



Idaho Office of Highway Safety
FFY 2020 GRANT APPLICATION

PO Box 7129
Boise, ID 83707-1129
Phone: (208)334-8104
Fax No. (208)334-4430

Project/Program Title:

Date Submitted:

Section One – Applicant Information

Name of Agency/Organization

Federal Employer or Taxpayer ID Number (FEIN or TIN)

DUNS Number

Private/Nonprofit

 YES NO

Address of Agency

Primary Contact (agency contact with signing authority)

Name and Title

Address

E-mail Address

Phone Number

Grant Manager (individual responsible for the everyday activities of the grant)

Name and Title

Address

E-mail Address

Phone Number

Mark the focus area(s) that apply: Occupant Protection Aggressive Driving Impaired Driving

Youthful Drivers Distracted Driving Emergency Response Other:

Agency Authorizing Signature

Grant Manager Signature

INSTRUCTIONS

Please provide a grant project narrative by completing the sections below. All programs and projects must support the Office of Highway Safety’s Strategic Highway Safety Plan (SHSP). The purpose of the SHSP is to provide a data driven, system-wide, comprehensive, collaborative approach to eliminating fatalities and serious injuries on Idaho roadways. The SHSP is available at <http://itd.idaho.gov/safety/>

NOTE: Please email both a Word and PDF document of your application to ohsgrants@itd.idaho.gov on or before **1800 hrs. on 02/08/2019**, with the title of your agency/organization in the subject line.

A. Problem Identification /Needs Statement – Describe and document the highway safety crash problem. Include the most recent crash data available. State and local data, not national data, is preferred. OHS on-line data resources are available at <http://itd.idaho.gov/safety/> OR <http://apps.itd.idaho.gov/apps/webcars/Default2.aspx>

B. Goal(s) and Objective(s)– The proposal must contain at least one measurable Goal and/or Objective tied to a reduction in traffic crashes, as identified in the problem statement.

C. Tasks and Deliverables – List the Tasks and Deliverables you plan to use to accomplish the Goals and Objectives specified in Section B. Tasks must have a target date for completion, with milestones that will be reported in periodic progress reports. All proposals must contain at least one public awareness/education strategy.

D. Evaluation and Performance- Describe how the Tasks and Deliverables specified in Section C will be implemented and evaluated. Describe all measures being used to determine the success of the project. Provide details on what sources of data you use, and how appropriate procedures are in place within your agency to set up and monitor the grant funded activities. *Note: If this is a STEP Grant please provide crash and citation comparison data for up to 3 years prior to the current grant funded years 1, 2 and 3.*

E. Future Funding Plan/Sustainability – Provide a plan for how the project will be sustained by your agency/organization beyond this contract year.

F. Attachments: Attach any other information or documentation to this application that is beneficial to and supports your project.

SECTION 3. Project Budget

PERSONNEL: List each employee/position (and their duties) you foresee will be utilized for this position. Estimate salary, hours worked and other costs associated with the position. <i>Note: Selective Traffic Enforcement Patrol (STEP) grant funded positions must be backfilled by new hires prior to beginning the STEP grant.</i>	Matching Funds: Identify how you will match federal funds.
POSITION: DUTIES/HOURS/SALARY:	
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PERSONNEL TOTAL:

TRAINING: List any courses/seminars/workshops associated with this project. This will include any training to be provided by this project or attended by personnel employed with this project.	Matching Funds: Identify how you will match federal funds.
COURSE: AMOUNT:	
PURPOSE:	
COURSE: AMOUNT:	
PURPOSE:	

TRAINING/TOTAL:

TRAVEL: Describe location (if known) and item (airfare, lodging, per diem, etc.) and the purpose of the travel.	Matching Funds: Identify how you will match federal funds.
EVENT: AMOUNT: LOCATION/PURPOSE:	
EVENT: AMOUNT: LOCATION/PURPOSE:	
EVENT: AMOUNT: LOCATION/PURPOSE:	
EVENT: AMOUNT: LOCATION/PURPOSE:	

TRAVEL/TOTAL:

EQUIPMENT: <i>Traffic enforcement equipment necessary to accomplish the goals of the grant. All equipment with an acquisition cost of \$5,000 or more per unit must be pre-approved in writing by NHTSA, and will be tracked by OHS for 3 years.</i>		Matching Funds: <i>Identify how you will match federal funds.</i>
ITEM: PURPOSE/BENEFIT:	AMOUNT:	
ITEM: PURPOSE/BENEFIT:	AMOUNT:	

EQUIPMENT/TOTAL:

MISC.: <i>Any items not mentioned above associated with this project.</i>		Matching Funds: <i>Identify how you will match federal funds.</i>
ITEM: PURPOSE/USE:	AMOUNT:	
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MISC/TOTAL:

PROJECT BUDGET TOTAL

- A. **TOTAL AMOUNT OF FEDERAL FUNDS REQUESTED:**
- B. **TOTAL AMOUNT OF LOCAL MATCH (minimum 25%) FROM AGENCY:**
(STEP Grants are funded at 25%, 50% and 75% per respective years)