



## **Park City Municipal Corporation Request for Applications: Mental Health Special Service Contracts**

### **Application Form**

**Instructions:** Review and complete the form below (Sections 1-5). Please provide an electronic copy of this application and requested attachments to Kirsten Darrington at [kirsten.darrington@parkcity.org](mailto:kirsten.darrington@parkcity.org) by **5:00 PM on Friday, January 20, 2023**.

**Important note on funding and contract timeline:** Park City Municipal Corporation (the "City" or "PCMC") has budgeted a total of Sixty Thousand Dollars (\$60,000.00) for this first round of Mental Health Special Service Contracts. Funds will be awarded in February 2023 and will be effective through June 30, 2023, at which time all awarded funds should be spent. Plan projects accordingly to meet the stated spending deadline. The next round of funding for mental health services will open in the spring of 2023 and the term will be for 1-2 years.

#### **Mental Health Special Service Contract Goals:**

The services provided through the Mental Health Special Service Contracts will help PCMC more effectively address the needs of Park City residents. Applicants should be prepared to address one (1) or more of the following goals within their application:

1. Expand community access to mental health and substance abuse programs and services in Park City.
2. Increase prevention and education around mental health and substance abuse in Park City.
3. Ensure the success and sustainability of mental health and substance abuse programs and services in Park City.
4. Establish systems to support life during recovery and reintegration into the community.
5. Ensure equity of mental health and substance abuse programs and services for Latino community members.

These goals are included in the Summit County Mental Health Alliance's Strategic Plan. A full copy of the Strategic Plan can be found on the [Summit County website](#). In addition to addressing one or more of these goals, priority will be given to projects that support new and innovative programs and initiatives.

The questions listed in this application are designed to meet the City's criteria for Special Service Contracts as outlined in the City's Budget Policies and objectives, Chapter 5, Part I.

*Application Continues on the next page. Please complete all five (5) sections.*

**Section 1: Organization Contact Information**

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- 1. Applicant Contact Name and Title: \_\_\_\_\_
  
- 2. Address: \_\_\_\_\_
  
- 3. Phone: \_\_\_\_\_
  
- 4. E-mail: \_\_\_\_\_
  
- 5. Organization Executive Director: \_\_\_\_\_
  
- 6. Organization website: \_\_\_\_\_

**Section 2: Organization Eligibility**

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- 7. Is your organization a federally recognized nonprofit?      Yes\_\_\_\_\_      No\_\_\_\_\_
  
- 8. Does your organization provide mental health services to Park City residents?      Yes\_\_\_\_\_      No\_\_\_\_\_
  
- 9. Does your organization have a history of non-discrimination in providing programs or services?      Yes\_\_\_\_\_      No\_\_\_\_\_
  
- 10. Does your organization have a strategic plan or quantifiable goals and objectives?      Yes\_\_\_\_\_      No\_\_\_\_\_
  
- 11. Does your organization have a history of compliance with Park City contracts?      Yes\_\_\_\_\_      No\_\_\_\_\_
  
- 12. Can your organization certify the fair market value of services included in the application equals or exceeds the total amount of compensation requested from the City?      Yes\_\_\_\_\_      No\_\_\_\_\_
  
  
- 13. Total Grant Amount Requested:      \$ \_\_\_\_\_

*Reminder: all awarded funds must be spent by June 30, 2023. The City has budgeted a total of \$60,000.00 for this first round of Mental Health Special Service Contracts.*

### **Section 3: Community Benefit**

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14. Provide specific details for how the requested funds will be used, clearly identifying which of the listed 5 mental health goals are being addressed. Funds may not be used for scholarship-type activities or the purchase of equipment. (*limit answer to one page/500 words*)

15. How will the program or project address a specific need within the community? How will the community benefit from this service? (*half page/250-word limit*)

**Section 4: Organizational Background and Sustainability**

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16. What is your organization's mission statement?

17. List quantitative and/or qualitative goals (with specific targets) that can be used to measure the degree to which the funds were used for their intended purpose. (*half page/250-word limit*)

18. Provide a brief history of your organization's work in the community as it relates to this project. Include any relevant partnerships. *(limit answer to one page/500 words)*

**Section 5: Attachments**

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19. **Required:** The most recently approved annual budget, listing other sources of potential funding for the outlined program or project.

I have attached the required documentation.

20. **Required:** Two (2) years of financial statements, including Balance Sheet, Income Statement, Statement of Financial Position, Activity Statement, etc.

\*\*\*OR\*\*\*

Independent Auditors' Reports

I have attached the required documentation.

21. **Optional:** Copy of the organization's most recently approved strategic plan or other supporting documents.

**Additional Information:**

Successful applicants will be required to enter into Park City's Special Service Contract Agreement, in its current form, with the City. A draft of the agreement is attached to this application as Exhibit "A" and incorporated herein.

Park City Municipal Corporation reserves the right to reject any proposals for any reason. Proposals lacking the required information will not be considered. All submittals shall be public records in accordance with government records regulations ("GRAMA") unless otherwise designated business confidential by the applicant and approved by the City under pursuant to UCA Utah Code §§ 63G-2-305 & -309, as amended.

**Application Certification:**

I certify the information included in this application is accurate and complete to the best of my knowledge.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_