

2018-2019 Grant Application

ANDAR INSTRUCTIONS MANUAL



LINK TO ANDAR SIGN ON PAGE:

<https://epledge.unitedwayatlanta.org/Begin.jsp>

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Welcome




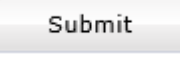
Welcome to the Andar online database system. These guidelines have been written to familiarize you with how to use the Andar system to submit United Way grant applications and reports.

This system is different from the previous online database (Online Database Manager – ODM). One of the main differences with this is instead of agencies using a generic login to access, you will use personal logins. Additionally, each section is a different screen and there is not an email trigger for submitting sections in the Andar system.

What is Andar?

Andar is a unique system that allows you to apply for United Way grants, submit reports and review donor designations reports. The Community Building module is the grants management for United Way. There is another platform which allows you to run Acknowledgement reports of donor designations. You can access both platforms through one connective web portal.

Helpful Tips for Andar System

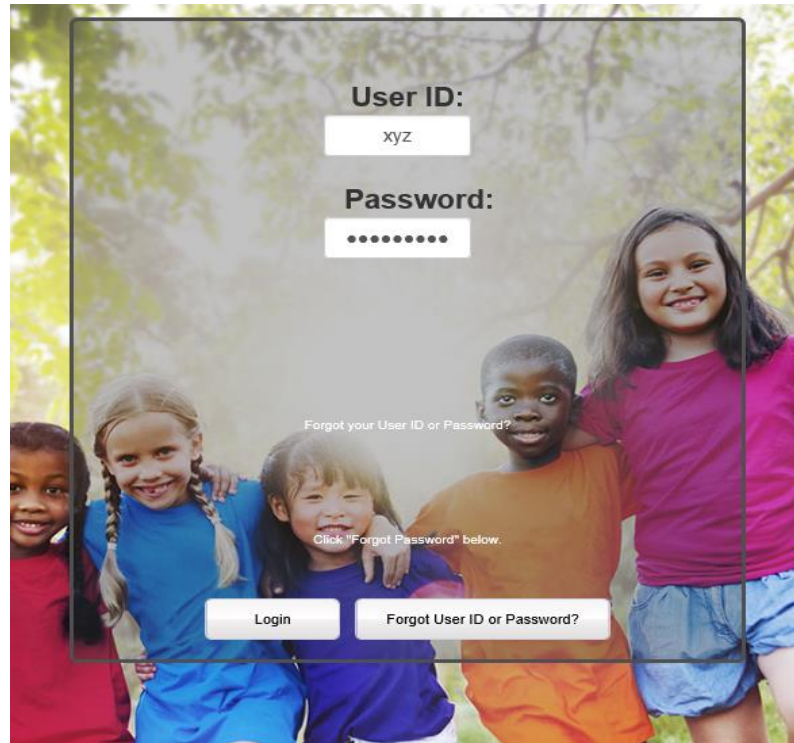
- While multiple agency staff can work in the system at the same time, we highly recommend that each staff person works on different sections
- The Andar system will automatically log out after a period of inactivity approx. (5 min). You will then need to login in again at: <https://epledge.unitedwayatlanta.org/Begin.jsp>
- Remember to **SAVE** as you enter data into each section,  = **in progress**.
- Make sure you are completely done entering your data **before** you click . **After** you click  you **cannot go back and change any data**. Each item of the package is saved and submitted independently.
- **Any data that is submitted cannot be changed.**  = **complete and send to United Way**.
- All narrative fields throughout the system has a **1,000-word limit**.
- When you close out of the application, click on the Log off Menu Item. **DO NOT CLICK ON THE "X"** in the upper right-hand corner to close or log out of the system or you will receive an error message.
- Send all communications (i.e., staff changes, questions) related to Andar system to grantee@unitedwayatlanta.org

Andar Log in

STEP 1: Enter this link into your web browser: <https://epledge.unitedwayatlanta.org/Begin.jsp> (save this in your Favorites for later access)

STEP 2: Type in your **User ID** and the **Password**.

For new or first time users to Andar: You must send an email request to grantee@unitedwayatlanta.org with your name and organization email address in order to be set-up to access Andar. After you are set-up, United Way will send a communication including your login information for Andar. You will be prompted to create a new Password, one that is convenient for **you** to remember. (Your password must contain at least 1 upper case letter, at least 1 lower case letter, at least one number and a minimum of 8 characters.)



ANDAR LOG IN cont'd

STEP 3: For returning users, if you forget your password, click “Forgot Password” at the login screen to reset your password.

Click **SAVE** to retain your password.



User ID and Password Reminder

Enter your User ID

(optional):

Enter your e-Mail

address:

Verification Code

P Z T H

Enter code

TAB 1: Home Page

There are **9 (nine tabs)** across the top of the homepage in the **ANDAR** menu (located at the top of the screen).

