty (30) percent of receipts derived from state land used for sugarcane cultivation and water. The State Constitution further states:

"The department shall use this money solely for the rehabilitation of native Hawaiians which shall include, but not be limited to, the educational, economic, political, social and cultural processes by the general welfare and conditions of native Hawaiians are thereby improved and perpetuated."

NHRF is codified in the Hawaiian Homes Commission Act of 1920, as amended, under Section 213.

It is therefore incumbent upon organizations and individuals who receive support from revenues from NHRF through grants from the Department of Hawaiian Home Lands (DHHL) to prove that the beneficiaries of any proposed service, program, or activity are native Hawaiians.

Beneficiaries of funding under an award of NHRF must trace and conclusively prove that they are at least 50% Hawaiian ancestry. DHHL must rely on documented evidence that meets eligibility requirements and reduces the possibility of error. In many cases, submitting birth certificates for the beneficiaries, the beneficiary's parents and grandparents will provide sufficient proof that the beneficiary of the services under an award from DHHL has at least 50% Hawaiian ancestry. The burden of proof rests on the awardee and beneficiary of funding.

This is to certify that, when requested, _____ will provide genealogies or other appropriate proof of at least 50% Hawaiian ancestry, for the beneficiaries of any project operating with the support of NHRF.

Signature

Date

Print Name

Title

Department of Hawaiian Home Lands

Hawaiian Home Lands Trust Grant

Assurance of Acknowledgment of Support

Instructions: Insert organization's name in the blank. Form must be signed by an authorized person of the organization.

_____ hereby agrees that all publicity, publications, and other materials produced in connection with any project funded by grants from the Department of Hawaiian Home Lands (DHHL) will acknowledge the support of DHHL in a way appropriate to the medium.

Signature

Date

Print Name

Title

Sample Board List

Instructions:

Applicants for the 2020 - 2021 DHHL Grants program are to provide a current board list.

- Please provide a complete list of board members.
- Provide contact information for each board member.
- For each board member, please indicate if he/she is a beneficiary of the Hawaiian Homes Commission Act of 1920, as amended (HHCA).
- If your organization is registered with the State of Hawaii Department of Commerce and Consumer Affairs (DCCA), please ensure your board list with DCCA is the same as listed below.
- You may use your own format, as long as the same information is listed as shown below.

2020 Board List

Name of applicant: _____

For each board member, please provide the following information:

Name:

Board Position / Title:

Term start and end dates: _____ month/year to _____ month/year

Address:

Phone:

Email:

_____ Please check here if this board member is a HHCA beneficiary.

Name:

Board Position / Title:

Term start and end dates: _____ month/year to _____ month/year

Address:

Phone:

Email:

_____ Please check here if this board member is a HHCA beneficiary.

Name:

Board Position / Title:

Term start and end dates: _____ month/year to _____ month/year

Address:

Phone:

Email:

_____ Please check here if this board member is a HHCA beneficiary.

ADD more sheets if necessary

Insert:

Articles of Incorporation

and

Bylaws

SAMPLE Required Board Resolution

INSTRUCTIONS:

1. Please print on organization letterhead
2. You may use your own organization's board resolution format and/or customize this sample to meet your needs, as long as the information on your resolution is similar to the info on this sample.
3. The signer must be someone different than the person(s) named in the resolution.
4. Consider identifying more than one signer and people who are accessible.

<p>Print on Letterhead (must include mailing address and telephone number)</p>	
<p>Board Resolution No. _____</p>	
<p>The Board of Directors of _____ (organization) resolved on _____ (board meeting date when this resolution was passed), at a duly held meeting of the Board, that _____ (name of person(s) being given authorization), who is _____ (Board position held by the person who is authorized to sign documents) is authorized to sign documents on behalf of _____ (organization);</p>	
<p>And, be it resolved that the Board of Directors approves the submittal of this grant application for the Department of Hawaiian Home Lands Project Implementation Grant – COVID-19 Relief.</p>	
<p>This resolution is certified to be true by:</p>	
Signature	Date
<p>Print name and Board Position</p>	

SAMPLE
Certification Statement

Print on Letterhead

(must include mailing address and telephone number)

_____ Date

c/o Department of Hawaiian Home Lands
Project Implementation Grant – COVID-19 Relief (PLO)
PO Box 1879
Honolulu HI 96805

This letter serves as certification that our organization has and follows written policies and procedures pertaining to nepotism and conflict of interest. On an annual basis, our board reviews these policies and files a written disclosure of any real or perceived conflict of interest.

