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| Logo, company name  Description automatically generated A screenshot of a computer  Description automatically generated with low confidence  **AmeriCorps VISTA Program Site Application 2025-2026** | | | | | | **For SerVermont Program Use Only:**  Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date Responded To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **APPLICANT ORGANIZATION** | | | | | **VISTA HOST SITE SUPERVISOR** (If not Organization Director) | | | |
| Name | | | | | Name | | | |
| Address | | | | | Address | | | |
| City | | State | Zip Code + 4 | | City | | State | Zip Code + 4 |
| Telephone | | | | | Telephone | | | |
| Facsimile | | | | | Facsimile | | | |
| Email | | | | | Email | | | |
| Website | | | | | Title | | | |
| Name of Organization Director | | | | | Is the Organization Delinquent on any Federal Debt?  \_\_\_\_\_ No \_\_\_\_\_ Yes (If yes, attach an explanation) | | | |
| Title | | | | | Total Number of VISTA Members Requested \_\_\_\_\_\_\_ | | | |
| Organization's Employer Identification Number (EIN) | | | | | | | | |
| Does your organization have a fiscal sponsor? If yes, please explain the reporting and oversight structure. | | | | | | | | |
| Type of Organization  \_\_\_\_\_Non-profit, with 501c(3) status \_\_\_\_\_Non-profit, without 501c(3) status \_\_\_\_\_ State Agency  \_\_\_\_\_County or Municipal Agency \_\_\_\_\_School \_\_\_\_\_ Other (\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) | | | | | | | | |
| SerVermont expects that organizations will contribute financially for the VISTA(s) requested. AmeriCorps provides a living allowance, health reimbursement, and an education award or end-of-service stipend. The Cost Share covers monthly training and ongoing technical assistance. The Cost Share responsibility is $6,000 for first year sites and increases by $1,000 each year (not to exceed $8,000). Scholarships may be considered on a case-by-case basis. | | | | | | | | |
| CURRENT ORGANIZATIONAL FUNDING LEVEL | | | | | | | |
| Source of Funds | Total Dollar Amount | | | **Dollar Amount to Be Allocated to AmeriCorps VISTA Member Administrative Fee (may not be federal dollars)** | | | | |
| Federal |  | | | NOT ALLOWABLE | | | | |
| State |  | | |  | | | | |
| Local Government |  | | |  | | | | |
| Other (Specify) |  | | |  | | | | |
| **TOTAL** |  | | |  | | | | |
| In the last five years, has the organization had any VISTA, AmeriCorps, Senior Corps, or other national service resources? If yes, please state the number and the program name.\_\_\_\_\_ No \_\_\_\_\_ Yes:  \_\_\_\_ VISTA Member(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_ AmeriCorps State/National Member(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_ Senior Corps Member(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | |

**Please indicate which priority area your VISTA project will address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **2025-2026 SerVermont AmeriCorps VISTA Priority Areas** | | |
| Focus Area | Objective | Programming Area |
| Economic Opportunity | Housing | Transitioning individuals into or helping them remain in safe, affordable housing with a special focus on flood recovery, veterans and those displaced due to COVID-19 related unemployment. Organizations focused on eviction prevention are encouraged to apply. |
| Employment / Workforce Development | Improving or creating job skills training programs that lead to increased employment. |
| Federal Benefit Access | Increasing awareness of and access to federal benefit programs such as the Earned Income Tax Credit and Child Tax Credit, Supplemental Nutrition Assistance Program, Special Supplemental Nutrition Program for Women, Infants and Children, and others |
| Healthy Futures | Food Security | Alleviating hunger and increasing access to nutritious food. Potential partners may include, but are not limited to, individual food banks and pantries, networks of food banks, K-12 schools, community gardens, and after-school programs. |
| Access to Health Care | Connecting economically disadvantaged individuals to preventative education and treatment/recovery services regarding the COVID-19 pandemic or opioid crisis, to include mental health services. |
| Environmental Stewardship | Energy Efficiency | Connecting underserved populations to renewable energy and energy efficient practices |
| Awareness & Stewardship | Building community resilience |
| Education | School Readiness | Learning recovery for economically disadvantaged children. |
| K-12 Success | In student educational and behavioral outcomes in low-achieving schools. |
| Post Secondary Support for Career and College. | Career and Technical Education (CTE) to help students gain the skills they need to compete for employment and college access and success for low-income students. |
| Veteran and Military Families | Economic opportunity | Employment and homelessness prevention/reduction. |
| Education | School readiness, success in K-12 education, and post-secondary career and college success. |
| Healthy futures | Access to health services, including substance abuse prevention and recovery and mental health services. |