Home tab – This provides a welcome message and general information (you will see key deadlines, where to go for reference materials and other important information.)

Andar Home Page



Community Building

Hello UWGA Test Agency,


Welcome back to Andar.

2018 – 2019 Child Well-Being Investment Process.

The 2018-2019 Grant Application template will be available under the RESOURCES tab beginning February 7, 2018. The Application template will help you to review the questions and gather all the information required to complete the Grant application which will open on February 12, 2018 and will be available under the FORMS tab. The deadline to complete the full Child Well-Being Community Investment Grant application is March 12, 2018.

TAB 2: Organization Profile

Complete the fields requiring contact information for the Organization; address, P.O. Box, City, State, Zip etc.

When you have entered all data fields, click  (If you would like to add an organization Logo to your profile see next page).



Organization Profile

UWGA Test Agency (7812431 - Agency)
100 Help St
Atlanta GA 30303

[Open All](#) | [Close All](#)


- UWGA Test Agency (7812431 - Agency)
 - Education, Childcare - Test Pgm (9989492 - Program)
 - Health, Babies Born Healthy - Test Pgm (8145161 - Program)
 - Homelessness, Assessment Cntr-Test Pgm (9989518 - Program)
 - Income, Asset Bldg and Preserv -Test (9989526 - Program)


*Name:	*Name 1: <input type="text" value="UWGA Test Agency"/> Name 2: <input type="text"/>
Agency Street Address:	Address Line 1: <input type="text" value="100 Help St"/> Address Line 2: <input type="text"/> City: <input type="text" value="Atlanta"/> State: <input type="text" value="Georgia"/> Zip Code: <input type="text" value="30303"/> Country: <input type="text" value="United States"/>
Agency PO Box Address (if different from Agency Address):	Address Line 1: <input type="text"/>

<http://www.unitedwayatlanta.org/>

Click on Agency Profile and complete contact information for each Program (enter the addresses where actual site visits will take place) and add the additional contact information in the required areas.

TAB 2: Organization Profile cont'd

Beneath the  button at the bottom is the option to add a **Logo** of your organization to the page.

It is **not required** but, if you choose to do so; click on the  button

Locate your company Logo on your computer; click on Browse; click **Add**.



Logo Maintenance

All About Developmental Disabilities

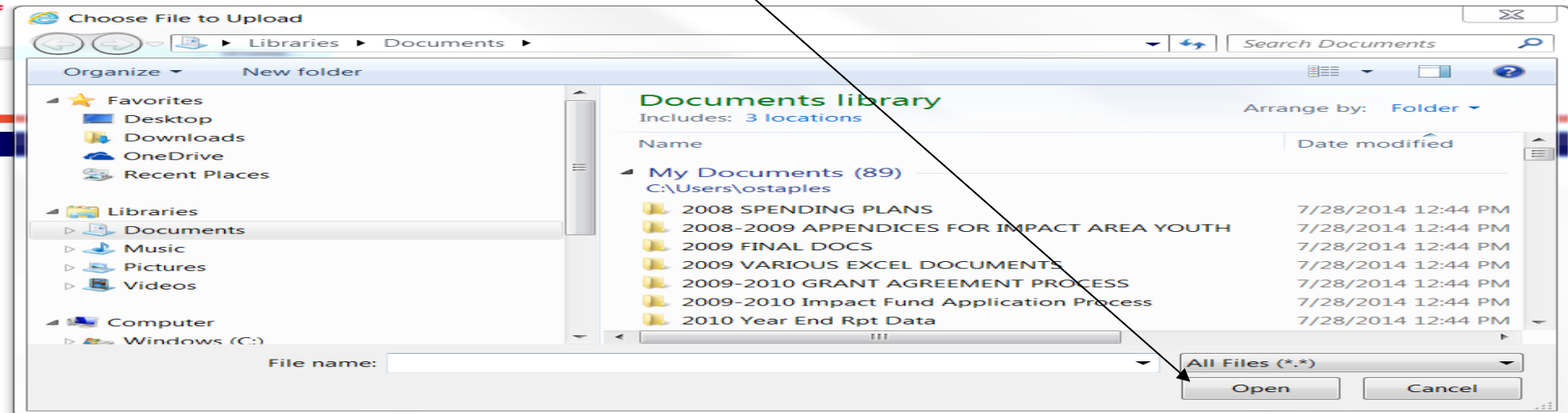
Browse...

ADD

Cancel

Agency - Online

Locate the file containing your Logo; then click **Open**



TAB 2: Organization Profile cont'd

You will now see the file containing your Logo appear on the screen.



