

## Part 1: Request for Proposal Summary

**TITLE: STRENGTHENING SELF ADOCACY IN MINNESOTA THROUGH A STATEWIDE COORDINATING EFFORT**

**ISSUED BY:** Minnesota Governor's Council on Developmental Disabilities  
370 Centennial Office Building  
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Saint Paul, Minnesota 55155  
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### 1.A. Authority and Purpose

**Source of Funds:** The federal funds available under this Request for Proposal (RFP) are provided to the State of Minnesota from the United States Department of Health and Human Services, Administration for Community Living, Administration on Intellectual and Developmental Disabilities(AIDD), as authorized under the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (DD Act). The Minnesota Governor's Council on Developmental Disabilities (GCDD) uses these funds to support grant projects and activities that reflect the values contained in the DD Act and result in the *increased independence, productivity, self determination, integration and inclusion(IPSII) of people with developmental disabilities and their families in the community*. Self Advocacy is one of these grant projects.

**Purpose of the funds:** One section of the DD Act, [Public Law 106-402, Section 124(b)(4)(ii)], contains the following requirements.

1. Establish or strengthen a program for the direct funding of a state self advocacy organization, led by individuals with developmental disabilities;
2. Support opportunities for individuals with developmental disabilities who are considered leaders to provide leadership training to individuals with developmental disabilities who may become leaders;
3. Support and expand participation of individuals with developmental disabilities in cross disability and culturally diverse leadership coalitions.

According to the GCDD's Five Year State Plan for FFYs 2017-2021, the Goal Statement for Self Advocacy is the same as above with the addition of

identifying other funding opportunities for self advocacy. More information about the federal requirements, including definitions, can be found in Part 6: Additional Information.

A total of \$100,000 is available to fulfill the federal DD Act requirements for self advocacy. The GCDD will select one or more sub-grantees.

Self Advocates Minnesota (SAM) is the statewide self advocacy network. The GCDD currently funds two of the six SAM Regions. A proposal that is supporting statewide self advocacy efforts must include:

- Support of local self advocacy groups at the grassroots level;
- Strengthening existing local self advocacy groups as well as developing new self advocacy groups where none currently exist;
- Provide learning and teaching opportunities for self advocates to improve their leadership skills, and expand their participation in cross-disability and culturally diverse communities.

The lead applicant would have to meet the eligibility requirements above and would be responsible for handling funds, collecting and compiling data and all evaluation results; ensure that all required performance measures are met; submitting fiscal and narrative progress reports. The award of a single grant is preferable

At least seventy-five (75) percent of the funds to local self advocacy groups must be used to strengthen these groups at a grassroots level. The remaining funds can be used to coordinate the project; handle administrative responsibilities; and prepare and submit reports.

#### **1.B. Due Date**

Proposals must be received at the GCDD, by mail or hand delivery, **no later than 3:00 p.m. on Monday, March 20, 2017**. You must deliver fifteen (15) paper copies of the complete proposal; each copy must be stapled or bound. An original authorized signature must be on the cover of the proposal. The GCDD does not accept proposals through fax or e-mail.

**PLEASE NOTE:** Late proposals will NOT be considered.

#### **1.C. Questions**

Questions about this RFP should be directed to Mary Jo Nichols, the GCDD Grants Administrator. The **deadline for questions is 12:00 Noon on Tuesday,**

**March 7, 2017.** Responses will be emailed to all who submitted questions or expressed interest in the RFP as soon as possible following the deadline.

Submit questions to:

Mary Jo Nichols  
Grants Administrator  
Minnesota Governor's Council on Developmental Disabilities  
370 Centennial Office Building  
658 Cedar Street  
Saint Paul, Minnesota 55155  
Email: mary.jo.nichols@state.mn.us  
Voice: (651) 282-2899  
Fax: (651) 297-7200  
TTY: (800) 627-3529 Minnesota Relay Service OR 711

## **Part 2: Proposal Requirements**

### **2.A. Who Can Apply**

**Eligibility.** Proposals can be submitted by any public or private organization or any private non-profit organization that has 501(c)3 tax-exempt status from the Internal Revenue Service. Applicants must include a document confirming their status.

