Application Packet

Occupational Safety And Health
Training And Education Grant
2023-2024

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# Application Instructions

Before completing the grant application, please review all [program criteria](https://osha.oregon.gov/edu/grants/Documents/grant-procedures-and-guidelines.docx), including eligibility and how applications will be evaluated. The significance of each part of the application is briefly explained below. If you have additional questions, please contact Oregon OSHA’s Grant Coordinator – Matt Kaiser (matthew.c.kaiser@dcbs.oregon.gov) or call 503-378-3272.

1. **Cooperative Affiliates and Signature (5 Points):** The proposed training or education project must show a joint cooperation between management, labor, and the intended target audience(s).
2. **Impact Statement (25 Points):** The Impact Statement is where you tell the grant evaluation committee about:
* The occupational safety and/or health problem(s) you want to address and clearly explain the seriousness of the issue(s) or hazards
* Who the target audience(s) is/are
* Show how your proposed training or education project will help prevent, eliminate, solve, or otherwise address the occupational safety or health problem(s) specified in your project in a new or innovative way
* Include evidence of joint management-labor cooperation; and
* Describe how you will track and measure the project’s effectiveness and performance throughout the grant period
1. **Project Design (30 Points):** The Project Design is where you describe in detail the how of your project and fully explain the purpose of the training or education project itself. This is where you describe the specific learning objectives; the outreach and promotional methods you plan to use to get your training or education program to the target audience; how the project is innovative and not simply a reproduction of something that already exists elsewhere; and progress milestones or expected timeline for the project development.
2. **Project Management (20 Points):** The Project Management part of the application is where you describe who will manage and direct the program; the division of responsibility; commitment from organizations or partner groups; the project activities; identify key project staff and management; and how the project will actually be completed.
3. **Resources (20 Points):** The Resources part of the application is where you specify the estimated costs associated with the project. The project expenditures must be consistent with grant objectives and activities. The budget plan must be consistent with Oregon OSHA grant guidelines. **Grant projects are limited to a maximum funding limit of $40,000 per proposal and the following expenditure limitations apply: Research 20%, Subcontracting 40%, Equipment 20%, Operations and Facilities 20%.** You must provide evidence that fiscal management for required budgetary monitoring and auditing is in place. Exemption requests to these limitations must be clearly described and justified in the application and are subject to further approval.

# Form A – Applicant Information

**Grant Project Title:**

**Grant year:** **2023 Total Requested:**

Organization:

Federal Tax Id #:

Designated Administrative Official:
Name:       Title:

Mailing Address (Street or P.O. Box, City, State and Zip Code)

Telephone:       Email:

Grant Project Director (**if other** than the Designated Administrative Official)
Name:       Title:

Mailing Address (Street or P.O. Box, City, State and Zip Code)

Telephone:       Email:

## Official Certification

1. The Designated Administrative Official of the organization certifies that the Grant Project Director listed on this form (Check one box)

[ ]  **Is** authorized to negotiate and execute legal documents related to this grant with Oregon OSHA.

[ ]  **Is not** authorized to negotiate and execute legal documents related to this grant with Oregon OSHA. The authorized person to negotiate and execute legal documents for this grant is:

Name:       Title:

Telephone:       Email:

1. The Designated Administrative Official of the organization also certifies that if selected for funding, this project will be operated according to the Oregon OSHA Grant Program guidelines, and the policies and requirements specified by the contractual agreement, which will be executed by Oregon OSHA.

**Designated Official Signature**

       Date

# A1 - Cooperation Affiliates and Signature

(Letters of Support may substitute for this document[[1]](#footnote-2))

|  |  |
| --- | --- |
| Training Projects must show evidence of joint cooperation between Management, Labor, and Target Audience. Obtain a representative number of affiliate signatures and indicate designation. (**M** = Management; **L** = Labor; **TA** = Target Audience) | 5 Points |
| Organization | Contact Person/Job Title | Telephone | Authorized Signature | M | L | TA |
|       |       |       |       | [ ]  | [ ]  | [ ]  |
|       |       |       |       | [ ]  | [ ]  | [ ]  |
|       |       |       |       | [ ]  | [ ]  | [ ]  |
|       |       |       |       | [ ]  | [ ]  | [ ]  |
|       |       |       |       | [ ]  | [ ]  | [ ]  |
|       |       |       |       | [ ]  | [ ]  | [ ]  |
|       |       |       |       | [ ]  | [ ]  | [ ]  |

*Add more rows (+ button at bottom-right row of table) to include all affiliate names and signatures)*

# A2 - Project Summary

Write a short summary of the project covering Impact Statement, Project Design, Project Management and Resources. Applicants are encouraged to complete Form A2 - Project Summary after completing all other sections of the application. Label and use additional pages as necessary.

