



**This PDF is for preparation purposes only.
Please complete and submit the online application at:
[https://ohsu.ca1.qualtrics.com/jfe/form/
SV_0Du0QFRJ5VTLwiy](https://ohsu.ca1.qualtrics.com/jfe/form/SV_0Du0QFRJ5VTLwiy)**

Organization background

The OHSU University Center for Excellence in Developmental Disabilities (UCEDD) is pleased to offer community funding in partnership with our advisory group, the Community Partners Council (CPC).

Thank you for your interest in applying for a Community Engagement Grant!

This application does not have a 'save' feature. We recommend that you complete the application in one sitting. We suggest writing and saving your answers using the sample application before beginning this online form. You can access a sample version of this application and the scoring rubric on the [Community Engagement Grant webpage](#).

Q1. Organization Name:

Q2. Project contact person(s):

Primary contact person name:

Secondary contact person name:

Q3. Email address:

Primary contact person email:

Secondary contact person email:

Q4. Mailing address:

Street:

City:

Zip code:

Q5. Phone number:

Q6. Website address:

Q7. Tax ID number (for 501c3 verification):

Q8a. What is your organization's mission?

Q8b. Are you an organization that serves a culturally specific community? If yes, which community do you work with?

Q9. Amount requested (up to \$2,000):

Q10. Please describe the groups of people or communities who would be served by requested funds:

For example: youth with disabilities, adults with disabilities, parents and caregivers, professionals, students, general public

If you have estimates of the number of people who will be served, please also include that for each group.



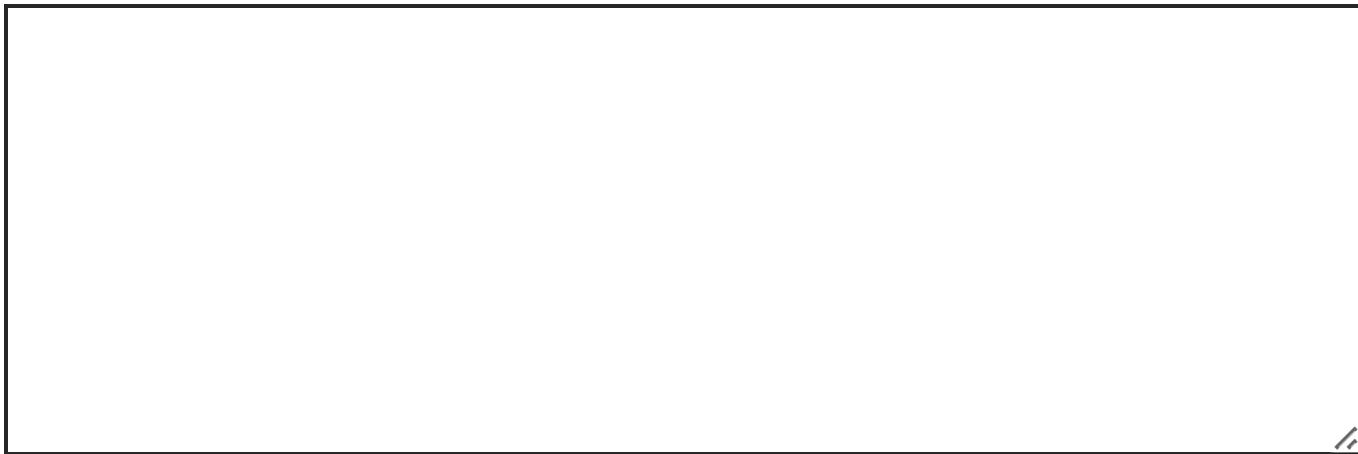
Project description

Q11. Project title:



For the following short answer questions, please keep your answers brief (50-250 words).

Q12. Project summary: Include why you would like to do this project, and what you will do (describe your main activities).



Q13. Describe your overall project timeline. (Some things to include might be approximate dates for planned activities, recruiting participants, work with partners, sharing out information, or other project milestones.)



Q14. How were people with disabilities involved in developing this project and/or preparing this proposal? (select all that apply and describe)

Please note: This is very important to our council members.

For examples of how to achieve this, please see the last section in "Tips for reaching and including underserved communities" document on the [Community Engagement Grants webpage](#).

Project or proposal development was led by people with disabilities:



Project or proposal development involved people with disabilities:



Input was gathered from people with disabilities for project or proposal development:

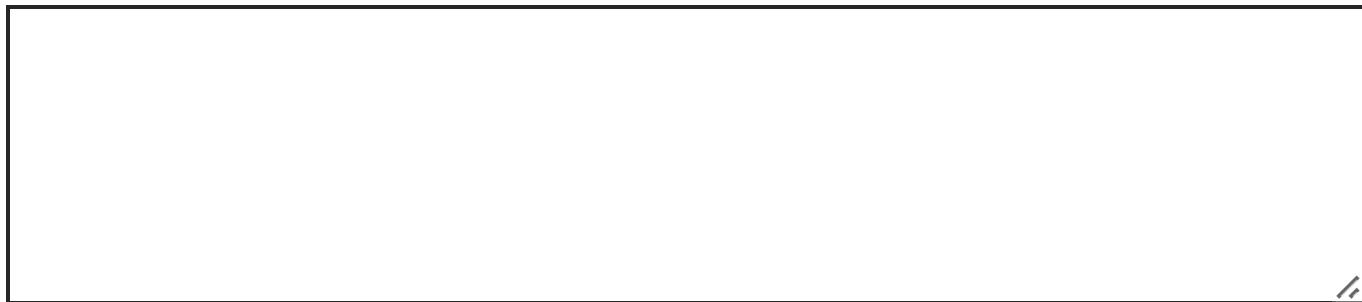


Other, please describe:



Q15. How does this project reach or include under-served communities, including communities that represent the intersection of other identities in addition to disability?

For examples of how to achieve this, please see the Tip Sheet on the [Community Engagement Grants webpage](#).

A large, empty rectangular box with a black border, intended for the respondent to type their answer to Question 15.

Q16. What other groups or community partners will you work with on this project and what is their role? (Examples could include partners helping with planning, recruiting, promotion, funding, etc.) Note: At least one partner is required.

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Financial Info

Q17. Please upload a completed budget sheet. The template can be downloaded from the [Community Engagement Grants webpage](#). Please do not submit a budget for your entire organization or a larger project budget. Please only list expenses to be covered by the grant funding.

It is helpful if you include your organization or project name when naming the file.

Q18. Please upload a completed w-9 form which is also available to download from the [Community Engagement Grants webpage](#).