### **2.B. Project Length**

This RFP covers up to a five-year period. However, funds are available and awarded for a one-year period only. Renewal of the grant depends on the availability of federal funds, and the satisfactory performance of the organization in assuming responsibility for completing all duties and performance goals related to carrying out a self advocacy program or project.

### **2.C. Background**

The GCDD has supported self advocacy and People First activities since the mid-1970s - at self advocacy conferences at state and national levels, conferences that featured a self advocacy component, local self advocacy groups that hold workshops and training sessions on self advocacy topics, in publications that have included specific sections on self advocacy, projects and programs with youth with and without disabilities, a survey of empowerment programs, the GCDD's historical archives, and other grant programs.

In 2000, Congress reauthorized the DD Act and included a provision about self advocacy. Since that time, the GCDD has funded self advocacy.

In 2007, Advocating Change Together organized Self-Advocates Minnesota (SAM), a network of self-advocacy groups in six SAM Regions around the state. Today, more than 50 self advocacy groups are connected and working together. Each region works with local self advocacy groups to build personal power, connect to the disability rights movement and make community changes. All six regions also meet once a year to share best practices and accomplishments.

The GCDD's first grant to Advocating Change Together, Inc. was awarded in that same year to support the Central and Northwest Regions of SAM.

## **2.D. Required Activities**

**Carrying out your project or activity.** Your proposal will describe how your organization or consortium plans to coordinate a statewide effort to strengthen self advocacy in Minnesota; or support self advocates and other self advocacy activities. If your organization's proposal is accepted, you will be required to carry out your plan of action.

**State partnership.** If your proposal is accepted, the GCDD continues to work with you during the entire project year.

A successful applicant must work with GCDD staff on an ongoing basis to discuss overall program implementation; assure that performance goals and reporting requirements are met (both program and financial), expenditures are in keeping with the approved budget; and that the Baldrige Criteria and quality principles are fully utilized.

The Baldrige Criteria offer a set of tools and techniques that help businesses/organizations operate more effectively and efficiently, and focus on common needs and results. This is a customer driven and results oriented approach that assesses the strengths of a business/organization and identifies areas for improvement to increase customer satisfaction with the products and services that are offered.

The GCDD will expect the applicant organization(s) to be always mindful of improvements that can increase or improve the efficiency and effectiveness of Self Advocacy projects or activities, and increase IPSII results for self advocates.

**Project evaluation.** The GCDD's training programs are evaluated in a variety of ways:

- 1) Each training session and speaker or presenter is evaluated in terms of –

- Knowledge gained – Did you learn something new?
  - Usefulness of information – Will the new information be helpful to you in any way?
  - Quality of presentation – Was the presentation understandable, were speakers prepared, could they answer questions?
- 2) The business of the GCDD is to provide information, education, and training to build knowledge, develop skills, and change attitudes so that people with developmental disabilities and their families will increase their Independence, Productivity, Self Determination, Integration and Inclusion (IPSII). These terms are found in the DD Act, and described further in Part 5: Additional Information.

Speakers or presenters also evaluate themselves in terms of IPSII.

- 3) The AIDD requires the collection of mandatory customer satisfaction data. that include the following:
- I was treated with respect during the outreach and training program;
  - I have more choice and control as a result of the program;
  - I can do more things in the community as a result of the program;
  - I am satisfied with the program;
  - My life is better because of the program;
  - I have a better understanding of my rights because of the program; and
  - I am more able to be safe and protect myself from harm because of the program.

These AIDD customer satisfaction data must be collected during the program year. Results are reported to the GCDD and included in an annual report that is submitted to the AIDD.

