



City of Knoxville Office of Community Safety & Empowerment
2025 Empower Knox Grant Proposal – Event Funding

Open Application Window: November 11, 2024 - May 1, 2025

Preliminary Review Deadline: April 28, 2025 at 4:30

Application Window Closes: May 1, 2025 before 4:30

Section 1: Application Check List

Please submit all of the following. Applications that are missing materials will not be accepted.

- ☐ Completed all Application Questions including Section 1-4 as well as Grant Proposal Sections 5 & 6.
- ☐ **Organization Annual Report or Budget** for applicant organization or fiscal sponsor
- ☐ **Project Budget Form** (please use provided template)
- ☐ **W-9** for applicant organization or fiscal sponsor - <https://www.irs.gov/forms-pubs/about-form-w-9>
- ☐ **IRS 501c3 Tax Exempt Designation Letter** for applicant organization or fiscal sponsor
- ☐ **Currently registered with TN Secretary of State** or registration exemption letter from the State of TN for applicant or fiscal sponsor. See <https://tncab.sos.tn.gov/portal/registered-charities-search>
- ☐ (If using a fiscal sponsor) **Letter from Fiscal Sponsor** acknowledging intent to serve in that capacity

Section 2: Applicant Information

Organization Name: Gennisi Charitable Birth Services, Inc Current Date: 3/11/25
Contact Name: Ty Roberts Position held by contact: Executive Director
Contact Email: info@gencharities.org Phone Number: 865-896-9357
Physical Address: 8617 Sunburst Lane, Knoxville, TN 37922
(If Different) Mailing Address: 400 Harriet Tubman Street, Knoxville, TN 37915

Section 3: Applicant Details

1.) Current Legal Business Status: (Select only one)

☒ 501c(3): If 501c(3), applicant is registered with the [State of TN as a Charitable Organization](#).
Please provide Registration No.

☐ Community-Based Organization (CBO) - Not an active 501c3 and/or utilizing a Fiscal Sponsor

(If Applicable) Fiscal Sponsor Name and Contact: _____

☐ Other (Local Education Agency, Non-Public School, etc): _____

2.) Describe the mission of your organization, the populations served, and the services offered. (100 words max)

We provide free and low-cost education, resources, and support surrounding pregnancy, birth, and postpartum services to families in need, with a targeted focus on minority, low-income, and underserved members of our Knoxville and East Tennessee community. We strive to reduce the infant and maternal mortality rate within the minority, low-income, and underserved members of this community and to raise awareness and implement structures to increase successful birth outcomes.

3.) Have you received funding from the City of Knoxville in the past? If yes, list grant type and amount (50 words max)

☒ Yes
(If yes, list grant and amount)

☐ No

AAERTF

Applicant Organization Name: Gennisi Charitable Birth Services, Inc



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Section 4: Project Budget

1.) Project or Event Title: Gennisi Charitable Birth Services 4th Annual Community Baby Shower

2.) Funding Amount Requested: \$ 1,500

3.) Estimated Project Timeline (Start Date): 4/12/25 (End Date): 4/12/25

Line Item	Description/Details	Unit Cost	Quantity	Total Cost
Program Materials				
Healthy Food Materials (adults)	resources and recommendations for healthy food options	10	30	\$ 300.00
Healthy Food Bags (adults)	samples of healthy food options	10	30	\$ 300.00
Healthy Food Bags (children)	samples of healthy food options	10	30	\$ 300.00
Healthy Food Materials (children)	resources and recommendations for healthy food options	10	30	\$ 300.00
Total Program Materials:				\$ 1,200.00
Training & Meeting Supplies and/or Operating Costs				
NA				
Total Training, Meeting, and/or Operating Costs:				\$ 0.00
Participant Stipends (if applicable)				
NA				
Total Participant Stipends:				\$ 0.00
Personnel and/or Administrative Costs				
Personnel Stipends	Stipends for childcare for attending children	50	6	\$ 300.00
Total Personnel and/or Administrative Costs (May not exceed 20% of Total):				\$ 300.00
Total Budget (Should equal Section 4, Question 2 – Total Amount Requested):				\$ 1,500.00

Applicant Organization Name: Gennisi Charitable Birth Services, Inc



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Please submit all grant application pages including Section 1-4 as well as Section 5 & 6 for each project. Review the Empower Knox Event Funding Grant Guidelines [here](#).

Funding available from \$500-\$1,500 for direct engagement of youth ages 12-24. Not suitable for fundraising event sponsorships. Event must occur between January 1 and September 15, 2025. Short Answer text boxes will cut off beyond the word count maximum. Answers beyond the maximum may not be considered.

Section 5: Project Proposal and Focus

- 1.) Event Title: Gennisi Charitable Birth Services, Inc 4th Annual Community Baby Shower
- 2.) Funding Amount Requested (up to \$1,500): \$1,500
- 3.) Exact or Proposed Event Timeframe (Start Date): 4/12/25 (End Date): 4/12/25 (no later September 15, 2025)
- 4.) Number of anticipated youth ages 12-24 directly served by requested funds: 30
- 5.) Please describe your event and the intended audience (150 max)

Gennisi Charitable Birth Services Community Shower is an event for moms who are pregnant or have infants that are 6 months or younger. Some of our moms also have other children which we will be providing child care for. This event is to serve our pregnant and new moms by providing them with baby items and community resources that they may otherwise have to. This event also serves to provide a supportive environment with educational resources such as an infant CPR tutorial and mental health component.

- 6.) How will your event support the Empower Knox mission to *Build Successful Life Outcomes for Knoxville's Youth*? (150 words max)

This event supports the mission by providing healthy eating initiatives for the youth in attendance as well as providing the parents with the resources to start or continue their healthy eating journey with their children. This event also incentivizes youth that will attend to engage their energy and time in community activities that will support moms by providing them with a small financial benefit for the experience.

Section 6: Signature and Acknowledgement

- 1.) Reach out via email or phone for more information and assistance with your application or project proposal:

Questions?

Emily Norris

865-215-3524

enorris@knoxvilletn.gov

- 2.) If you wish, to have your application preliminarily reviewed for completeness:

Preliminary Application Review Due:

Monday, April 28, 2025 before 4:30p

- 3.) Submit applications and accompanying documents by email or in-person:

Final Application Deadline:

Thursday, May 1, 2025 before 4:30p

Applications will not be accepted beyond this deadline.

Emily Norris
Youth Engagement Manager

400 W Main Street, Room 546E
Knoxville, TN 37902

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enorris@knoxvilletn.gov

and

Office of Community Safety & Empowerment

400 W Main Street, Room 639
Knoxville, TN 37902

OCSE@knoxvilletn.gov

Applicant Organization Name: Gennisi Charitable Birth Services, Inc