**Serve Washington**

**Waiver(s)**

Serve Washington Request for Grant Applications

AmeriCorps State Competitive Grant

Federal Fiscal Year 2024

Assistance Listing 94-006

**Waiver requests can be submitted for any of the following: Minimum MSY, Alternative Match, and/or Volunteer Generation.**

**Fill out the corresponding section(s) to your request(s) and submit as an additional document as noted in the RFGA.**

# **WAIVER 1. MINIMUM MSY**

\*See RFGA for more details on the 10 MSY minimum.

Answer the following:

1. How many MSYs are you requesting, and in what slot configuration (i.e. how many full time members, how many half time, how many quarter time, etc.).
2. Why is a smaller program better suited to addressing the identified community need?
3. Why is a smaller program better suited to the applicant organization?
4. What attempts have you made to reach out to similar organizations to partner to reach the 10 MSY minimum?
5. Any other information related to your waiver request.

|  |
| --- |
| *For Serve WA use only: Sign/Date:*  *Approved  Rejected* |

# **WAIVER 2. ALTERNATIVE MATCH**

\*See the NOFO and Application Instructions for requirements to qualify for an alternative match schedule and details on how to find the qualifying data required.

Answer the following:

1. **Basis of Request** 
   1. Is the basis for this request determined by the definition of rural county or severely economically distressed community as described in the instructions?
   2. Describe where your program operates and include the address of the legal applicant.

1. **Rural Counties** 
   1. Describe the economic conditions.
   2. Confirm that your county has a Beale code of 4, 5, 6, 7, 8, or 9.

1. **Economically Distressed Counties**
   1. Provide your county per-capita income, poverty rate, and unemployment levels.
   2. Demonstrate that your county per-capita income, poverty, and unemployment levels are above or below the national averages as requested by AmeriCorps. Identify the data source(s) used to make your determination. Or, demonstrate that the area served lacks basic infrastructure.
   3. Provide any other statistics you deem relevant to demonstrate your county is economically distressed.
2. **Program Location:** If you believe the location of your program should not be based on the address of the legal applicant, describe your justification for requesting an alternative location(s).
3. **Other:** Provide any other justification and information for your request that is not presented in the responses to the above.

|  |
| --- |
| *For Serve WA use only: Sign/Date:*  *Approved  Rejected* |

**WAIVER 3. VOLUNTEER GENERATION**

There is an expectation that all programs engage AmeriCorps members in recruiting and/or managing community volunteers unless there is a significant and compelling justification as to why this is not a feasible part of the AmeriCorps program design. Applicants should keep in mind that AmeriCorps members can engage with volunteers in ways that fall outside of the assigned primary service activity. For example, AmeriCorps members could plan a volunteer event on National Days of Service such as the 9/11 Day of Service and Remembrance and/or the Martin Luther King Jr. (MLK) Day of Service.

Answer the following:

1. Does your organization currently utilize community volunteers? Why or why not?
2. Why do you believe you are unable to utilize community volunteers to expand the reach/impact of your program in the community?
3. Do you plan to participate in National Days of Service as required? Why are you unable to utilize community volunteers during Days of Service?
4. Any other information related to your waiver request.

|  |
| --- |
| *For Serve WA use only: Sign/Date:*  *Approved  Rejected* |