**Describe the mission of your organization:**

**Describe the poverty alleviation activities of your organization:**

**Describe the low-income population served by this project:**

**What geographic area is covered by this project?**

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| |  |  | | --- | --- | | **✓** | **Choose the goal that best reflects your intent at this site. Please only select one.** | |  | **Scale/reach** – you aim to increase your organization or program’s ability to serve more people, serve new groups of people, or provide new or expanded types of services | |  | **Effectiveness** – you aim to increase your organization or program’s ability to achieve better outcomes for beneficiaries | |  | **Efficiency** - you aim to increase your organization or program’s ability to provide improved outcomes for beneficiaries with the same level of resources, or to improve or maintain consistent quality of services with fewer resources | |  | **Leveraged Resources** - you aim to increase your organization or program’s ability to generate additional resources or assets, such as funding, volunteers, in-kind support, and partnerships |   **In what types of activities will the member engage? (check all that apply)** |

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| **✓** | **Task** | **Examples** |
|  | Programs | 1] Create curricula. 2] Pilot new programs (nutrition, internships, agricultural, housing, veterans, etc.). 3] Evaluate programs. 4] Develop service opportunities for individuals and families. 5] Design ways to replicate programs. |
|  | Resource Development | 1] Create plan. 2] Write grants. 3] Procure in-kind donations. 4] Plan fundraising events. 5] Develop strategies to build donor base. |
|  | Community Volunteer Management (includes mentors) | 1] Develop plan to recruit and manage volunteers. 2] Develop materials (forms, position descriptions). 3] Recruit, screen, train, manage, and recognize volunteers.  4] Create databases. |
|  | Public Relations (PR) | 1] Develop PR plan. 2] Develop and disseminate PR tools (social media, brochures, press releases, articles). 3] Make presentations in the community. |
|  | Community Relations | 1] Develop partnerships in community. 2] Collaborate with partners to improve opportunities for individuals and families. |
|  | Operational Systems | 1] Create or enhance databases. 2] Develop evaluation processes. 3] Design toolkits for future replication of programs. |

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| **#** | **Choose at least one performance measure and enter your target number in the left column.** |
|  | Number of organizations (not counting your own) that received capacity building services |
|  | Number of organizations (not counting your own) that increase their efficiency, effectiveness, and/or program reach |
|  | Number of community volunteers recruited |
|  | Number of community volunteers managed |
|  | Dollar value of cash resources leveraged |
|  | Dollar value of in-kind resources leveraged |

*Note: SerVermont will count each host site as an organization receiving capacity building services and will survey each site to report on the number of organizations with increased efficiency or effectiveness so only include partner organizations in these categories. Projects that do not align with the performance measures above will be asked to identify a performance measure and target for the year as part of the VISTA’s orientation.*

**Describe the ways in which you will measure the performance measure selected above and how you plan to collect this data:**

**Sites are typically granted a VISTA for a three-year cycle. Please describe the goals you envision for this VISTA project – both for this year and by the end of the cycle. For returning sites, please indicate any changes based on your experience this year:**

**VISTA Recruitment is a shared responsibility between the host site and SerVermont. It is important that your organization is active and responsive during the recruitment process. Please describe your plans for outreach and recruitment:**

**How will you ensure that members of the low-income community to be served have input into the project plan development and execution?**

**How will your organization and the community work to ensure the sustainability of what the VISTA member accomplishes even after the site no longer receives a VISTA member?**

**Placing VISTA members in an inclusive and supportive environment reflects the core values of SerVermont. Please use this space to share your organization’s equity statement or other ongoing diversity and inclusion initiatives or staff trainings available to your staff.**

**VISTA Sites are required to provide mileage reimbursement for service-related travel as well as other tools the member will need to complete the assignment (work space, telephone, computer, internet, office supplies, training). Sites can not give cash to members, but they can offer additional assistance. Will your site be able to offer any additional incentives for your VISTA (gas or grocery card, rental assistance paid to landlord, etc)? If so, what are you able to offer?**

**Supervisors are required to spend at least one hour a week in formal direct supervision with their member. Please describe your plans for supervision of the VISTA member.**

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| Federal law requires that sites make reasonable accommodations for persons with a disability. |
| 1) Are there anyfactorswe should be aware of when assigning a VISTA member with a disability to this organization, such as availability of transportation and housing, accessibility of facilities, etc.  2) Indicate whether services to be provided are accessible to members of the community who are disabled. |
| Are the employees at your organization unionized? \_\_\_\_ Yes \_\_\_\_\_No  If yes, you must submit written support from the union members for the VISTA position. |

**Attachments:**

**If this is your first year applying you must include the following attachments:**

* Job Description of Site Supervisor
* Resume of Site Supervisor
* Letter of support from board or advisory committee. This letter must support placing a member at the site and paying the cost share.
* List of Board of Directors

**Agency Director Board of Directors/Advisory Council Representative**

|  |  |
| --- | --- |
| Signature | Signature |
| Printed Name | Printed Name |
| Title | Title |
| Date | Date |