



# **Programmatic Partnership Application**

***Winter - Spring 2021 (January - May)***

## **City of Mobile**

*William S. Stimpson, Mayor*

Shonnda R. Smith, Senior Director

**ALL applicants MUST attend a MANDATORY Technical Assistance workshop BEFORE submitting an application.**

## PROGRAMMATIC PARTNERSHIP APPLICATION

Thank you for your interest in partnering with the Mobile Parks and Recreation Department (MPRD). MPRD is working to provide high quality recreational, cultural, and community programming to the City of Mobile residents of all ages and abilities. We will be doing this through our core program offerings and effective partnerships with additional organizations.

This application is for individuals, organizations, or other entities interested in providing programs for the residents of the City of Mobile within a MPRD recreation center and/or MPRD park/playground. MPRD offers space within our facilities for programmatic activities at reasonable or no cost to the provider. If an application is approved, the provider will be required to enter into a Facility Use Agreement with the City of Mobile prior to program implementation.

## APPLICATION EVALUATION CRITERIA

Upon verification of eligibility, each application will be scored by seven (7) or more members of a formal review committee providing the following levels of representation:

- Four (4) Community members representing a city council district (will rotate through council districts each semester).
- Three (3) MPRD employees

Each application will be reviewed and given a maximum score of one hundred (100) points. Final decisions will be confirmed as a group by the review committee described above.

**Please note that this application is for consideration and does not guarantee that you will be selected as a programmatic partner.**

## PROGRAMMATIC EXPECTATIONS

The following programmatic requirements/expectations apply to all applications for consideration and are due no later than the day programming begins:

- All onsite staff and volunteers must complete a Child Abuse” training – (The link for the free mandated reporter/child abuse training is – <https://aldhr.remote-learner.net/>)
- National background checks on all onsite staff and volunteers, including furnished proof of checks to MPRD for verification. The cost for background checks is \$18.50. The link to login to complete your background check is – <https://mobilepandrdept.quickapp.pro/>

The categories of Performing Arts, Youth/Adult Sports and Fitness, Special Needs, and Academic Enrichment also require the following:

- Two (2) years of proven experience performing and/or operating the specified area of programming, e.g.:
  - Documented volunteer hours with the specified area of programming; and/or
  - Documentation of performing and/or operation of a program in the specified focus area.
  - Valid certification (if necessary)

Programmatic partnerships will be considered for yearly renewal based on evaluation of performance in the following areas:

- Program participants adherence to check-in policies;
- Submission of weekly registration (if applicable) and/or participation data;
- MPRD Program Manager feedback;
  - Timely reporting of program deliverables;
  - Communication with Program Manager or MPRD Representative;
- MPRD Community Center staff feedback;
  - Adherence to overall MPRD rules and regulations while within a Recreation Center;
  - Cleanliness, order, timeliness, and readiness during programming hours of operation; and
- Timely submission of required performance and financial expenditure reports if applicable.

Evaluations will be conducted mid-season and post-season by Community Center and Program staff members.

## CATEGORIES FOR PROGRAMMATIC PARTNERSHIPS

MPRD is seeking programmatic partnerships in the following six (6) categories (Illustrative list; non-exhaustive):

**1. Arts and Culture**

- Cartooning
- Photography
- Improv
- Traditional Culture
- Theater

**2. Music**

- Music Production and Editing
- Strings & Woodwinds
- Voice Lessons
- Song Writing

**3. Performing Arts**

- Dance: Latin, Modern, Ballet Hip Hop, Bollywood
- Band
- Vocal/Choir

**4. Youth Sports & Fitness**

- Girls Focused Sports & Fitness
- Non-traditional – Running, Indoor Hockey, Lacrosse, BMX, Boxing, Martial Arts, and Rugby

5. Special Needs

6. Academic Enrichment

- Tutoring
- Homework Help
- Standardized Test Prep

<b>SUBMISSION REQUIREMENTS</b>
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**Applicant or an organizational representative must attend one of the following MANDATORY Technical Assistance Workshops PRIOR to submitting an application for consideration.**

Date	Time	Location
Tuesday, Sept. 1 <sup>st</sup>	10:30 AM – 12:00 PM	<b>Zoom Meeting</b>
Wednesday, Sept. 2 <sup>nd</sup>	6:00 PM – 7:30 PM	<b>Zoom Meeting</b>
Thursday, Sept. 3 <sup>rd</sup>	6:00 PM – 7:30 PM	<b>Zoom Meeting</b>

***\*\*NOTE: The submission of this application is for program consideration and does NOT guarantee partnership with MPRD. \****

Please utilize the checklist below to ensure the submission of a complete application. Submission of any required application elements after the submission deadline will deem the application ineligible for consideration and will not move forward in the review process.