Logo Maintenance

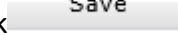
All About Developmental Disabilities

C:\Users\lostaples\Documents\Desktop files\2010-2011 Browse...

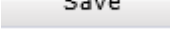
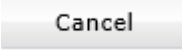
ADD

[Cancel](#)

Agency - Online

Click **Add** your Logo will now appear on the Andar screen. Click  .

TAB 3: My Profile

This tab allows you to enter/update your individual contact information to retain data click  or if you have no changes, Click 

Profile

*Name

Prefix
Ms.

First
Bhavana

Middle

Last
Pol

Suffix

Work email:
bpol@uwma.org

Business Phone:

Area
0


Number
0

Ext
0



Employer
United Way of Greater Atlanta
40 Courtland St NE Ste 300
Atlanta, GA., 30303

Employee ID
UNKNOWN

User ID
bpol

Password
***** 

Items marked with an asterisk (*) are required

TAB 4: Organization Description

You will see a yellow folder followed by your agency name, click on your agency name.

Click Add. Note: You may already show an Organization Description. If you have no existing description, you can add one by clicking on the **ADD** button. Repeat these same steps to add program description(s).



Descriptions

UWGA Test Agency (7812431 - Agency)
100 Help Street
Atlanta GA 30303

[Open All](#) | [Close All](#)

- UWGA Test Agency (7812431 - Agency)
 - Education, Childcare - Test Pgm (9989492 - Program)
 - Health, Babies Born Healthy - Test Pgm (8145161 - Program)
 - Homelessness, Assessment Cntr-Test Pgm (9989518 - Program)
 - Income, Asset Bldg and Preserv -Test (9989526 - Program)

	Type	Description	Effective	Expiry
X	Agency	This is a test		

ADD

TAB 4: Organization and Program Descriptions cont'd

Add Description

UWGA Test Agency

Description Type:

Effective:

Expiry:

Description:

[Add](#)


Next click on the down arrow button. Select - Agency or Mission Statement. Enter your narrative. (You can only add one at a time). If you wish to add your Mission Statement repeat the process and select Mission Statement from the drop down. Click **Add**. Repeat these same steps to add program description(s).





You will now see it appear **after** you click **Add**
If you need to **edit** the description click the icon that looks like a **pencil** then Click **Update**.

TAB 5: Forms

Click on this icon to save your report on your computer

Forms































Due Date	Description	Status
Mar 12, 2018	  Behavioral Health and Wellness - 2018-2019 Application	Outstanding
Mar 12, 2018	  Organization Information, Management & Finances - 2018-2019 Application	Outstanding

Organization Information, Management & Finances

Click on the Organization Information, Management & Finance Form to open. This form pertains to your Agency (*not* the programs).

Organization Information, Management & Finances - 2018-2019 Application - Forms

UWGA Test Agency - Agency

		Section	Status
		Organization Information and Management	Outstanding
		Organization Finances	Outstanding
		Current Board Roster	Outstanding
		Last Fiscal Year (LFY) - Balance sheet (Revenue less than \$100,000)	Outstanding
		Last Fiscal Year (LFY) - Income statement (Revenue less than \$100,000)	Outstanding
		LFY Compilation (Revenue is \$100,000 - \$ 249,999)	Outstanding
		LFY Review (Revenue is \$250,000 - \$499,999)	Outstanding
		LFY Audit (Revenue is greater than \$500,000)	Outstanding
		LFY- Budget (All revenue levels)	Outstanding
		LFY- 990 Form (All revenue levels)	Outstanding
		Current Fiscal Year (CFY) - Balance sheet (All revenue levels)	Outstanding
		CFY - Income Statement (All revenue levels)	Outstanding
		CFY- Budget (All revenue levels)	Outstanding
		Next fiscal year (NFY) - Budget (All revenue levels)	Outstanding


On this page you will upload all supporting documents that are requested.

Respond to each question. If you need clarification or have questions, click on the Resources tab. If you cannot find the answer you need, send an email to grantee@unitedwayatlanta.org.

Once you've completed Organization Information and Management and Organization Finances sections, Click on Current Board Roster and upload the appropriate document.

Now you will need to upload last year's fiscal documents, your current year's fiscal documents and next year's budget. Click on the link that pertains to your agency based on revenue size. After you have uploaded all of the documents, click on **Return**.

TAB 5: Forms cont'd

After you click on the Strategy program, you will see different sections of the application. You need to complete every section and hit , so that your status will change to "Complete" from Outstanding.