## Impact Statement – 25 Points

## Project Design – 30 Points

## Project Management – 20 points

## Resources – 20 Points

**Note:** Grant applications are evaluated and scored out of 100 total points. Applicants receive 5 points for the proper completion of the A1 - Cooperation Affiliates and Signature Page.

# A3 - Impact Statement

## New and Innovative Idea

Explain the extent to which the proposed project is not already available elsewhere. Is the training or education already provided by Oregon OSHA, federal OSHA, NIOSH, or other government agency? In your answer, identify sources of research, in Oregon and nationally, that show the product is not otherwise already available. Applicants that are re-applying for funding are expected to clearly and thoroughly describe how its current grant request differs from its previous grant applications that received funding. Repeat applicants must clearly describe how the current project proposal differs from their previous projects that received funding.

## Problem

What is the occupational safety and/or health problem(s) or hazard? Be specific and describe why the issue is serious and deserving of funding.

## Goals

Describe the proposal goals and how these goals will address the problem.

## Documentation supporting the problem

You must include data that supports the occupational safety and/or health problem(s) described above. Explain how the data you used identifies or highlights the problem. Attach copies of any data used for the grant application. For example, injury/illness reports, statistical reports, case studies, journals, articles, etc. See Procedures and Guidelines Appendix C for assistance with data.

## Target Audience

Who is the audience of the training or education program? After training, how will the target audience reduce or eliminate the occupational problem(s) described above? Be specific and describe how effectiveness of the training or education program will be evaluated or measured.

## Learning Objectives

Describe the learning objectives and how they will affect the target audience. What are participants expected to learn from the training or education?

## Recruitment

Explain the outreach and recruitment efforts that will be used to ensure the target audience will receive or use the training and/or services.

## Measurement

Identify the measurement method(s) that will be used to determine program effectiveness. Examples include: pre/post testing, participant surveys, injury/illness reduction studies, complaint tracking system, etc.

## Management/Labor Cooperation

Describe how management and labor groups will cooperate in the development and implementation of the project. It is essential that labor and management work together.

# A4 - Project Design

## Training and Activities

Describe the details of the training that will be developed and what activities will be accomplished by this project.

## Subject(s) Covered

What specific occupational safety and health subject(s) will the program or material cover or address?

## Training Program Materials or New and Innovative Idea

Describe the type(s) of educational materials to be developed (e.g. trainers guide, video, webinar, publication etc.) and why the selected materials are best for the target audience.

## Tailoring for Audience Needs

Describe how the training and services will be tailored to the particular needs of the audience.

# Form B - Activity Timeline

**Instructions:** List all significant activities needed to accomplish the project and check the boxes representing when each activity will take place. Use as many forms as needed.

**First funding will be allocated December 2023.** Quarterly reports will be due in March, June, and September 2024. The Final Report and grant product(s) are **due to Oregon OSHA by December 31, 2024;** Materials may be mailed, delivered in-person, or sent by email. Please contact Oregon OSHA’s Grant Coordinator matthew.c.kaiser@dcbs.oregon.gov to coordinate the submission of quarterly reports and the final grant product.

|  |  |  |
| --- | --- | --- |
| Activities | **Dec 2023** | **2024** |
| **Jan** | **Feb** | **Mar** | **Apr** | **May** | **Jun** | **Jul** | **Aug** | **Sep** | **Oct** | **Nov** | **Dec** |
| Funds allocated December 2023 | **X** |  |  |  |  |  |  |  |  |  |  |  |  |
| 1st Quarter Progress Report due |  |  |  | **X** |  |  |  |  |  |  |  |  |  |
| 2nd Quarter Progress Report due |  |  |  |  |  |  | **X** |  |  |  |  |  |  |
| 3rd Quarter Progress Report due |  |  |  |  |  |  |  |  |  | **X** |  |  |  |
|       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
|       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
|       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
|       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
|       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
|       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
|       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
|       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
|       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
|       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| **Final Report** due |  |  |  |  |  |  |  |  |  |  |  |  | **X** |

# B1 - Project Management

## Organization

Describe the history and purpose of your organization.

