





Public and Charter School Physical Fitness and Nutrition Education Grant

REQUEST FOR PROPOSAL

Release Date: February 25, 2009

Application Submission Deadline: March 27, 2009, 5:00 pm

LATE APPLICATIONS WILL NOT BE CONSIDERED FOR AN AWARD

Checklist for Applications FY 2009 Public and Charter School Physical Fitness and Nutrition Education Grant

- □ The application is printed on 8½ by 11-inch paper, printed on one side, double-spaced (including bullet items), using 12-point type with a minimum of one inch margins, and does not exceed two (2) pages of narrative plus pages for Attachments A, B and C for a total of no more than 8 pages.
- □ The application format conforms to the "Application Format" beginning on page 2 of this Request for Proposal. The selection panel will not review applications that do not conform to the application format.
- □ The applicant organization/entity has responded to all sections of the Request for Application and contains all the information and Attachments requested.
 - □ The Project Description section is complete.
 - □ Attachment A Applicant Profile and Project Summary is attached and complete.
 - **Attachment B** Budget and narrative is attached and complete.
 - **Attachment C** Wellness Policy Evaluation is attached and complete
- □ The applicant has submitted the required five (5) sets of the application, one (1) original and four (4) copies. The application will not be reviewed by the selection panel if the applicant fails to submit the required number of applications.
- □ The application is submitted to the Selection panel no later than 5:00 p.m on the deadline date of March 27, 2009.

Contact

Selection Panel Care of the Mayor's Commission on Food and Nutrition 51 N Street, NE – 3rd Floor Washington, D.C. 20002 202-741-5252

Public and Charter School Physical Fitness and Nutrition Education Grant

SCOPE OF WORK

The Mayor's Commission on Food and Nutrition under the Office of the State Superintendent of Education in partnership with the General Mills Foundation and the United Way of the National Capital Area is seeking proposals from District of Columbia public and charter schools for up to \$25,000 of funding to improve physical activity and nutrition education programs. The General Mills Foundation and the United Way of the National Capital Area will be awarding a total of \$200,000 in grants.

In addition, the Mayor's Commission on Food and Nutrition is interested in obtaining information about your school's Wellness Policy, through the Wellness Evaluation, if you have such a policy (Attachment C).

Funding under the grant must be used for:

- Programming that focuses on physical fitness and nutrition activities that occur during recess, lunch time and/or after school; and/or.
- Opportunities for teachers to develop effective physical fitness and nutrition education activities in the classroom.

Eligibility Criteria

Any District of Columbia public school or a public charter school campus chartered by the District of Columbia Public Charter School Board may apply. **Only schools located in the District of Columbia can apply for this funding.**

Source of Grant Funding

The United Way of the National Capital Area and the General Mills Foundation have provided \$200,000.00 in total grant awards.

Award Period

The grant awards will be made in May of 2009 and will be for a period of one (1) year from the date of the award.

Monitoring and Reporting

Grant recipients will be required to submit to the General Mills Foundation and the United Way of the National Capital Area a report in December 2009 and another report at the completion of the grant outlining lessons learned and strategies for sustaining physical fitness and nutrition activities at their school.

Grant Award

Grant award payments will be made by the United Way of the National Capital Area at the discretion of the selection panel. Applicants may apply for a grant not to exceed \$25,000.00.

SUBMISSION OF APPLICATIONS

Number of Copies

A total of five (5) sets of the completed application, including one (1) original and four (4) copies must be submitted in an envelope or package along with the completed Wellness Evaluation. Telephonic, telegraphic, email and facsimile submissions will not be accepted.

Application Submission Date and Time

An original completed application and four (4) copies and one (1) Wellness Evaluation must be delivered to the following location no later than 5:00 PM EST on March 27, 2009:

Selection Committee Care of the Mayor's Commission on Food and Nutrition 51 N Street, NE – 3rd Floor Washington, DC 20002 Attention: Sandra Schlicker

Application Delivery

Applications that are mailed or delivered by Messenger/Courier services **must be** sent in sufficient time to be received by **the 5:00 p.m. EST deadline on March 27, 2009**, at the above location. Applications arriving via messenger/courier services after the posted deadline of **5:00 p.m. EST on March 27, 2009** will not be forwarded to the selection panel.

