



CITY OF TOPEKA

Community Engagement
215 SE 7th Street, 1st Floor, Suite 150
Topeka, KS 66603

www.topeka.org

2026 TOPEKA DREAMS NEIGHBORHOOD IMPROVEMENT INITIATIVES

PROGRAM SUMMARY & GUIDELINES

Preliminary Application Due: Tuesday, July 1, 2025 5:00 p.m.

Final Application Due: Friday, August 22, 2025, 5:00 p.m.

Application Questions / Technical Assistance: Bianca Burnett, Community Programs Administrator,
lburnett@topeka.org or 785-368-3663

Applications must be submitted to the Office of Inclusive Communities by one of the following methods:

- **By hand delivery or mail:**
620 SE Madison Ave, 2nd Floor, Topeka, KS 66607
- **By email:**
niarequests@topeka.org

Note: Applications must include all required scope details, budget estimates, and project recommendations from applicable entities (City, County, State, Federal, or partnering organizations).

Please attach all required documents to your application.

You may also include any of the optional supporting documents listed below.

REQUIRED

1. Supporting Project Budget Quotes, Engineer Estimates, Additional Funding documentation, etc.
2. Approval letters (*City, County, State, Federal, property owner, etc.*)
3. Documentation of how the stakeholders were notified about the project (flyers, newsletters, etc.)
4. Documentation of how the stakeholders were included in the decision of the project (meeting minutes, notes, meeting attendance, etc.)

OPTIONAL

5. Supporting signatures of stakeholders in the impacted area (You may use the template provided and make copies as needed (*See pg. 6*))
6. Letters of support from stakeholders (*See pg. 7*)
7. Relevant pictures, maps, and other documentation related to your project

ELIGIBILITY

- Must be submitted by an **active NIA** (Neighborhood Improvement Association).
- Project must be located in a **low- to moderate-income (LMI)** neighborhood within Topeka.
- Application must include:
 - Clear project description, goals, and intended impact
 - Itemized budget and project timeline

- Neighborhood support (petition or meeting minutes)
- Visuals, if available (photos, diagrams, maps)
- Required permits/approvals if on public/private property

PROJECT TYPES FUNDED

- Infrastructure repair: sidewalks, ADA ramps, street lighting
- Beautification: murals, landscaping, signage, banners
- Community building: clean-ups, events, neighborhood programs
- Match funding for larger grants/projects

*See [DREAMS Program Overview & Eligible Projects Lists](#) for full list

FUNDING AVAILABLE

- \$1,000 to \$50,000 per project
- \$200,000 total available (CDBG + GO Bonds)

KEY DEADLINES

- **Preliminary Application Due:** July 1, 2025
- **Final Application Due:** August 22, 2025

APPLICATION CHECKLIST

- ✓ Must be an active NIA
- ✓ Project is located in an LMI neighborhood
- ✓ Completed application form
- ✓ Project clearly described (who, what, when, how, and why)
- ✓ Budget & timeline attached (with quotes/estimates if applicable)
- ✓ Stakeholder support (letter, petition, or minutes)
- ✓ Visuals (optional but recommended)
- ✓ Approvals/permits if on public/private property
- ✓ Partnership documentation (if applicable)
- ✓ Application signed by NIA representative

***NOTE: ALL TIMELINES & FUNDING ARE TENTATIVE AND SUBJECT TO CHANGE**

Note: Estimated funding indicated for all program initiatives is subject to change based on final authorization provided by the Federal Department of Housing and Urban Development (HUD) and/or authorization of the City of Topeka's Governing Body.

2026 TOPEKA DREAMS NEIGHBORHOOD IMPROVEMENT INITIATIVES

Petition of Support for Proposed Project

Project Title & Brief
Summary:

Action petitioned for:

We, the undersigned support this project and feel that it will benefit all neighborhood residents as well as other citizens of the Topeka community. We would like to see this project implemented in our neighborhood.

#	DATE	PRINTED NAME	SIGNATURE	ADDRESS
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[Letterhead of Supporting Department/Organization/Institution]

[Date]

To:

[President's Name]

[Neighborhood Improvement Association Name]

[Address]

Re: Letter of Support for [Project Title]

Dear [NIA President's Name],

On behalf of the [Name of Department/Organization/Institution], I am writing to express our support for your proposed project, **[Project Title]**, as part of the 2026 DREAMS 3 Neighborhood Mini-Grant Program.

We understand the importance of this initiative and recognize its potential to positively impact the [Neighborhood Name] community. Our [Department/Organization/Institution] is committed to supporting your efforts and contributing to the success of this project by providing [briefly describe specific support: resources, space, funding, technical assistance, approvals, etc.].

Having reviewed your project proposal, I believe it aligns with our shared goals of community improvement, engagement, and sustainability. We are pleased to collaborate with the [NIA Name] and look forward to playing a role in bringing this vision to life.

If you need further assistance or documentation from our office, please don't hesitate to reach out.