## Expanded Activities

Describe how the proposed project activities will change or expand the current occupational safety and health activities performed by your organization or the target audience.

## Staffing

Describe the staffing plan for the project. Identify key personnel who will provide: administration or coordination; instruction; curriculum development; performance and evaluation; and financial recordkeeping. Include a brief description of the responsibilities of each position. A complete resume for the Project Director and other program managers must be provided as a separate attachment.

## Project Management

Describe the procedures for the ongoing management of the project activities, including supervision of staff, monitoring or operations, and implementation of corrective action.

# B2 - Resource Management

## Costs rationale

Explain the costs for each of the following categories. This section provides written support to Form C of the Application. Please review Form C prior to completing this section.

### 1. Administration Staff Salaries/Fringe

List the duties needed to administer the grant. For example: bookkeeping, completing financial reports, ordering supplies, paying bills, etc.

### 2. Training & Program Development Staff Salaries/Fringe

List the duties needed to develop the grant. For example: writing, developing teaching materials, filming, conducting training, etc. If the same person will perform both the administration and the training duties, these duties must be described separately.

### 3. Operations/Facilities

This cost category in aggregate is **limited to 20%** of the total grant award.

Rent: Describe the extent to which grant funds will be used to establish and/or maintain any rental facilities or equipment. Note: funds awarded under this grant program are not intended to supplement ongoing rental activities, but rather new or innovative activities.

Support Services: Describe the type of services needed and the extent to which grant funds will go toward these services.

General Administration: Describe the amounts charged to general maintenance and operation of the grant project.

### 4. Office Supplies

Include anticipated costs for photocopies, postage, general supplies, printing, etc.

### 5. Travel

Explain the method of estimating travel expenses during project development. Cost figures must not exceed state authorized travel rates. Current rates are at https://www.gsa.gov/travel/plan-book/per-diem-rates

### 6. Training Materials

Describe the types of educational materials to be developed or purchased and at what cost not including equipment.

### 7. Equipment

This cost category in aggregate is **limited to 20%** of the total grant award. A Division consideration will be to reduce such costs to minimal levels. See Sections 111 and 112 General Provisions of the Procedures and Guidelines.

### 8. Contractual Services

This cost category in aggregate is **limited to 40%** of the total grant award. A Division consideration will be to reduce such costs to minimal levels. Describe the scope of services to be provided through a sub-contractual agreement and why these services must be purchased contractually. The total grant funds requested must include all actual costs. Do not include subcontractors' expenses in the grantee individual grant categories, but do include a detailed estimate from a potential subcontractor. See Sections 111 and 112 General Provisions of the Procedures and Guidelines.

### 9. In-kind Contributions

Describe the in-kind services that will be provided and for which activities.

### 10. Fund Use

Describe how the budget represents the use of funds such that grant funds will not substitute for revenues currently devoted to the same or similar activities currently provided by the sponsoring organization/grantee.

### 11. Fiscal Management

Describe the procedures for fiscal management, including maintenance of separate bank accounts, bookkeeping systems, etc., which will meet the requirements of documentation sufficient for fiscal monitoring or auditing by Oregon OSHA.

# Form C - Summary of Estimated Expenditures

**Instructions:** After completing Form D, complete this summary reflecting the planned use of grant funds by major category and time periods.

|  |  |  |
| --- | --- | --- |
| Category | Total Funds | Estimated Grant Expenditures |
| (Does not include matching funds) |
|  | Grant | In Kind Matching | First 3 Months | Second 3 Months | Third 3 Months | Fourth 3 Months |
| 1. Administration Salaries & Fringe |       |       |       |       |       |       |
| 2. Training & Development Salaries & Fringe |       |       |       |       |       |       |
| 3. Office Supplies |       |       |       |       |       |       |
| 4. Operations / Facilities  |       |       |       |       |       |       |
| 5. Travel  |       |       |       |       |       |       |
| 6. Training Materials |       |       |       |       |       |       |
| 7. Equipment  |       |       |       |       |       |       |
| 8. Contractual  |       |       |       |       |       |       |
| 9. In-kind |       |       |       |       |       |       |
| TOTALS | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |

Research 20%

Sub-contractual 40%

Equipment 20%

Operations and Facilities 20%

# Form D - Itemized Expenditures

|  |  |
| --- | --- |
| Administration Salary & Fringe | Category Total $0.00 |
| Line Item Detail |
| Position | Salary Per Week | No. of Weeks | Total Charged |
| 1.       |        |       |  $0.00 |
| 2.       |        |       |  $0.00 |
| 3.       |        |       |  $0.00 |

|  |  |
| --- | --- |
| Training and Development Personnel Salary & Fringe | Category Total $0.00 |
| Line Item Detail |
| Position | Salary Per Week | No. of Weeks | Total Charged |
| 1.       |        |       |  $0.00 |
| 2.       |        |       |  $0.00 |
| 3.       |        |       |  $0.00 |
| 4.       |        |       |  $0.00 |

|  |  |
| --- | --- |
| Office Supplies | Category Total $0.00 |
| Line Item Detail |
| Type of Supplies | Cost Per Unit | Total Units | Total Charged |
| 1. Printing |        |       |  $0.00 |
| 2. General SuppliesAttach details of items greater than $100.00 |        |       |  $0.00 |
| 3. Postage |        |       |  $0.00 |

|  |  |
| --- | --- |
| Operations and FacilitiesLimited to 20% of Grant Funds Requested | Category Total $0.00 |
| Line Item Detail |
|  | No. of Months | Monthly Amount | Total Charged |
| Rent |       |        |  $0.00 |
| Utilities |       |        |  $0.00 |
| Telephone |       |        |  $0.00 |
| Support Services |
| Type of Service |       |        |
|       |        |
| General Administration |
| Description |       |        |
|  |       |        |
|  |       |        |
|  |       |        |

|  |  |
| --- | --- |
| Travel for Grantee Staff | Category Total $0.00 |
| Line Item Detail |
| Must comply with current per diem/mileage rates1 |
| Mileage | Amount Per Mile | $0.655 | Total Charged |
| No. of Miles |        |  $0.00 |
| Lodging  | Amount Per Night |       | Total Charged |
| No. of Nights |        |  $0.00 |
| Meals & Incidentals | M&I  |       | Total Charged |
| No. of Meals |        |  $0.00 |

1<https://www.gsa.gov/travel#tab--pov-mileage> and <https://www.gsa.gov/travel#tab--perdiem-tab>

|  |  |
| --- | --- |
| Training Materials | Category Total $0.00 |
| Line Item Detail |
| Type of Good/ Service | Cost Per Unit | Total Units | Total Charged |
| 1.       |       |       | $0.00 |
| 2.       |       |       | $0.00 |
| 3.       |       |       | $0.00 |
| 4.       |       |       | $0.00 |
| 5.       |       |       | $0.00 |

|  |  |
| --- | --- |
| Equipment(Limited to 20% of grant funds requested) | Category Total $0.00 |
| Line Item Detail |
| Type of Purchase | Cost Per Unit | Total Units | Total Charged |
| 1.       |       |       | $0.00 |
| 2.       |       |       | $0.00 |
| 3.       |       |       | $0.00 |
| 4.       |       |       | $0.00 |
| Type of Rental | Cost Per Unit | Total Units | Total Charged |
| 1.       |       |       | $0.00 |
| 2.       |       |       | $0.00 |
| 3.       |       |       | $0.00 |
| 4.       |       |       | $0.00 |

|  |  |
| --- | --- |
| ContractualInclude All Subcontractors and Costs(Limited to 40% of grant funds requested) | Category Total $0.00 |
| Line Item Detail |
| Contractor Company Name | Total Charged |
|       |       |
|       |       |

|  |  |
| --- | --- |
| Other | Category Total $0.00 |
| Line Item Detail |
| Description | Total Charged |
|       |       |

|  |  |
| --- | --- |
| Administration Salary & Fringe | $0.00 |
| Training And Development Personnel Salary & Fringe | $0.00 |
| Office Supplies | $0.00 |
| Operations and Facilities | $0.00 |
| Travel for Grantee Staff | $0.00 |
| Training Materials | $0.00 |
| Equipment | $0.00 |
| Contractual | $0.00 |
| Other | $0.00 |
| Total Budget - All Categories  |  $0.00 |

1. Letter(s) of Support must clearly identify the intended target audience as well as include a clear indication of support from both labor and management. [↑](#footnote-ref-2)