

ALICE Fund Pilot Partner Information & Referral Guide



United Way of Coastal
and Western Connecticut

Letter of Interest due March 28th, 2025.

Purpose:

The ALICE Fund provides rapid response financial assistance to individuals and families at or below the ALICE® (Asset Limited, Income Constrained, Employed) Threshold, addressing emergent needs and promoting stability within our communities. Referral partners play a critical role in connecting eligible households to these vital resources.

Eligibility:

- Applicants must fall at or below the ALICE® Threshold.
- Requests must address an eligible category of emergent need.
- Households are eligible for up to \$600 in assistance per calendar year (January 1, 2025 – December 30, 2025).

Categories of Assistance:

The ALICE Fund categories are based on the ALICE Household Survival Budget. We have provided examples of eligible areas of assistance under each category.

- **Housing & Shelter:** Emergency shelter, home repairs, moving expenses, security deposits, application fees, etc.
- **Utilities & Technology:** Service assistance (phone, internet, water, heat, etc.)
- **Child Care & Education:** Emergent child care needs, enrichment programs, school expenses, etc.
- **Food:** Emergency food costs.
- **Transportation:** Car repairs, bus passes, driver's license fees, emission test fees, etc.
- **Health Care:** Co-pays, prescription drugs, doctor visits, etc.

We know that there are other categories of financial needs for ALICE households. Please contact United Way of Coastal and Western Connecticut (UWCWC) for requests that fall outside of the above eligible categories (examples: Legal fees, end-of-life arrangement costs, etc.)

Available Funding:

For the Pilot program, the following funds are available:

Region	Available Funding
Greater Bridgeport <i>(serves Bridgeport, Easton, Fairfield, Monroe, Stratford, and Trumbull)</i>	\$60,072
Greater Norwalk <i>(serves Darien, New Canaan, Norwalk, Weston, Westport, and Wilton)</i>	\$24,125
City of Stamford	\$26,258
Northern Fairfield County (Greater Danbury) <i>(serves Bethel, Brookfield, Danbury, New Fairfield, Newtown, Redding, and Ridgefield)</i>	\$32,269
Southern Litchfield County (Greater New Milford) <i>(serves Bridgewater, Kent, New Milford, Roxbury, Sherman, Warren, and Washington)</i>	\$7,275

UWCWC will provide weekly updates to all referral partners on the status of available funding, ensuring transparency and helping partners make informed referrals.

Funds will be allocated on a first-come, first-served basis. Once available funds for each region are depleted, the ALICE Fund will close to new referrals.

Role of Referral Partners:

Referral partners are essential to the success of the ALICE Fund Pilot. By collaborating with local organizations, we can ensure that assistance reaches those who need it most.

Responsibilities:

- Screen and identify eligible households.
- Assist applicants in completing the referral process.
- Submit referrals to the ALICE Fund for review and approval.
- Ensure the collection and safe storage of client information for potential spot check and/or audit by United Way.
- Prioritize the use of their own or external emergency assistance resources before referring clients to The ALICE Fund.
- Verify fund availability based on UWCWC’s weekly updates before submitting referrals.
- Inform clients that funds are allocated on a first-come, first-served basis and may be depleted before the program end date.
- Communicate promptly with UWCWC regarding unusual cases or concerns.
- Attend a Partner Referral Training: Referral partners are expected to participate in a training session covering the referral process, eligibility criteria, and program guidelines.
- Participate in Program Evaluation: At the end of the calendar year, referral partners are expected to join a collaborative review session to share successes, challenges, and ideas for improving the program.

Support Provided:

- Training and guidance on the referral process.
- Access to tools and resources via United Way.
- Ongoing communication and updates from United Way.
- Direct customer service support for referred clients.

Pilot Program Timeline:

Date	Activity
March 10 – 28, 2025	Partner Letter of Interest period
March 12, 2025 – 11 am OR March 20, 2025 – 9 am OR March 25, 2025 – 2 pm	ALICE Fund Partner information sessions (REQUIRED - must attend one.) Session 1: March 12, 2025, Registration Link Session 2: March 20, 2025, Registration Link Session 3: March 25, 2025, Registration Link
March 28, 2025	Due date for Letter of Interest (LOI) for ALICE Fund
Week of April 7, 2025	Notification window for referral partners
April 8-22, 2025	Memorandum of Understanding (MOU) signing window.
April 22, 2025	Due date to submit signed MOU.
April 25, 2025 OR April 28, 2025	Referral Partner Training Sessions (REQUIRED – for MOU-approved partners; must attend one).
May 1, 2025	Program launch.

December 31, 2025	ALICE Fund Pilot ends.
January 2026	End of Pilot Program Evaluation session.

How to Become a Referral Partner:

1. **Express Interest:** Attend a Letter of Interest training session and complete a Letter of Interest (LOI) on our grants management portal, [e-CImpact](#), or by email to communityimpact@unitedwaycwc.org.
 - a. [Learn how to register for e-CImpact.](#)
2. **Partner Eligibility Review:** United Way will review all submitted LOIs through a screening process to ensure alignment with the ALICE Fund's goals. UWCWC is committed to being inclusive and expansive in selecting referral partners and will reach out during the review process if any questions or concerns arise regarding eligibility or organizational capacity. Our goal is to engage as many qualified partners as possible to maximize community impact and ensure broad access to the ALICE Fund.
3. **Sign a MOU:** If selected, sign a Memorandum of Understanding to outline roles, responsibilities, and expectations.
4. **Attend a Referral Partner Training Session:** Attend a mandatory referral partner training session where you will receive access to the referral platform and training resources.
5. **Start Referring:** Begin identifying and submitting eligible households for assistance.