APPLICATION FORMAT

Applicants are required to follow the format below and each application must contain the following information:

- Applicant Profile (See Attachment A)
- Project Summary (See Attachment A)
- How your school would utilize up to \$25,000 to improve the fitness and nutrition of your students (Limited to two pages)
- Budget Form (See Attachment B)
- Completed Wellness Policy Implement Evaluation (See Attachment C)

The maximum number of pages for the total application **cannot exceed eight (8) pages**, **on one side**, (**including bullet items**) **on 8¹/₂ by 11-inch paper**. Margins must be no less than one inch and a font size of 12-point is required (Times New Roman or Arial type recommended). The selection panel shall not review applications that do not conform to these requirements.

EVALUATION OF APPLICATION

Selection Panel

The selection panel will be composed of neutral, qualified, professional individuals who have been selected for their unique related experiences. The selection panel will review and rank each applicant's application, and when the panel has completed its review, the panel shall make recommendations for awards.

Evaluation Criteria

Applicants' submissions will be objectively reviewed against the following specific scoring criteria listed below.

- Reach refers to how many youth and/or families are affected by the program. Who is the primary audience? Is the size of the audience realistic?
- Need refers to the school's nutritional and physical activity problems, its needs and the resources available to address those needs. Is the audience at risk and/or underserved?
- Program Quality refers to if the programming is compelling and innovative and will help improve nutritional and physical fitness status in young people. Are the goals measurable, specific, tied to program outcomes and appropriate

for audience? Does the program have appropriate contact hours/participant to achieve objective? Is the program realistic and the approach credible?

- Program Sustainability refers to the ability of the school to continue all or parts of the program past the grant period. Are the budget expenses realistic and justifiable?
- Wellness Policy Evaluation refers to the completion of the Wellness Evaluation (Appendix C). Applicants are not required to fill this evaluation out, but they are strongly encouraged to do so. The selection panel will not evaluate the content of the responses in the evaluation, but every school that returns this completed evaluation will be awarded an additional 20 points.

ATTACHMENT A

Applicant Profile/Cover Page for the Public and Charter School Physical Fitness and Nutrition Education Grant

| School Name: | |
|------------------------|--|
| Name of Project: | |
| Contact Person Name: | |
| Contact Person Title | |
| Office Address: | |
| Phone: | |
| Fax: | |
| Cell Phone: | |
| Email Address: | |
| Total Funds Requested: | |
| Project Summary: | |
| r ogeet building , | |
| | |
| | |

ATTACHMENT B

BUDGET AND BUDGET NARRATIVE

| A. | Personnel | \$ |
|---------------|--------------------|-----------|
| B. | Fringe Benefits | \$ |
| C. | Supplies | \$ |
| D. | Equipment | \$ |
| E. | Operating Expenses | <u>\$</u> |
| F. | Other Expenses | <u>\$</u> |
| PROJECT TOTAL | | \$ |

BUDGET NARRATIVE: Please explain the budget below.

ATTACHMENT C

Wellness Policy Implementation Evaluation

1. Does your school have a local wellness policy?

- o Yes
- o No
- o Don't Know

2. Does your school have a local wellness policy council?

- o Yes
- o No
- o Don't Know

3. If your school has a local wellness policy council, please check the types of stakeholder groups that participate (Please check all that apply)

- o Parents
- o Teachers
- Student Representatives
- o School Staff Members
- o Community Representative
- o N/A, my school does not have an active local wellness policy council
- o Other (please specify)
- **4.** If your school distributes materials from your local wellness policy to parents and guardians, please check what types of materials are offered? (Please check all that apply)
 - Fliers for upcoming school health events
 - Handouts, Brochures or Pamphlets with healthy facts and information (Physical Activity Tips, Nutrition Fact Tips, Drug Abuse, etc.)
 - Giveaways that promote healthy campaigns or slogans (Bookmarks, water bottles, etc.)
 - o Newsletter with Healthy Living Tips
 - o N/A, my school does not distribute materials from our local wellness policy to parents
 - o Other (please specify)
- 5. Is your school aware of the Office of the State Superintendent of Education's ("OSSE's") "A Parent Guide to Health and Physical Education Standards, "Health Education Standards" and "Physical Education Standards"?
 - o Yes
 - o No

