

Community Engagement 215 SE 7th Street, 1st Floor, Suite 150 Topeka, KS 66603

www.topeka.org

2025 TOPEKA DREAMS NEIGHBORHOOD IMPROVEMENT INITIATIVES <u>DREAMS PROGRAM APPLICATION COVER PAGE</u>

Preliminary Application Due: Friday, September 13, 2024, 5:00 p.m. **Final Application Due**: Friday, October 11, 2024, 5:00 p.m.

Application Questions / Technical Assistance: Bianca Burnett, Senior Community Engagement Coordinator,

lburnett@topeka.org or 785-368-3663

<u>Project Eligibility Requirement</u>: All Projects must have prior approval via the City of Topeka Consult Meeting process before the application is submitted. (2024 Consult Meetings: January – April 2024

NEIGHB	ORHOOD IMPROVEMEN	NT ASSOCIATION	INFORI	MATION		
Click on the gra	ay field boxes below to answer ea	ich question. Do not u	se 'Tab' on	your keyboard.		
Applying Organization:						
Application Date:						
President/Director:			Phone:			
Address:				'		
E-mail:						
Grant Contact Person			Phone:			
(If different from above):						
Address:				'		
E-mail:						
Project Contact Person (If different from above):			Phone:			
Address:				'		
E-mail:						
Neighborhood Rating (as defined in the 2020 Neighborhood Health Map):	☐ Intensive Care Neighborhood	At-Risk Neighborhood		Out-Patient Neighborhood		
	Healthy Neighborhood					
PROJECT PRIORITY & FUNDING						
Project Priority (Rank Number Provided by NIA with multiple projects):		Total Amount Requested for Project:				
COMMUNITY ENGAGEMENT OFFICE USE ONLY						
Application For	DREAMS 1	DREAMS 2 Housi	ng	DREAMS 2		
	DREAMS 3					

DREAMS 2 BIENNIAL MAJOR NEIGHBORHOOD IMPROVEMENTS PROGRAM OR DREAMS 3 – ANNUAL MINI-GRANTS PROGRAM APPLICATION

Preliminary Application Due: Friday, August 30, 2024, 5:00 p.m. **Final Application Due**: Friday, October 4, 2024, 5:00 p.m.

Application Questions / Technical Assistance: Bianca Burnett, Senior Community Engagement Coordinator,

lburnett@topeka.org or 785-368-3663

APPLICATION SUMMARY						
This application is for funding consideration of (select ONE)						
NOTE: YOU MUST SUBMIT A SEPARATE APPLICATION IF YOU ARE APPLYING FOR MULTIPLE PROJECTS)						
□ DREA	AMS 2 BIENNIAL	DREAMS 3 – ANNUAL				
_	NEIGHBORHOOD	MINI-GRANTS PROGRAM				
IMPROV	EMENTS PROGRAM					
Project	: Title:					
Project	t Location &					
Addres	ss:					
Project Priority			Total Amount			
(Rank if submitting more			Requested for Project:			
	e project application):					
			ation and decision-making pro	• •		
			ttees that make the selection of the sel			
Teci	pient neignbornoous		AJOK NEIGHBORHOOD IMPRO AINI-GRANTS PROGRAM	VEIVIEW 13 PROGRAMM OR		
		DILLY III O THE TOTAL II				
1.	Select the Initiative	Type Below (select one):				
		air/Replacement (Streets, sidewa	ılks, alleys, etc.)			
	1 == '	ichments (Parks, Bus Shelters, Pul				
	Neighborhood Beautification (Murals, Banners, Signs, etc.)					
	Community Public Service Activities (Health education, Substance Abuse Prevention, Crime Awareness, etc.)					
2.	Describe the initiative. Include who this initiative will directly impact or benefit and how, and what is the					
	sustainability or future plans for this initiative (150 words or less).					
3.	Which of the follow	ving HUD National Objectives	does this initiative align with I	MOST (select one)?		
	Benefit to low- and moderate- income (LMI) persons					
	Aid in the prevention or elimination of slums or blight					
	Meet a need havir	ng a particular urgency (referred t	o as urgent need)			
	Which of the follow	ring City of Topeka Strategic G	ioals/Focus Areas does this ini	tiative MOST align with		
4.	(select one)?			•		
	Safe and Secure Communities					
	Stewardship of the City's Physical Assets					
	Thriving and Livab	ie Neighborhoods				

5.	Does this initiative specifically align with (select one):			
	Your Neighborhood's Comprehensive Neighborhood Plan			
	Your Neighborhood's Published Goals & Objectives (documents that have been made available to the public through			
	<u>pri</u> nt, distribution, and public announcement)			
	□ Both			
	None of the above			
	If applicable, please explain how it aligns (150 words or less):			
6.	Which of the following stakeholders were involved in the decision to choose this initiative? (select all that			
0.	apply)			
	Residents of the neighborhood			
	NIA Officers			
	Other Community Groups (associations)			
	Public Institutions (Schools, local Government Agencies, Libraries, etc.)			
	Private Institutions (Hospitals, Universities, Banks, etc.)			
	Local Businesses			
7.	How were the above stakeholders engaged in supporting this initiative? (select all that apply)			
7.	The project/program selection process			
	The development/idea for the initiative			
	Will be involved in the implementation of the initiative			
	Will be or has already provided additional funding for the initiative			
	will be of flas affeauly provided additional failuring for the illitiative			
	If applicable, please describe the stakeholder engagement process for this initiative (150 words or less):			
	in applicable, piease describe the stakenoider engagement process for this initiative (150 words or less).			
8.	Which of the following has your organization sought for this initiative? (select all that apply)			
<u> </u>	Volunteers			
	Private Funding			
	Other Local, State, or Federal Government Funding			
	In-Kind materials or services			
	None of the above			
	If applicable, please describe how these resources will be used in the implementation of this initiative (150			
	words or less):			
9.	Budget Summary – Attach an itemized list, professional estimate, quote, and/or budget summary of the			
	total expenses for this project to this application.			
	Total Anticipated Project Cost			
	Total Amount Requested from City of Topeka for this initiative			
	List ALL other entities that you have received or have applied for pending funds from:			
	Total Amount of ALL Additional Non-City funding received			
	Total Amount of ALL Additional Non-City funding pending			