# GRANT TRACKING FORM

*Appleton*

## PART #1: Notification of Grant Funds
(email to tony.saucerman@appleton.org)

**APPLICANT DEPARTMENT:** Appleton Fire Department          **DATE:** 05 / 15 / 16

**APPLICANT DEPARTMENT GRANT CONTACT NAME/TITLE:** Ryan Weyers/Battalion Chief

**COMMITTEE OF JURISDICTION:** Safety & Licensing Committee

**NAME OF GRANT/FUNDING SOURCE:** Wallace Family Foundation

**AMOUNT OF GRANT REQUEST:** $ 9,400          **LOCAL MATCH REQUIREMENT:** $ 2,350

**SOURCE OF MATCH:** ☑ General Fund   ☐ Non-General Fund   ☐ Not Applicable

**TIMEFRAME OF GRANT:** 06 / 01 / 2019   through   12 / 31 / 2019

**TYPE OF GRANT REQUEST:** ☑ Monetary   ☐ Other (explain under 'purpose of grant')

**PURPOSE OF GRANT (summary):**

This grant would provide emotional wellness checks for all employees through a licensed professional counselor. The counselor will complete an assessment and complete follow-up meetings with staff.

**How does the grant meet City/Department/Program goals?**

This grant will assist the department with our goal to 'Enhance the health and safety of AFD members'. More specifically, our objective to 'Improve the overall safety of AFD members through emotional wellness.'

**What are the personnel requirements (include both existing and new staff) of the grant?**

There are no personnel requirements other than providing staff the time for the assessment and follow up.

**DEPARTMENT HEAD SIGNATURE:** _____

## PART #2: Request to Accept Grant Funds
(complete after notification of grant award; email to tony.saucerman@appleton.org)

**AMOUNT OF GRANT AWARD:** $_____   **FEDERAL/STATE ID #:**_____

**LOCAL MATCH REQUIREMENT:** $_____

**Please describe the source of match, if applicable:**


**Please describe any major changes in proposed grant-funded activities:**


| PART | TO: | DATE: | TO: | DATE: | TO: | DATE: |
|------|-----|-------|-----|-------|-----|-------|
| #1: Request to Apply | Finance Dept | | COJ – Info/Action | | FAC – Info/Action | |
| #2: Request to Accept | Finance Dept | | COJ – Action | | FAC – Action | |

*COJ = Committee of Jurisdiction*          *FAC = Finance and Administration Committee*