Forms

Once you've completed, click on this icon to save your report on your computer

Strategy form- This form pertains to your program

Due Date		Description	Status
Mar 12, 2018	 	Behavioral Health and Wellness - 2018-2019 Application	Outstanding
Mar 12, 2018	 	Organization Information, Management & Finances - 2018-2019 Application	Outstanding

RESET: Please click on this icon, if you want to change the information you've entered. You cannot make any changes to any of these sections after the due date of the 2018-2019 Application.

Education, Childcare - Test Pgm - Program

	Section	Status
  	Program Operations	Completed
 	<u>Continuous Learning & Improvement</u>	Outstanding
 	Current Budget -2017-2018	Outstanding
 	Proposed Budget -2018-2019	Outstanding
 	Budget Narrative	Outstanding
 	Behavioral Health and Wellness - Outcome Measurement/RBA	Outstanding
 	Behavioral Health and Wellness - Strategy form	Outstanding
 	Gender (Total = 0)	Outstanding
 	Age (Total = 0)	Outstanding
 	Race and Ethnicity (Total = 0)	Outstanding
 	County of Residence (Total = 0)	Outstanding
 	Butts County Zip Codes (Total = 0)	Outstanding
 	Cherokee County Zip Codes (Total = 0)	Outstanding
 	Clayton County Zip Codes (Total = 0)	Outstanding
 	Cobb County Zip Codes (Total = 0)	Outstanding
 	Coweta County Zip Codes (Total = 0)	Outstanding
 	DeKalb County Zip Codes (Total = 0)	Outstanding
 	Douglas County Zip Codes (Total = 0)	Outstanding
 	Fayette County Zip Codes (Total = 0)	Outstanding
 	Gwinnett County Zip Codes (Total = 0)	Outstanding
 	Henry County Zip Codes (Total = 0)	Outstanding

Program Operations

In this section, respond to each question appropriately and click

Save

Program Operations

Education, Childcare - Test Pgm (9989492 - Program)
100 Edgewood Ave NE
Ste # 515
Atlanta GA 30303

Program Operations

PROGRAM

1. Describe the program for which your organization is requesting funding. Outline what the program does? How it works, and what makes it different from other similar programs; explain the program's value and benefits to the community. *

0 of 1000 words

2. Describe the need, the program plans to address or currently addresses? what are the evidence based, proven and/or promising practices incorporated in the program activities that will reduce the need? Cite examples of research and/or data-driven evidence.

0 of 1000 words

PROGRAM OPERATIONS

3. Provide 2-3 examples of partnerships that yield results from your program. Describe if the relationship is focused on Referrals- Organizations refer their services or Collaborative - Partnerships that share a common agenda for program activities, provide integrated program activities, and/or share administrative/fiscal responsibilities. Provide copy Memorandum of Understanding. For referrals- does the referral give priority to your program participants?

0 of 1000 words

4. Describe how your program utilizes community volunteers. Include their role or skills(e.g. retirees with background in carpentry and construction make home repairs for program participants).

0 of 1000 words

5. Describe pre-service and in-service training that program volunteers receive. Include subject matter, number of hours, background checks, insurance, etc. (e.g.all volunteers receive CPR certification before volunteering in classrooms)

0 of 1000 words

Continuous Learning & Improvement

In this section, respond to each question appropriately and click

Save

Continuous Learning & Improvement

Education, Childcare - Test Pgm (9989492 - Program)
100 Edgewood Ave NE
Ste # 515
Atlanta GA 30303

Continuous Learning & Improvement

1. What data do you most often use to make improvements or changes to your program?

0 of 1000 words

2. Describe how program performance/outcome data is shared with staff and Board members.

0 of 1000 words

3. Provide two examples of how program data has been used to improve or change the program services or design.

0 of 1000 words

4. How do you engage the individuals served to solicit their input to improve your program?

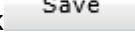
0 of 1000 words

5. Describe the newest innovation to the program. Include how the innovation was identified, implemented and is being measured, and any early success or challenges.

0 of 1000 words

Save

Household Income

In this section, you will enter your Household numbers. When you have entered all the data, click . The screen will default you back to the sections list. **(Note: You must manually calculate the Total number of participants in this section.)**



- Home
- Organization Profile
- My Profile
- Organization Descriptions
- Forms
- Agency Documents
- Resources
- Reports
- Signoff

Household Income

Education, Childcare - Test Pgm (9989492 - Program)
100 Edgewood Ave NE
Ste # 515
Atlanta GA 30303

Household Income

Household Income - Enter the total of participants that your program serves for each household income field. If your program does not have participants for household income field, then please enter '0' in the field. The household income form does not auto calculate so add your participants for questions 1-3 and enter total in question 4. (See the Resource Tab for definitions i.e., low Income standards)

1. Number of Chronically Homeless

2. Number of participants that meet Low Income standards

3. Number of participants with income ABOVE Low Income standards

4. Total Number of Participants

5. If significant data is Unknown please explain

0 of 1000 words

6. Explain any factors which have significantly influenced the number of participants served

0 of 1000 words





Current Budget 2017-2018

Complete all line items for your current budget. After entering your budget data, click Save.