The following elements are required for an application to be considered complete:

- ☐ Technical Assistance Workshop Attendance
- ☐ Application Cover Page
- ☐ Short Narrative Description of Program – ½ Page or 750 Words

**\*Please make sure that you provide ALL the requested information in your program narrative.**

- ☐ Required Attachments and Eligibility Documentation
- ☐ Signed Agreement Page
- ☐ Electronic or Hand delivered submission by deadline

<b>APPLICATION DEADLINE</b>
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**\*\*Applications due Friday, Sept. 18, 2020 at 5 pm\*\***

Completed **applications for consideration** may be submitted as follows:

- Via email to [MPRDPrograms@cityofmobile.org](mailto:MPRDPrograms@cityofmobile.org) or

- In person: Attention – Operations Manager at the MPRD Administrative Office, 48 N. Sage Avenue, Mobile, Alabama 36607

Any and all questions related to this application and/or the submission process must be submitted in writing via email to [MPRDPrograms@cityofmobile.org](mailto:MPRDPrograms@cityofmobile.org).

<b>ELIGIBILITY DOCUMENTATION</b>
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**INDIVIDUALS, BUSINESSES and/or ORGANIZATIONS are REQUIRED to submit:**

**Child Abuse Awareness Training Certificate** <https://aldhr.remote-learner.net/>

**National Background Check** <https://mobilepandrdept.quickapp.pro/>

**All Organizations, Individuals charging fees, and Individuals conducting physical activity**

- **Business License**
  - a. This comes with acquiring a business license to show proof that you are able to sign on behalf of the business. It also proves that you are eligible to conduct business in the City of Mobile.
- **Minimum of \$300,000 in General Liability Insurance**
  - Must include Liability
  - If you have more than five-staff you must also include Workers Compensation.
- **The City of Mobile must be listed as a Rider on the insurance**

**\*Individuals who are providing services that are not physical in nature and not charging a fee will only be required to complete the Facility Use Agreement.**

Applications that receive final recommendation to become a MPRD programmatic partner will be required to furnish a Certificate of General Liability Insurance within seven (7) business days of receiving notification. **NO exceptions will be allowed.**

**[NOTE:** *Applications for consideration that are ineligible due to incomplete requirements will not move forward in the review process. Such applications may be completed then resubmitted for the next season.***]**

**WINTER-SPRING 2021 PROGRAMMATIC PARTNERSHIP TIMELINE**

Date	Action Item
08/21/20	Partnership Application Released
09/01/20	<b>Mandatory Technical Assistance Workshop #1:</b> 10:30 AM – 12:00 PM <i>Zoom Meeting</i>
09/02/20	<b>Mandatory Technical Assistance Workshop #2:</b> 6:00 PM – 7:30 PM <i>Zoom Meeting</i>
09/03/20	<b>Mandatory Technical Assistance Workshop #3</b> 6:00 PM – 7:30 PM <i>Zoom Meeting</i>
09/18/20 – 5pm	Partnership Application Submission Deadline
09/22/20– 10/02/20	Applications Reviewed by External Review Committee
10/08/20	Partner Presentations to Review Panel
10/13/20	Applicant Notified of Preliminary Recommendations
10/23/20	All Required Docs Due to MPRD by Applicants
11/20/20	<b>*Mandatory* New Partner Meeting (New Partners)</b> 5:30 PM - 6:30 PM <i>City of Mobile Parks and Recreation Office (48 N. Sage Ave.)</i>
01/11/21	Winter-Spring Programming Begins

**Reminder: ALL applicants MUST attend 1 MANDATORY Technical Assistance Workshop BEFORE submitting an application.**

## APPLICATION COVER PAGE

### **ORGANIZATION INFORMATION**

Organization / Individuals Name: \_\_\_\_\_

Mailing Address (including City, State, and Zip): \_\_\_\_\_

Website: \_\_\_\_\_

Program Name (if different from organization name): \_\_\_\_\_

Type of Organization (*Please check all that apply*): ☐ Individual ☐ Federal Non-Profit (501c3)