- 4) During the GCDD's Five Year State Plan for FFYs 2017-2021, the AIDD developed **Revised Performance Measures** (dated June 2016) and required additional data regarding the number or percent of people for **Family Advocacy Annual Performance Measures**; and the number of policies, practices, statutes, or rules for **Systems Change Annual Performance Measures** that will apply to Self Advocacy projects as follows:

At least fifty (50) self advocates will participate in training sessions;

As a result of their participation, 90% of the self advocates (45) will report an increase in their advocacy work;

As a result of their participation, 90% of the self advocates (45) will speak up and express themselves;

A total of 90% of the self advocates (45) will report satisfaction with self advocacy projects and activities;

At least ten (10) self advocates will be leadership trainers;

At least 90% of these self advocates (9) will report an increase in their advocacy work;

As a result of being leadership trainers, 90% (9) will speak up and express themselves;

A total of 90% of the self advocates will report satisfaction with serving as leadership trainers;

At least five (5) self advocates participate in coalitions.

At least one public policy change will occur;

At least two promising practices will be supported and assessed;

At least two promising practices will be improved and implemented;

At least one statutory or regulatory change will occur;

At least one improvement to a policy, procedure, statute, or regulation will be made and implemented.

**Project reporting.** If your proposal is accepted, you will prepare and submit narrative and financial reports to the GCDD on a monthly basis. Narrative reports should describe progress being made in achieving performance goals specified in the Grant Contract.

A face to face performance review with the Grant Review Committee is also scheduled about midway through the program or project year.

Grant recipients also need to collect customer satisfaction data from self advocates in a survey format created by the Administration on Intellectual and Developmental Disabilities (AIDD). These data include the following:

- I was treated with respect during the project activity;

- I have more choice and control as a result of the activity;
- I can do more things in the community as a result of the activity;
- I am satisfied with the activity
- My life is better because of the activity;
- I have a better understanding of my rights because of the activity
- I am more able to be safe and protect myself from harm because of the activity.

### **Part 3: Proposal Writing Instructions**

#### **3.A. Application Cover**

Complete the attached Application Cover form. This is Page 1 of your proposal. An original signature, in blue ink, is needed on one cover.

#### **3.B. Program Summary**

Prepare a one-page summary of your proposed program. This is Page 2 of your proposal.

#### **3.C. Program Narrative**

Limit the narrative portion of your proposal to no more than ten (10) pages. Use a type size that is standard (12 point font or larger). Include the following items in the ten page narrative section:

1. Describe your knowledge and experience of self advocacy or advocating for people with developmental disabilities.
2. Describe your advocacy knowledge and experience of leadership development, leadership training, and the promotion of self advocates as leadership trainers.
3. Describe a work plan to lead a statewide coordinating effort that will support local self advocacy groups and promote training opportunities for self advocates to improve their leadership skills. The work plan should describe the role that self advocates will assume in planning and preparing training sessions or other related activities, performance measures, and timelines for completing all work.
4. Identify the individuals who will be working with the self advocates to carry out the project or activity; and their background and experience in self advocacy, leadership training, and coalitions.
5. Provide documentation about the legal status of your organization (a 501(c)3 or public organization).

### 3.D. Performance Measures

Limit this section to no more than two (2) pages.

1. Describe how you will make sure that self advocates have a good understanding of the key program results: *increased independence, productivity, self determination, integration and inclusion (IPSII)*. Explain what approach or approaches you may use so self advocates can best assess themselves during the program or project year.
2. Describe the process that will be used to meet all evaluation requirements for Self Advocacy Programs. These include:
  - Evaluations of speakers and presenters for each training session (knowledge gained, usefulness of information, quality of presentations), and how evaluation results will be used to improve training sessions.
  - Speaker or presenter self-assessments in terms of IPSII.
  - Customer Satisfaction Survey (required by the Administration on Intellectual and Developmental Disabilities).
  - AIDD Revised Performance Measures – Individual and Family Advocacy Performance Measures and Systems Change Performance Measures.

### 3.E. Budget and Budget Justification

**NOTE:** Please limit this section to no more than four (4) pages.

Complete a proposed Budget according to the line item categories on the Budget Form. The Budget Justification explains the costs that you allocate under each major line item. Both the Budget AND the Budget Justification must be included in your proposal.

Your budget must include a twenty-five (25) percent local match UNLESS the program will be carried out in a designated poverty area. If the program is carried out in a designated poverty area, a ten (10) percent local match is required.