- Home
- Organization Profile
- My Profile
- Organization Description
- Forms
- Agency Documents
- Resources
- Reports
- Signoff

Current Budget -2017-2018

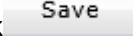
Education, Childcare - Test Pgm (9989492 - Program)
 100 Edgewood Ave NE
 Ste # 515
 Atlanta GA, 30303

Program Budget

Item	Description	Amount	Side
100	Client Fees	<input type="text" value="\$0.00"/>	Incon
200	Grants - Federal	<input type="text" value="\$0.00"/>	Incon
300	Grants - State	<input type="text" value="\$0.00"/>	Incon
400	Grants - Local	<input type="text" value="\$0.00"/>	Incon
500	Grants - Foundations	<input type="text" value="\$0.00"/>	Incon
600	UW Specific Care	<input type="text" value="\$0.00"/>	Incon
700	UW - Impact Fund (UW funding request)	<input type="text" value="\$0.00"/>	Incon
800	UW - Initiative	<input type="text" value="\$0.00"/>	Incon
900	Fundraising Events or Products	<input type="text" value="\$0.00"/>	Incon
1000	Investment Income	<input type="text" value="\$0.00"/>	Incon
1100	Individual Contribution	<input type="text" value="\$0.00"/>	Incon
1200	Other	<input type="text" value="\$0.00"/>	Incon
1300	Salaries/Wages	<input type="text" value="\$0.00"/>	Exper
1400	Benefits/Payroll Taxes	<input type="text" value="\$0.00"/>	Exper
1500	Contractors	<input type="text" value="\$0.00"/>	Exper
1600	Program Supplies	<input type="text" value="\$0.00"/>	Exper
1700	Rent/Utilities	<input type="text" value="\$0.00"/>	Exper
1800	Other	<input type="text" value="\$0.00"/>	Exper
	Total Income	\$0.00	
	Total Expense	\$0.00	
	Total Surplus/Deficit	\$0.00	

Comment for Amount column

Proposed Budget 2018-2019

Complete all line items for in the proposed budget section. After entering your budget data, click  .



Switch Organizations

Proposed Budget -2018-2019

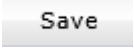
Education, Childcare - Test Pgm (9989492 - Program)
 100 Edgewood Ave NE
 Ste # 515
 Atlanta GA 30303

Program Budget

Item	Description	Amount	Side
100	Client Fees	\$0.00	Income
200	Grants - Federal	\$0.00	Income
300	Grants - State	\$0.00	Income
400	Grants - Local	\$0.00	Income
500	Grants - Foundations	\$0.00	Income
600	UW Specific Care	\$0.00	Income
700	UW - Impact Fund (UW funding request)	\$0.00	Income
800	UW - Initiative	\$0.00	Income
900	Fundraising Events or Products	\$0.00	Income
1000	Investment Income	\$0.00	Income
1100	Individual Contributions	\$0.00	Income
1200	Other	\$0.00	Income
1300	Salaries/Wages	\$0.00	Expens
1400	Benefits/Payroll Taxes	\$0.00	Expens
1500	Contractors	\$0.00	Expens
1600	Program Supplies	\$0.00	Expens
1700	Rent/Utilities	\$0.00	Expens
1800	Other	\$0.00	Expens
	Total Income	\$0.00	
	Total Expense	\$0.00	
	Total Surplus/Deficit	\$0.00	

Comment for Amount column

Budget Narrative

Provide narrative details about your next fiscal year's budget and the UW grant will affect your program and ability to leverage this grant. Click 



United Way of Greater Atlanta



Switch Organizations

Budget Narrative

Education, Childcare - Test Pgm (9989492 - Program)
100 Edgewood Ave NE
Ste # 515
Atlanta GA 30303

Budget Narrative

1. How do you plan to use the requested funds? Please describe how requested program funds will be used to ensure success.

0 of 1000 words

2. How much of the projected budget is committed? What will happen if you don't receive the anticipated funding from other sources(known and unknown)?

