



Grant Application

The NH Council on Developmental Disabilities offers a variety of grants to individuals and their families or groups to support NH based disability related activities, initiatives, and personal goals. Priority is given to individuals who have not previously applied for a grant from the Council. The Council is unable to cover DSP/support and travel costs.

Section 1

Select ONE type of grant you are applying for:

Type of Grant	Maximum Award	Examples	Select ONE
Accessibility Supports accessibility for projects, programs, activities	\$500	<ul style="list-style-type: none"> • American Sign Language and/or CART services • Website and materials auditing for accessibility improvement • Training in how to make your print and digital presence more accessible 	
Personal Education and Leadership Supports development of leadership and self-advocacy skills/strategies	\$500	<ul style="list-style-type: none"> • Attend conferences/trainings to develop and strengthen self-advocacy skills • Attending information webinars 	
Employment and Post-Secondary Education Supports inclusion in employment, post-secondary education	\$1,000	Employment and Post-Secondary Education grants are only for people with intellectual and developmental disabilities who have additional educational support needs not covered by other funding streams (e.g. extra tutoring support, transportation support, materials in large print, etc.). <ul style="list-style-type: none"> • Driver education 	

		<ul style="list-style-type: none"> • Resume assistance/job applications, career/college exploration. • Interview clothing/uniforms • Trade tools • Temporary transportation • Certifications • Career/college exploration consultation • Tutoring • Supportive tools such as books, tech, supplies 	
<p>Community Projects and Educational Programs Supports community and school projects for inclusion/integration in the community</p>	\$1,000	<ul style="list-style-type: none"> • A project providing technical assistance to people with disabilities interested in developing and managing inclusive cooperative housing alternatives • A “train the trainer” event to teach self-advocacy skills • A team which provides technical assistance to camps and recreation facilities wishing to improve accessibility • Purchase materials for inclusion in co-curricular activities • Inclusive playgrounds and equipment • Inclusive trails • Communication boards 	
<p>Innovation Supports innovative projects or educational programs that address a need</p>	\$5,000	<ul style="list-style-type: none"> • Encourage positive emotional and social well-being by providing financial support to programming that reduces stress and promotes inclusion • Collaborative work completed and presented regarding emergency preparedness plans for the DD/ID community • Creation of cooperative respite programs 	

Section 2

Please read carefully through the following process:

1. Only complete applications will be reviewed.
2. Preference will be given to projects with the following characteristics:
 - a. People with disabilities are developing leadership and advocacy skill.
 - b. People with disabilities are exercising personal choice and desire to take part in activity.
 - c. People with and without disabilities are engaged in activities together in integrated settings.
 - d. People with disabilities play an equitable role in the planning of the project.
3. All grant proposals must help achieve one or more of the goals and objectives in the Council's five-year plan, which include:
 - a. Quality of Life
 - b. Advocacy and Training

The 5-year plan can be found at <https://bit.ly/NHCDD5-YearPlan>

4. The Council may give preference to high priority goals and objectives.
5. Grant requests are subject to available funds.
6. Grant recipients may be asked to obtain a state vendor number.

Section 3

Please read carefully what a recipient is responsible for after an award:

1. Grantees are required to complete the Council's annual satisfaction survey. The survey is available online and in paper format. Surveys should be completed by everyone who participated in or was otherwise impacted by the project.
2. The NHCDD logo and recognition of the Council's sponsorship must be included on all project materials and publicity. A federal disclaimer may be required.
3. The Council retains a royalty free, nonexclusive, and irrevocable right to reproduce, publish, use, or authorize others to use any materials developed as a result of the project for Federal and State Government purposes.
4. The Council may publicize the awarding of the grant through press releases and other available media.
5. Grantees are required to keep financial records and records verifying the basis of numbers reported for performance measures for at least three years following the conclusion of the grant and provide them upon request.
6. The project should not have other sources of funding available that are enough to carry out the project.
7. Funding cannot be provided for projects that carry out a function that is an obligation of local, state or federal government (including the school system), Area Agencies or other publicly-funded entities.

8. Funding will not be used to pay agency overhead costs such as office rent or salaries or to support the ongoing operations of an agency.
9. Funds will only be provided as a grant or reimbursement.

For Community and Innovation Grants only:

1. A written report on grant activities and outcomes is required when the project is complete and at the end of each federal fiscal year (September 30th) until the project is completed.
 - a. The report must describe all project activities and outcomes, and not be limited to components paid for with Council funds. Applicants should review the reporting form (available on the Council's web site) and ask any questions prior to accepting funds.
 - b. For agency applicants, the Agency Director, President or CEO is responsible for assuring that the report is completed in the event the project manager leaves the agency.
2. There must be a plan in place to evaluate the effectiveness and outcomes of the project and the applicant will share the results with the Council.