☐ State Non-profit ☐ Community Based ☐ Faith Based ☐ Other: \_\_\_\_\_

### **PRIMARY PROGRAM CONTACT INFORMATION**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email address: \_\_\_\_\_

### **EXECUTIVE DIRECTOR/PRESIDENT/CEO CONTACT INFORMATION**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

### **PROGRAMMATIC INFORMATION-MANDATORY**

Program Name (if different from organization name): \_\_\_\_\_

Target population for service (*Please check all that apply*):

☐ Youth (Ages 5-11) ☐ Teen (Ages 12-17) ☐ Adult (Ages 18-54) ☐ Senior (Ages 55+)

Gender specific? ☐ No ☐ Yes: ☐ Female ☐ Male ☐ Other: \_\_\_\_\_

Mission statement of the applicant organization: \_\_\_\_\_

**PROGRAMMATIC NARRATIVE**  
**ALL QUESTIONS MANDATORY**

1. Please provide a narrative overview (1/2 page or 750 words max) of the proposed program:
  - a. the history of the proposed program;
  - b. current location/hours of operation;
  - c. staff members (and their qualifications) that will be providing the service;
  - d. target population and/or communities that have been served;
  - e. benefit of the program.
2. What is the maximum number of participants per class? (January– May ): \_\_\_\_\_
3. Request for MPRD facility for programmatic implementation

Preference	MPRD Facility	Day(s) of the week	Beginning & ending time
1)			
2)			
3)			

**List of MPRD Facilities:**

Dotch Community Center (3100 Banks Ave.)	Newhouse Park Center (2960 Alston Dr.)
Figures Community Center (658 Donald St.)	Rickarby Neighborhood Center (550 Rickarby St.)
Harmon Community Center (1611 Belfast St.)	Seals Community Center (540 Texas St.)
Hillsdale Community Center (6024 Lorma Road)	Springhill Community Center (1151 Springhill Avenue)
Hope Community Center (850 Edwards St.)	Stotts Neighborhood Center (2150 Demetropolis Ave.)
Laun Park Center (5401 Windmill Dr.)	Sullivan Community Center (351 N. Catherine St.)
Mitternight Neighborhood Center (5310 Colonial Oaks Dr. N)	Mobile Adult Center (1301 Azalea Rd.)
Parkway Senior Center (1600 Boykin Blvd.)	
Tricksey Senior Center (3055 Banks Ave.)	
Connie Hudson Mobile Regional Center (3201 Hillcrest Rd.)	

4. What indoor space is being requested for the proposed program to be effective?  
(Please be specific e.g., dance room, Multi-purpose room, Art room, Gym, etc.)  
\_\_\_\_\_
5. What outdoor space is being requested for the proposed program to be effective?  
(Please be specific e.g., park, shelter, field, etc.)  
\_\_\_\_\_
6. Number of projected staff or volunteers: \_\_\_\_\_ Staff \_\_\_\_\_ Volunteers



7. Describe the orientation to be provided for the staff and/or volunteers prior to program implementation. \_\_\_\_\_

8. Will there be any collaborative partners included in the proposed program?

☐ Yes ☐ No

If yes, please state the following:

Name of collaborative partner: \_\_\_\_\_

Intended Role(s)/responsibility (ies) of the collaborative partner: \_\_\_\_\_

9. Please describe how you plan to market for this program, including but not limited to the recruitment of participants. \_\_\_\_\_

**\*\*Reminder: MPRD does NOT provide funding for Programmatic Partnerships. \*\***

10. Are there fees associated with participating in this program? ☐ Yes ☐ No

If yes, what is the fee? \_\_\_\_\_ per participant/per session

**NOTE: The maximum allowable rate is \$30.00 per session per participant. Revenues collected through the proposed program are to be reinvested into the approved programming at the designated site. Priority consideration is given to organizations offering little or no cost to participants.**

<b>SIGNATURE</b>
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***Please obtain the appropriate signature and submit for the application packet to be considered complete.***

**Please read and review carefully before signing.**

- I understand that submission of this application is for program consideration and does NOT guarantee that MPRD will partner with my organization or provide space at the requested facilities.
- I understand that as capacity allows, MPRD will select programs aligned with the mission of the organization and deemed best to meet the needs of the community.
- I understand that if accepted as a Programmatic Partner, our organization will enter in a Facility Use Agreement with the City of Mobile
- I agree to provide all required documents according to the timeline provided.

\_\_\_\_\_  
**Authorized Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Title**

\_\_\_\_\_  
**Name of Organization**