Contact the GCDD grants administrator for information about how to determine **if the area in which your proposed program will be carried out is designated as a poverty area.**

**PLEASE NOTE:**

- A poverty area designation refers to the location where the actual training program is carried out and **not** the location of the office of the organization



that is carrying out the training program.

- GCDD funds are federal funds. When using dollars (cash vs in-kind) to meet your local match requirement, local match dollars **cannot** also be federal funds.

Please prepare your Budget Justification using the following guidelines:

1. The **Budget Form** includes GCDD funds and local match for the entire program period. Enter the total amount that you expect to expend in GCDD funds and local match that will be provided under each expense category (major line items noted in bold on the Budget Form);
2. Include a **separate Budget Justification** narrative to fully explain and justify each expense category. Include the following information for each expense category:
  - a. **PERSONNEL:** Include salaries and wages. Identify the staff who will be working on this program and the hours each will devote to the program. Provide a breakdown of fringe benefits – health insurance, FICA, other insurance/benefits.
  - b. **RENT:** Rent should be part of the local match. Rent includes utilities, building/maintenance costs if paid (note separately and the amount), and the percent allocated to this program.
  - c. **TRAVEL:** Include local mileage, parking costs, and bus fare. If staff are reimbursed on a per mile basis, include the reimbursement rate that has been approved by your organization.

**PLEASE NOTE:**

- The mileage reimbursement rate refers to the standard IRS mileage rate (currently \$ 0.54/mile).
- The reimbursement rate for participants **MUST** be the same as the reimbursement rate for staff.

If out-of-town travel is necessary, explain the purpose for this travel, destination, length of stay, food and lodging allowances, any other transportation costs, and staff who will be traveling.

Include the same information for participants but do not identify individual participants. All local transportation costs should be included under this expense category.

- d. **SUPPLIES:** Enter the total cost for all consumable supplies; note the cost for specific types of supplies such as those listed under this expense category.
- e. **COMMUNICATIONS:** Include telephone/fax, Internet and email services, and social media that are necessary to carry out projects and activities. Postage and other mailing costs should be noted separately.

Copying costs are costs associated with duplicating or reproducing existing materials; printing costs would be the costs of producing a new product/publication. Converting print materials into other formats such as large print or for posting online, or translating materials, e.g. Braille, should be included in this expense category.

- f. **OTHER:** Indirect costs and audit costs should be included under this expense category. If indirect costs are being expensed, please note your organization's indirect cost rate and what is included in that rate.

Interpreter or facilitator costs may be necessary to assure effective communication with participants. Include personal assistance services that are necessary so individuals can fully participate in the program. Grant funds should be the payer of last resort.

If individuals outside of the business or organization will be presenting on a certain topic(s), include the speaker's name and topic area, and total or estimated cost.

**PLEASE NOTE:** All proposed costs must be reasonable to carry out a quality project or activity and achieve the intended results.

### **3.F. Letters of Support**

Include three letters of support or recommendation that are directly related to your knowledge and experience of self advocacy and working with self advocates to carry out the types of activities in this RFP.

**PLEASE NOTE:** Letters must be included as part of your application. Letters that are sent directly to the GCDD, or arrive outside of the completed application, will not be accepted.

## **Part 4: Proposal Review and Evaluation Process**

### **4.A. Grant Review Committee**

The GCDD's Grant Review Committee (Committee) reviews proposals sent in response to this RFP. Committee members will make a funding recommendation to the full GCDD. Staff of the GCDD reviews proposals for completeness only.

Please note that proposals must contain all required sections, fit within the maximum page limitations as specified, and have fifteen (15) copies submitted, with an original signature in blue ink on the Application Cover of one copy. Incomplete proposals will be withdrawn from further consideration and not reviewed by the Committee.

Each proposal is reviewed and rated by members of the Committee according to the Evaluation Criteria included in this RFP. Scores and comments/feedback are discussed by Committee members. An applicant's past performance may also be reviewed by the Committee if the applicant has received previous grants from the GCDD. Following the review process, a recommendation is made to the full GCDD.

The GCDD retains the right to reject all proposals.

As noted earlier, continuation funding is based upon the availability of federal funds, the performance of the contractor, and any reauthorization of the DD Act.