NOTE: The Council **does not** support:

- projects that portray people with disabilities as being inspirational to able-bodied people, on the basis of their life circumstances, which objectifies disabled people for the benefit of the able-bodied.
- social or recreational activities where people with disabilities are isolated or segregated from the broader community or their typically developing peers. This includes projects in which:
 - typically developing peers act as “helpers”
 - people with disabilities have a different status or role than people without disabilities
 - activities where people with disabilities are in a distinct sub-group that is separated or treated differently from the general population.



The New Hampshire Council on Developmental Disabilities is dedicated to the pursuit of dignity and justice, authentic community inclusion, cultural competency, and self-determination for all New Hampshire residents with developmental disabilities.

Section 4: Completely answer all questions.

Name of Applicant: _____ Date of Application: _____

Contact (if different): _____ NH State Vendor # _____

Address _____

Phone _____ E-Mail _____

Amount Requested: _____ Project Name: _____

Type of Grant Requested:

- | | | |
|--|---|------------------------------------|
| <input type="checkbox"/> Innovation | <input type="checkbox"/> Employment/Post Sec | <input type="checkbox"/> Community |
| <input type="checkbox"/> Accessibility | <input type="checkbox"/> Leadership Scholarship | |

Are you applying as:

- | | |
|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Organization |
|-------------------------------------|---------------------------------------|

1. Please describe:

- a. the project for which funding is being requested
- b. how the knowledge gained from the project will be shared
- c. how it will impact your life or the life of others

2. Which of the following measures are applicable to your project?

- Education and Training
- Coalition Building
- Leadership Development and Advocacy
- Public Education and Outreach

3. How will you evaluate the short or long-term impacts of the project?

Outcome Measures

4. All projects supported by the council must promote one or more goals in the council's five-year strategic plan. Please choose no more than two:

Goal 1 Quality of Life

- Objective 1: Community Integration, Improving policy/practice
- Objective 2: Quality Services

Goal 2 Advocacy

- Objective 1: Self-Advocacy, Leadership, Peer Mentoring
- Objective 2: Policy
- Objective 3: Access to Information
- Objective 4: Equitable Education

How will the project achieve the goals and objectives identified above and what is your timeline?

5. Please describe how people with disabilities will be included in the planning and implementation of the project. How will their involvement impact their lives, their families or the community?

If the application is from an organization, please provide a brief description of the group, including whether any of the members have developmental disabilities.

Budget

The project must have sources of funding available that are sufficient to carry out the project.

1. What is the total cost of the project?

2. How much of the total cost will you be contributing?

3. Accessibility, Employment/Post-Secondary Education, Community Projects/Education Programs and Innovation Grants require a 25% match¹. Matches for Personal Leadership Scholarships are optional.

This can be achieved through funds and/or time:

Total Grant Award Request	
Funding from a non-federal source ²	
In-kind contributions ³	
Total match ⁴	
Total percentage of match ⁵	

I have read and accept the conditions set forth if I am awarded a grant.

Signature of Applicant/Project Manager

Date

Please send your application to:

NH Council on Developmental Disabilities
 2 ½ Beacon Street, Suite 10
 Concord, NH 03301-4447

Telephone: (603) 271-7040

FAX: (603) 271-1156

Email: grants@nhcdd.us

GETTING HELP

If you have questions or need assistance, please contact the Executive Assistant at (603) 271-7038.

Disposition of Request / For Office Use Only

___ Denied

___ Approved

Amount Approved: \$ _____

Conditions: _____

(Review Date)

(Signature of Committee Chairperson or Designee)

Special Notes:

¹ **25% match:** If you are requesting an Accessibility, Employment/Post-Secondary Education, Community Projects/Education Programs or Innovation Grants, your match must be 25% of the total request. To determine: divide the grant request total by four (4), and that will be the total match amount.

For example: if you ask for \$100, divide \$100 by 4 and the match amount is \$25. If you ask for \$500, divide \$500 by 4 and the match amount is \$125. If you ask for \$1000, divide \$1000 by 4 and the match amount is \$250.

² **Funding from a non-federal source:** A non-federal source is funding from a private organization, a private individual; anything that is not connected to the federal government.

³ **In-kind contributions:** In-kind contributions are items other than money. For example, it could be things like:

- someone donates office space for you to work in
- materials to help you with your project
- volunteer time that is given to you to help complete the project

In-kind contributions are given a reasonable, market price. For example, if you're given office supplies like binders, pens, pencils, paper, think about how much it would cost if you went into a store to purchase it, and that would be the in-kind contribution. If you had donated office space, ask how much the space usually rents for and use that amount as the in-kind contribution. If you are given volunteer time, you may use \$15 an hour as the in-kind contribution or any other reasonable rate.

⁴ **Total match:** Add together the funding from a non-federal source and in-kind contributions and that will be your total match.

⁵ **Total percentage of match:** divide the total match by the total grant request and that is the percentage. For example, if your match is \$150 and you requested a \$600 grant, \$150 divided by \$600 is .25 or 25%. Or, if your match is \$525 and you requested a \$1500 grant, \$525 divided by \$1500 is .35 or 35% (wow! 😊)