Signature

Date

Print name

Title

Insert:

- **Most Recent Financials: Organization Financial Statement, Treasurer's Report, or US Internal Revenue Service Form 990**
- **Certificate of Vendor Compliance (CVC) from Hawaii Compliance Express**
- **US Internal Revenue Service 501c3 determination letter**

Department of Hawaiian Home Lands

Hawaiian Home Lands Trust Grant

Assurance of Dedicated Matching Funds and In-Kind Services (if applicable)

Instructions: Insert organization's name in the blank. Form must be signed by an authorized person of the organization.

_____ hereby affirms that any monies designated as matching funds and in-kind services under the terms of a Department of Hawaiian Home Lands' grant will be dedicated to and will under no circumstances be assigned for any other purposes or projects.

Signature

Date

Print Name

Title

SAMPLE
Fiscal Sponsor Agreement (if applicable)

Print on Letterhead
(must include mailing address and telephone number)

_____ Date

c/o Department of Hawaiian Home Lands
Project Implementation Grant – COVID-19 Relief (PLO)
PO Box 1879
Honolulu HI 96805

RE: _____ Name of sponsored nonprofit
_____ Project title

Please be advised that the “Sponsoring Organization” named below, a federal 501(c)(3) tax exempt public charity, has agreed to act as Fiscal Sponsor for the “Sponsored Nonprofit” named above to facilitate that organization’s activities and particularly its solicitation of support from the Department of Hawaiian Home Lands (DHHL) Project Implementation Grant – COVID-19 Relief for the project referenced above.

As Fiscal Sponsor, we agree to the following.

1. The sponsored organization’s project is compatible or consistent with our organization’s mission and purpose.
2. We, as fiscal sponsor, have formally adopted the above referenced project. We have:
 - a. Reviewed the proposed project
 - b. Passed a board resolution of the adoption of the project
 - c. Accepted responsibility to document the status and progress of the project
3. We, as fiscal sponsor, are responsible for monitoring and controlling the expenditure of grant funds in keeping with the purpose of the grant.
4. We, as fiscal sponsor, are responsible for complying with the terms of the grant.

Our Board of Directors has formally approved a resolution agreeing to be “Fiscal Sponsor” for the “Sponsored Nonprofit” organization, and has authorized the execution of this letter. A copy of that resolution, certified by our Board Secretary, is attached.

Name of Sponsoring Organization

By:

Signature of “Sponsoring Organization”

Title

cc: Board President of “Sponsored Nonprofit”

Department of Hawaiian Home Lands

Hawaiian Home Lands Trust Grant
Project Implementation Grant – COVID-19 Relief
Request for Proposals number: RFP-21-HHL-001

PART 4. Other Materials

Insert any other supporting materials

Grant Application Package Checklist

The following items must be included in your grant application package. These items should be assembled in the order they appear on this checklist. If you have additional materials you would like to submit, please add them at the end of your grant application package.

Checklist for applicant

√	Item	Page number reference
	PART 1. Application Cover Sheet	
	Application Cover Sheet – Form	Pages 5, 10-12
	PART 2. Proposal Request	
	Proposal Request – Narrative you have written	Pages 5, 13-15
	Budget Information Sheet – Form	Pages 5, 16-17
	Budget Detail – Narrative and calculations you have written	Page 5, 16-17
	PART 3. Required Forms and Attachments	
	Signed “Assurance of Service to native Hawaiians”	Pages 6 & 19
	Signed “Assurance of Acknowledgement of Support”	Pages 6 & 20
	Board member list	Pages 6 & 21
	Articles of Incorporation	Pages 6 & 22
	Bylaws	Pages 6 & 22
	Board Resolution	Pages 6 & 23
	Signed Certification Statement regarding conflict of interest & nepotism	Pages 6 & 24
	Most recent financial statement	Pages 6 & 25
	Certificate of Vendor Compliance from Hawaii Compliance Express	Pages 6 & 25
	US Internal Revenue Service 501c3 determination letter, if applicable	Pages 6 & 25
	Assurance of Dedicated Matching Funds & In-Kind Services, if applicable	Pages 6 & 26
	Partner or Fiscal Sponsor agreement, if applicable	Pages 6 & 27
	PART 4. Other Materials	
	Team and Partner commitment letters or description	Pages 7 & 28
	General letters of support	Pages 7 & 28

Checklist for fiscal sponsor, if applicable

√	Item	Page number reference
	Board member list	Pages 6 & 21
	Board resolution	Pages 6 & 23
	Signed Certification Statement regarding conflict of interest & nepotism	Pages 6 & 24
	Certificate of Vendor Compliance from Hawaii Compliance Express	Pages 6 & 25