Form 1: Letter of Interest for the ALICE Fund



All questions in red will autofill based off information provided in the organization or program profile and/or other applications/reports in e-ClImpact. If fields are missing or cannot be edited in the application, please update your organization and/or program profiles. Please reach out to a member of the Community Impact Team if you have any questions.

Questions with an * are required.

If there is a discrepancy in language between this LOI and that found in the online application, default to the language used in the online application.

Organization Information

Organization Name: *

EIN: *

Organization Website: *

Organization Contacts

Primary Contact for LOI: * (Limit up to 150 characters)

Primary Contact Title: * (Limit up to 150 characters)

Phone Number for Primary Contact: * (Numbers only)

Email for Primary Contact: *

Is the primary contact completing this LOI **different** than the organization's Executive Director or Chief Executive Officer? * (Select one) Yes No

If you select 'Yes', Executive Director or CEO Name: * (Limit up to 150 characters)

ALICE Fund Implementation Contact



The Implementation Contact will be the individual who receives weekly updates on the ALICE Fund, should be able to attend the referral partner training and evaluation session, and be the main contact at your organization for the ALICE Fund in general.

Is the Primary Contact for the LOI going to be the Implementation Contact of the ALICE Fund? * (Select one)
Yes No

If you select 'No', the following four questions will appear:

Who will be the Implementation Contact? * (Limit up to 150 characters)

Implementation Contact Title: * (Limit up to 150 characters)

Phone Number for Implementation Contact: * (Numbers only)

Email for Implementation Contact: *

ALICE Fund Narratives



For the sake of your time and ours, please try to keep answers as brief as possible. For ease of use, we have allowed the system's maximum character limits for each field. All character limits include spaces, please keep this in mind if copying and pasting information. For narrative questions, we recommend not exceeding one to two paragraphs per questions.

Select the United Way region(s) where your clients primarily reside. * (Select all that apply)

<p>Greater Bridgeport Region (serves Bridgeport, Easton, Fairfield, Monroe, Stratford, and Trumbull)</p>	<p>Greater Norwalk Region (serves Darien, New Canaan, Norwalk, Weston, Westport, and Wilton)</p>	<p>Northern Fairfield County (Greater Danbury) Region (serves Bethel, Brookfield, Danbury, New Fairfield, Newtown, Redding, and Ridgefield)</p>	<p>Southern Litchfield County Region (serves Bridgewater, Kent, New Milford, Roxbury, Sherman, Warren, and Washington)</p>	<p>City of Stamford</p>
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What types of emergency assistance does your organization currently provide (if any)? * (Limit up to 4,000 characters)

How many households does your organization typically assist with emergency needs each year? * (Numbers only)

Are there any barriers that might prevent your organization from effectively participating as a referral partner? * (Limit up to 4,000 characters)

Is there any additional information you would like UWCWC to know about your organization's capacity, approach, or interest in serving as a referral partner for the ALICE Fund? (Limit up to 4,000 characters)

Certifications



By completing this LOI, your organization acknowledges and agrees to the following:

Participation in Required Trainings and Evaluations		
Our organization certifies that a representative will attend at least one referral training session in April 2025. * (Select one)	Certify	Do Not Certify
Our organization certifies that a representative will participate in the end-of-year evaluation session in January 2026. * (Select one)	Certify	Do Not Certify
Eligibility and Documentation		
Our organization certifies that all households referred to the ALICE fund will meet the ALICE eligibility criteria as defined by UWCWC and demonstrate financial need. * (Select one)	Certify	Do Not Certify
Our organization certifies that it will gather, review, and store all supporting documentation for income verification and the specific assistance request following your organization's confidentiality policies. * (Select one)	Certify	Do Not Certify
Our organization certifies that it will complete all required referral documentation accurately, thoroughly, and in a timely manner for each applicant referred to the ALICE Fund. We will ensure that all required forms, supporting documents, and client information are submitted in accordance with UWCWC's guidelines. * (Select one)	Certify	Do Not Certify

Program Integrity		
Our organization acknowledges that UWCWC staff may conduct periodic spot audits of stored documentation and/or specific ALICE Fund referral requests. * <i>(Select one)</i>	Certify	Do Not Certify
Our organization certifies that it will contact UWCWC for pre-approval if a referral falls under the 'Miscellaneous' category. * <i>(Select one)</i>	Certify	Do Not Certify
Prioritization of Existing Emergency Funds		
Our organization certifies that it will make every effort to use existing emergency assistance funds (including state, local, and private resources) before referring households to the ALICE Fund. The ALICE Fund will be treated as a resource of last resort to ensure that it supports the most urgent and unmet needs.* <i>(Select one)</i>	Certify	Do Not Certify
Fund Availability		
Our organization acknowledges that ALICE Fund resources are distributed on a first-come, first-served basis and that once all funds are allocated, the program will close to new referrals. * <i>(Check the box to acknowledge)</i>		

Form 2: Attachments

- **Copy of your Organizations Confidentiality Policy** – Or please answer the following question in no more than one page and attach here: Explain how your organization will securely collect, verify, and store supporting documentation (e.g. income verification, proof of need) for ALICE Fund referrals. Highlight any existing systems or tools used to manage client data.