0 of 1000 words

3. How do you use funding from other sources?

0 of 1000 words

4. Describe how the UW Sustainer Fund grant would be used to secure matching dollars?

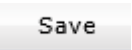
0 of 1000 words



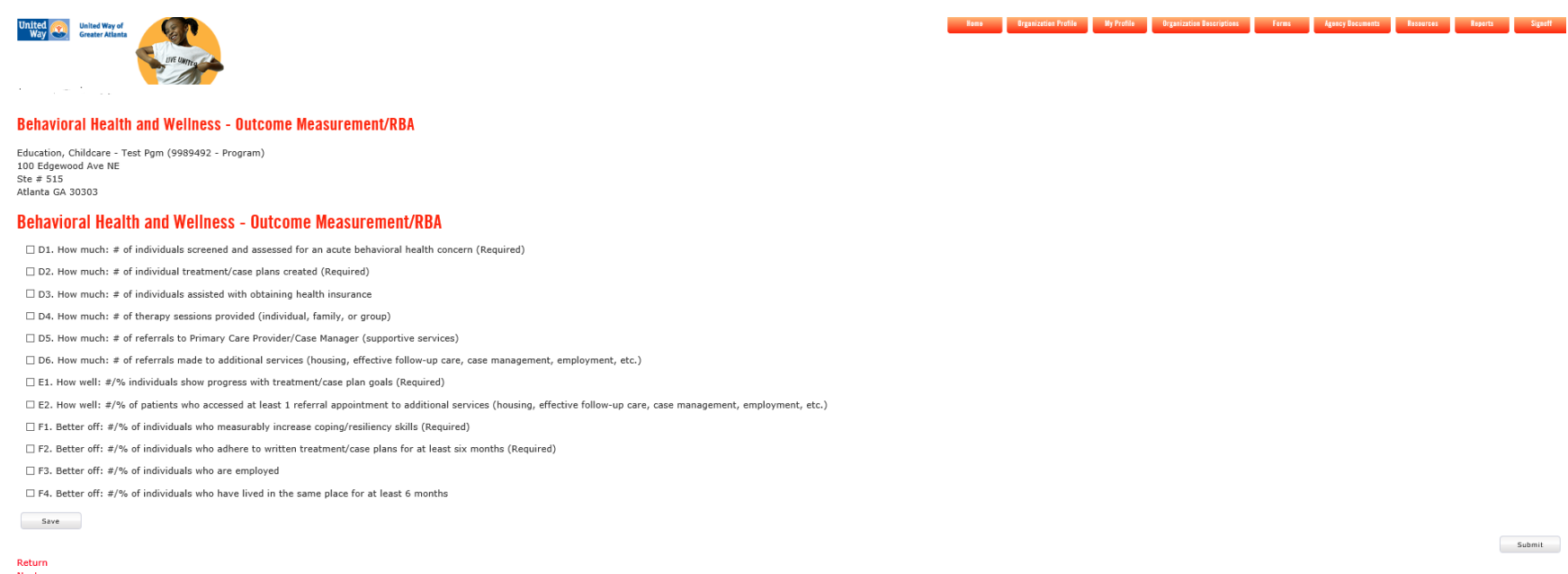


[Return](#)
[Next](#)
[Previous](#)

Strategy - Outcome Measurement/RBA

Provide data for three years and enter narrative for the required measures. Also, you can select optional measures and provide data and narrative on it and click .

[Attention: Required measures are **mandatory**. All required measures and optional measures are listed under the **Funding Guidance Letters**.]





Behavioral Health and Wellness - Outcome Measurement/RBA

Education, Childcare - Test Pgm (9989492 - Program)
100 Edgewood Ave NE
Ste # 515
Atlanta GA 30303

Behavioral Health and Wellness - Outcome Measurement/RBA

- D1. How much: # of individuals screened and assessed for an acute behavioral health concern (Required)
- D2. How much: # of individual treatment/case plans created (Required)
- D3. How much: # of individuals assisted with obtaining health insurance
- D4. How much: # of therapy sessions provided (individual, family, or group)
- D5. How much: # of referrals to Primary Care Provider/Case Manager (supportive services)
- D6. How much: # of referrals made to additional services (housing, effective follow-up care, case management, employment, etc.)
- E1. How well: #/% of individuals show progress with treatment/case plan goals (Required)
- E2. How well: #/% of patients who accessed at least 1 referral appointment to additional services (housing, effective follow-up care, case management, employment, etc.)
- F1. Better off: #/% of individuals who measurably increase coping/resiliency skills (Required)
- F2. Better off: #/% of individuals who adhere to written treatment/case plans for at least six months (Required)
- F3. Better off: #/% of individuals who are employed
- F4. Better off: #/% of individuals who have lived in the same place for at least 6 months

[Return](#)

Strategy form

There are three sections in this form.

Section A: Priority Populations

Section B: Required Program Components

Section C: Preferred Program Components

Respond to the questions and click .



