

**EMERGENCY FOOD AND SHELTER PROGRAM (EFSP)
WESTCHESTER BOARD**

REVIEW PROCESS
APPLICATION SUMMARY
Phase 28 (2009- 2010)

Agency Name: _____

Program/Project Name (if applicable): _____

1. Copy of IRS Certification of 501 © (3) status attached to application, if new to the EFSP _____ Yes
2. Federal I.D. Number

3. Amount Requested for Phase 28 (11/1/2009- 9/30/2010) \$ _____

4. Amount Requested by Category:

Served Meals	\$ _____	Estimated Number of Meals	_____
Other Food	\$ _____	Estimated Number of Meals	_____
Rent/Mortgage	\$ _____	Estimated Number of Bills	_____
Supplies/Equipment	\$ _____	List items:	_____

Does your agency have a cap on the use of Rent/mortgage assistance? If yes, what is it? \$ _____
Why? _____

What is your agency's average turnaround time for processing requests for rent/mortgage assistance? _____

5. Was your agency awarded funding on Phase 27(2008-2009)? If yes, please fill in the following:

Amount Awarded-Phase 27 \$ _____

Amount Awarded by Category:

Served Meals	\$ _____	Actual Number of Meals	_____
Other Food	\$ _____	Actual Number of Meals	_____
Rent/Mortgage	\$ _____	Actual Number of Bills	_____
Supplies/Equipment	\$ _____	<i>Note: Provide numbers related to purchases made</i>	
Utilities	\$ _____	<i>with EFSP funds only.</i>	

6. If your agency targets/seeks to serve specific client populations please list the top three (3) target populations. Please refer to page 2 (D1) of the application.

1.No target population

2. _____

3. _____

7. List the geographic area(s) within which you will provide services and the proposed number of households to be served in each area. Page 3 (D2)

Area(s)	Proposed Number of Households to be Served
All Westchester	
_____	_____
_____	_____
_____	_____
All of Westchester County	
_____	_____

8. If you are an affiliate of a national organization, provide that name (refer to page 3 (E) of the application):

Feeding America (formerly Second Harvest)

9. Does your organization conduct an annual audit? _____ Yes _____ No

10. Your sponsoring organization (fiscal agent), if any, is _____