Sincerely,

[Full Name]

[Title]

[Department/Organization/Institution Name]

[Phone Number]

[Email Address]

DREAMS PROGRAM APPLICATION COVER PAGE

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NEIGHBORHOOD IMPROVEMENT ASSOCIATION INFORMATION

Click on the gray field boxes below to answer each question. Do not use 'Tab' on your keyboard.

Applying Organization:			
Application Date:			
President/Director:		Phone:	
Address:			
E-mail:			
Grant Contact Person (If different from above):		Phone:	
Address:			
E-mail:			
Project Contact Person (If different from above):		Phone:	
Address:			
E-mail:			

Neighborhood Rating (as defined in the 2020 Neighborhood Health Map):	<input type="checkbox"/> Intensive Care Neighborhood	<input type="checkbox"/> At-Risk Neighborhood	<input type="checkbox"/> Out-Patient Neighborhood
	<input type="checkbox"/> Healthy Neighborhood		

Community Engagement Office Use Only (Staff Fills this Out)

Application For	<input type="checkbox"/> DREAMS 1	<input type="checkbox"/> DREAMS 2 Housing	<input type="checkbox"/> DREAMS 2
	<input type="checkbox"/> DREAMS 3		
FOR PROJECTS ONLY			
Project Priority (Rank Number Provided by NIA with multiple projects):		Total Amount Requested for Project:	

DREAMS 3 – ANNUAL MINI-GRANTS PROGRAM APPLICATION

Preliminary Application Due: Tuesday, July 1, 2025 5:00 p.m.

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APPLICATION SUMMARY

This application is for funding consideration of

NOTE: YOU MUST SUBMIT A SEPARATE APPLICATION IF YOU ARE APPLYING FOR MULTIPLE PROJECTS)

☐ DREAMS 3 – ANNUAL
MINI-GRANTS PROGRAM

Project Title:

**Project Location &
Address:**

Project Priority
(Rank if submitting more
than one project application):

**Total Amount
Requested for Project:**

Conflict of Interest Policy

To ensure a fair and transparent process, applicants may serve on the review committee for the following programs:

- **DREAMS 2 – Biennial Major Neighborhood Improvements Program**
- **DREAMS 3 – Annual Mini-Grants Program**

However, **committee members must not score or vote on applications from their own neighborhood.**
This policy helps maintain integrity and fairness in the selection process.

1. Which initiative category does your project best align with? (select one):

- ☐ Infrastructure Repair/Replacement (Streets, sidewalks, alleys, etc.)
☐ Quality of Life Enrichments (Parks, Bus Shelters, Public Facility amenities, etc.)
☐ Neighborhood Beautification (Murals, Banners, Signs, etc.)
☐ Community Social Services (Health education, Substance Abuse Prevention, Crime Awareness, etc.)

**2. Describe your initiative.
Who will it benefit, and what are the long-term plans to sustain it? (150 words or less)**

3. Which HUD National Objective does the project align with most? (select one)?

- ☐ Benefit to low- and moderate- income (LMI) persons
☐ Aid in the prevention or elimination of slums or blight
☐ Meet a need having a particular urgency (referred to as urgent need)

4. Which City Strategic Goal does the project support? (select one)?

	<input type="checkbox"/> Safe and Secure Communities <input type="checkbox"/> Stewardship of the City's Physical Assets <input type="checkbox"/> Thriving and Livable Neighborhoods
5.	Does your project align with your neighborhood's plan or goals? (select one): <input type="checkbox"/> Neighborhood Plan <input type="checkbox"/> Published Goals & Objectives <input type="checkbox"/> Both <input type="checkbox"/> None If applicable, please explain how it aligns (150 words or less):
6.	Who was involved in choosing this project? (Select all that apply): <input type="checkbox"/> Residents <input type="checkbox"/> NIA Officers <input type="checkbox"/> Other Community Groups (associations) <input type="checkbox"/> Public Institutions (Schools, local Government Agencies, Libraries, etc.) <input type="checkbox"/> Private Institutions (Hospitals, Universities, Banks, etc.) <input type="checkbox"/> Local Businesses
7.	How were these stakeholders engaged? (Select all that apply): <input type="checkbox"/> Project selection <input type="checkbox"/> Project idea development <input type="checkbox"/> Will be involved in the project implementation <input type="checkbox"/> Will be or has already provided additional project funding support If applicable, please describe the stakeholder engagement process for this initiative (150 words or less):
8.	What additional resources have you sought? (select all that apply) <input type="checkbox"/> Volunteers <input type="checkbox"/> Private Funding <input type="checkbox"/> Other Local, State, or Federal Government Funding <input type="checkbox"/> In-Kind materials or services <input type="checkbox"/> None of the above If applicable, please describe how these resources will be used in the implementation of this initiative (150 words or less):
9.	Budget Summary – Attach an itemized list, professional estimate, quote, and/or budget summary of the total expenses for this project to this application. Total Anticipated Project Cost Total Amount Requested from City of Topeka for this initiative List ALL other entities that you have received or have applied for pending funds from: Total Amount of ALL Additional Non-City funding received Total Amount of ALL Additional Non-City funding pending

Additional Information (Optional)

You may use this page to provide any additional details or clarifications in response to the questions above regarding your project.