United Way of Greater Atlanta



Switch Organizations

Behavioral Health and Wellness - Strategy form

Education, Childcare - Test Pgm (9989492 - Program)
100 Edgewood Ave NE
Ste # 515
Atlanta GA 30303

Behavioral Health and Wellness - Strategy form

A. Priority Populations

A1. Low-income individuals and families

A2. Uninsured or Underinsured

A3. Pregnant women

A4. Individuals with Chronic Conditions

a. How does your program identify and recruit those individuals who are at highest risk of not achieving the goal(s) of the program?

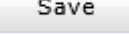
0 of 1000 words

b. Based on the target population numbers entered above, describe how your program will engage the target population to understand and respond to their unique needs and assets?

0 of 1000 words

Behavioral Health and Wellness - Indicate if your program demonstrates the **required (B) and preferred (C) components** below by selecting yes, no or not applicable (NA). If your program demonstrate the component(s), then describe the activities, policies and other efforts for that specific component in the text box provided. Ref to your strategy guidance letter for more details.

Gender

For this section, enter your data for gender into the numbers column. When you have entered all the data, click . The screen will default you back to the sections list, you will now see the number you entered display within the parenthesis next to Total. **(Please note: All total participant numbers should match for each section for Gender; Age; Ethnicity. If the totals differ you will receive a message that says: (Demographic total doesn't match that of other completed demographics).)**

Gender


Education, Childcare - Test Pgm (9989492 - Program)
100 Edgewood Ave NE
Ste # 515
Atlanta GA 30303

Gender

Group	Number
Male	<input type="text" value="0"/>
Female	<input type="text" value="0"/>
Other	<input type="text" value="0"/>
Not Disclosed	<input type="text" value="0"/>
Not Available	<input type="text" value="0"/>
Total	0

Age

In this section, enter your age numbers. When you have entered all the data, click . The screen will default you back to the sections list, you will now see the number you entered display within the parenthesis next to Total. If the totals differ you will receive a message that says: **(Demographic total doesn't match that of other completed demographics).**

Age

Education, Childcare - Test Pgm (9989492 - Program)
100 Edgewood Ave NE
Ste # 515
Atlanta GA 30303

Age

Group	Number
0 to 5 Years Old	<input type="text" value="0"/>
6 - 11 Years Old	<input type="text" value="0"/>
12 - 17 Years Old	<input type="text" value="0"/>
18 - 25 Years Old	<input type="text" value="0"/>
26 - 36 Years Old	<input type="text" value="0"/>
37 - 46 Years Old	<input type="text" value="0"/>
47 - 59 Years Old	<input type="text" value="0"/>
60+ Years Old	<input type="text" value="0"/>
Unknown Age	<input type="text" value="0"/>
Total	0

Race and Ethnicity

In this section, you will enter your race and ethnicity numbers. If a race or ethnicity is known but not listed select “Other”. The Unknown category should only reflect the number of people where the race or ethnicity is not known or disclosed by the program client. When you have entered all the data, click . The screen will default you back to the sections list, you will now see the number you entered display within the parenthesis next to Total. If the totals differ you will receive a message that says: **(Demographic total doesn't match that of other completed demographics.)**

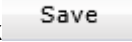
Race and Ethnicity

Education, Childcare - Test Pgm (9989492 - Program)
100 Edgewood Ave NE
Ste # 515
Atlanta GA 30303

Race and Ethnicity

Group	Number
Black	<input type="text" value="0"/>
White	<input type="text" value="0"/>
Native American	<input type="text" value="0"/>
Hispanic	<input type="text" value="0"/>
Asian/Indian Subcontinent	<input type="text" value="0"/>
Pacific Islander	<input type="text" value="0"/>
Two/More Races	<input type="text" value="0"/>
Unknown	<input type="text" value="0"/>
Total	0

County of Residence

In this section, you will enter the total County residence numbers. When you have entered all the data, click . The screen will default you back to the sections list, you will now see the number you entered display within the parenthesis next to Total. **(Please note:** All total participant numbers should match for each section). Also, when entering number for Fulton County, enter data into the field labeled North Fulton, City of Atlanta and South Fulton.



- Home
- Organization Profile
- My Profile
- Organization Descriptions
- Forms
- Agency Documents
- Resources
- Reports
- Signoff

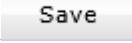
County of Residence

Education, Childcare - Test Pgm (9989492 - Program)
100 Edgewood Ave NE
Ste # 515
Atlanta GA 30303

County of Residence

Group	Number
Butts County	<input type="text" value="0"/>
Cherokee County	<input type="text" value="0"/>
Clayton County	<input type="text" value="0"/>
Cobb County	<input type="text" value="0"/>
Coweta County	<input type="text" value="0"/>
DeKalb County	<input type="text" value="0"/>
Douglas County	<input type="text" value="0"/>
Fayette County	<input type="text" value="0"/>
Fulton County	<input type="text" value="0"/>
North Fulton	<input type="text" value="0"/>
City of Atlanta	<input type="text" value="0"/>
South Fulton	<input type="text" value="0"/>
Swinnett County	<input type="text" value="0"/>
Henry County	<input type="text" value="0"/>

County Zip Codes

In this section, you will enter the number of participants for each zip code area. Click , the screen will default you back to the sections list. Click on the next county zip code list for each section Counties, Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Gwinnett, Henry, North Fulton, South Fulton, Paulding, and Rockdale saving after entries in each section have been completed.