If yes, please specify, which ones you are aware of

- 6. If your school distributes materials from your local wellness policy to parents and guardians, please check how often these materials are offered? (Please check all that apply)
 - o Once a Week
 - o Once a Month
 - o Twice a Week
 - o Twice a Month
 - Sent home with other school information (Report Cards, School Calendars, Test Results, Immunization Notices, or Health Forms)
 - o N/A
 - o Other (please specify)
- 7. If your school collaborates with an agency or organization/s in order to support the implementation of physical activity and/or nutrition education, please check the types of agencies/ or organization/s you are working with? (Please check all that apply)
 - o Non-Profit
 - o District of Columbia Government (excluding the OSSE)
 - o Federal Government
 - o Private
 - o Faith Based
 - 0 Other
 - 0 None
 - o Please name the agency/organizations you are working with in this space
- 8. Does your school offer nutrition education that is a part of health education or other courses such as math, science, language arts, social sciences and/or elective subjects?
- **9.** If your school offers nutrition education, does your school provide opportunities for teachers, parents and guardians and community partners to receive training on nutrition?
 - o Yes o No
 - o If yes, how often_____

10. If your school offers physical education, please check the number of minutes each day of the week it is offered?

- Once a day for 30 minutes per day
- o Once a day for 45 minutes per day
- o Twice a week for 30 minutes per day
- o Twice a week for 45 minutes per day
- Three times a week for 30 minutes per day
- o Three times a week for 45 minutes per day
- o N/A, my school does not offer physical education
- o Other (please specify total number of minutes per day or per week)

11. If your school offers recess, please check the number of minutes for each day of the week it is offered?

- o Once a day for 30 minutes per day
- o Once a day for 45 minutes per day
- o Twice a week for 30 minutes per day
- Twice a week for 45 minutes per day
- o Three times a week for 30 minutes per day
- Three times a week for 45 minutes per day
- o N/A, my school does not offer recess
- Other (please specify total number of minutes per day or per week)

12. Does your school offer breakfast in the classroom?

- o Yes
- o No
- Please send me the DC Hunger Solutions information about breakfast in the classroom for my school

13. If your school offers healthy food and beverages in vending machines? What types of options are available to the students? (Please check all that apply)

o N/A, my school does not offer vending machines with healthy snacks or beverages

- o Low calorie portions (1 oz size chips, crackers, popcorn, and cereals)
- Low salt or salt free (230 mg/g or less sodium per serving chips, pretzels, cereals, crackers, nuts/seeds)
- o Low sugar/Sugar free options
- o Cooked, Canned (light syrup) or Dried Fruits
- o Water
- o 100% Juice Drinks
- o Low Fat or Fat Free Milk
- Other (please specify)

14. Does your school offer vending machines in the teacher's lounge/s?

o Yes

o No

o If yes, please specify what types of options are offered in these vending machines

15. Does your school offer snack options to students outside of the vending machines?

(Example: school stores)

0 Yes

o No

o If yes, please specify what types of options are offered

16. Does you school have a policy about having healthy foods available at celebration's, fundraisers and/or as rewards?

- 0 Yes
- o No
- o If so, please specify what this policy describes

17. What improvements to your school are of key importance to implementing your school's local wellness policy?

o Additional enrichment classes like music and sports

- o More classroom aids
- o More parent involvement
- o More field trips
- o More science

• More math

- o Special education/special needs support in classes
- Other (please specify)

18. Does your school participate in the Presidential Active Lifestyle Award ("PALA") program, which is a program of the President's Council on Physical Fitness and Sports?

0 Yes

• If no, and you would like to receive information on the PALA program, please indicate by writing yes in this space

Thank-you for completing this evaluation.

o No

QUESTIONS

Please contact the Mayor's Commission on Food and Nutrition at 202-741-5252 or 202-741-5307 with any questions or concerns and/or to request a web-based version of this evaluation.

Along with your application for physical activity and nutrition education funding, please send or deliver your wellness evaluation by 5:00pm on March 27, 2009 to

Selection Committee Care of the Mayor's Commission on Food and Nutrition 51 N St, NE, 3rd Floor Washington, DC 20002