[Attention: Andar requires the total number of participants in each county to be equal to the total number in each demographic section. Hence, to work around this, in the “Other” row within the county, enter the number to make your total equal to that of the other demographics. For example, if your agency serves 10 in Butts County and Program total is 100 then enter 90(100-10=90) on the “Other” line, so that the total will become “100”]

Butts County Zip Codes

Education, Childcare - Test Pgm (9989492 - Program)
100 Edgewood Ave NE
Ste # 515
Atlanta GA 30303


Butts County Zip Codes

Group	Number
30216	<input type="text" value="0"/>
30233	<input type="text" value="0"/>
30234	<input type="text" value="0"/>
Unknown in County	<input type="text" value="0"/>
Other	<input type="text" value="0"/>
Total	0





TAB 6: Agency Documents






In this tab, you can find your Applications and Result Summary Documents of 2016-2017 year. To view these documents, click on [].

[Attention: Documents are not listed for new agencies and new programs. These documents are only for agencies and programs funded in 2017-2018.]

@CBAgency

UWGA Test Agency - Agency
100 Help St
Atlanta GA 30303

[open all](#) | [close all](#)

- [-]  UWGA Test Agency - Agency
 -  Education, Childcare - Test Pgm - Program
 -  Health, Babies Born Healthy - Test Pgm - Program
 -  Homelessness, Assessment Cntr-Test Pgm - Program
 -  Income, Asset Bldg and Preserv -Test - Program

		File Name	Description	Language	Effective	Expiry
		UWGA application.pdf	Application 2016-2017	English (System default)	02/15/2017	07/20/2017
		UWGA Result Summary.pdf	Result Summary 2016-2017	English (System default)	02/15/2017	07/20/2017

TAB 7: Resources

In this tab, please check the documents listed under the 2018-2019 Investment process and the Funding Guidance Letters.



Switch Organizations

Resources

2017-2018 Mid-Year Process

[2017-2018 Mid-Year Instruction Manual](#)

Videos

[Instructions to download the WebEx Player](#)

[Part 1 - Welcome, Resources](#)

[Part 2- Organization Profile, My profile, Organization Description](#)

[Part 3- Demographics](#)

[Part 4- Indicator and Mid-Year Narrative](#)

2018-2019 Investment Process

[2018-2019 CWB Grant Application](#)

Funding Guidance Letters

[Behavioral Health and Wellness_FINAL](#)

[Family Health and Wellness_FINAL](#)

[Health Care Navigation_FINAL](#)

[Health Promotion and Early Detection_FINAL](#)

[Emergency Assistance_FINAL](#)

[Employment-based Experience_FINAL](#)

[Family and Community Leadership_FINAL](#)

[Supportive Housing_FINAL](#)

[Transitional and Assessment Housing_FINAL](#)

[Trauma Prevention and Stabilization_FINAL](#)

[Quality Early Learning_FINAL](#)

[Quality Enrichment and Academic Support_FINAL](#)

[Mentoring Funding Guidance_FINAL](#)

[Support for Seniors_FINAL](#)



Printing Report



To print out the data you have entered into the system – you can download a report then print.

Each item listed under the **FORM** section must be submitted before reports are printed to preserve the integrity of the documents. While you may print individual pieces directly from the **FORM** page, the report section contains formatted pdf documents that are designed to print multiple items together.

The screenshot shows the United Way of Greater Atlanta logo and navigation menu. The 'Forms' menu item is circled in blue. Below the menu, there are callouts for 'PDF' and 'CSV' download options. A table lists three forms with 'Outstanding' status. A callout box notes: 'Status should be "completed" before you save or print the document.'

Due Date	Description	Status
Mar 12, 2018	Behavioral Health and Wellness - 2018-2019 Application	Outstanding
Mar 12, 2018	LETTER OF INTENT	Outstanding
Mar 12, 2018	Organization Information, Management & Finances - 2018-2019 Application	Outstanding

There are two ways to print Reports:

-  Press this icon to print your document in PDF format. **(Preferred- will generate a well formatted report)**
-  Click this icon to print in .csv (commas, separated, values) this format is like excel.

Signoff

When you are done with all reports, click here to log out of ANDAR.

If you have any questions, send an email to grantee@unitedwayatlanta.org