### **4.B. Evaluation Criteria**

The Grant Review Committee uses the following Evaluation Criteria when rating proposals. In addition to providing scores for each item, Committee members may write comments such as strengths or weaknesses, concerns or clarifications on their rating sheets.

The number in parentheses after each item is the maximum number of possible points for that item. The total number of points is 100.

- Knowledge and experience in self advocacy or advocating for people with developmental disabilities. (10)
- Knowledge and experience of leadership development, leadership training, and the promotion of self advocates as leadership trainers (10)
- Knowledge and experience in coordinating a project that involves local groups and supporting people involved in those groups. (10)

- Description of the work plan for a statewide coordinating project that supports local self advocacy groups. (15)
- Description of how self advocates will be involved in cross-disability and multi-cultural coalitions. (5)
- Understanding of IPSII, how training session evaluation data will be collected and used to improve the quality of the training program and increase IPSII results, and how AIDD customer satisfaction data and data on AIDD performance measures will be collected and reported (20);
- Budget is reasonable and sufficient for work plan activities. (30)

The Committee also will confirm that the 501 (c)(3) status of an applicant non-profit organization, or status of a public organization has been documented, and that three letters of support or recommendation are included with the application.

## Part 5: Additional Information

### 5.A. Definitions from the Developmental Disabilities Assistance and Bill of Rights Act (DD Act)

#### DD Act Terms

**Culturally competent.** The term “culturally competent” means services, supports or other assistance that are conducted or provided in a manner that is responsive to the beliefs, interpersonal style, attitudes, language and behaviors of individuals receiving services, and in a manner that has the greatest likelihood of ensuring maximum participation in the program.

**Developmental disability.** The term “developmental disability” is defined in the DD Act as a severe, chronic disability of an individual from birth that:

1. Is attributable to a mental or physical impairment or a combination of mental and physical impairments;
2. Is manifested before the individual attains age 22;
3. Is likely to continue indefinitely;
4. Results in substantial functional limitations in three or more of the following areas of major life activity: self care, receptive and expressive language, learning, mobility, self direction, capacity for independent living, and economic self sufficiency; and

5. Reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic care services, supports or other assistance that is of lifelong or extended duration and is individually planned and coordinated; except that such term, when applied to infants and young children means individuals from birth to age five, inclusive, who have substantial developmental delay or specific congenital or acquired conditions with a high probability of resulting in developmental disabilities if services are not provided.

**Unserved and underserved.** The term “unserved and underserved” includes individuals from racial and ethnic backgrounds, disadvantaged individuals, individuals with limited English proficiency, individuals from underserved geographic areas (rural or urban), and specific groups of individuals within the population of individuals with developmental disabilities, including individuals with developmental disabilities attributable to physical impairment, mental impairment, or a combination of physical and mental impairments.

### **DD Act Outcomes (IPSII)**

***Independence*** refers to –

- The extent to which individuals with developmental disabilities exert control and choice over their own lives.

***Productivity*** refers to –

- Engagement in income-producing work that is measured by increased income, improved employment status, or job advancement; or
- Engagement in work that contributes to a household or community.

***Self Determination*** refers to –

- The freedom to choose how, where and with whom to live; freely created relationships; contributing to the community in a meaningful way;
- Taking responsibility for personal decisions and actions; making decisions about financial resources, needed supports, and hiring/evaluating direct care providers;
- Dignity and respect of and for people with disabilities
- Whatever it takes to remove system barriers, achieve what may seem impossible, and do no harm.

***Integration and Inclusion*** refers to –

- The use by individuals with developmental disabilities of the same community resources that are used by and available to other citizens;

- Living in homes close to community resources, with regular contact with citizens without disabilities in their communities;
- The full and active participation by individuals with developmental disabilities in the same community activities and types of employment as citizens without disabilities, and utilization of the same community resources as citizens without disabilities, living, learning, working, and enjoying life in regular contact with citizens without disabilities;
- Having friendships and relationships with individuals and families of their own choosing.

## **5.B. Conflict of Interest Policy**

Each year, the Governor's Council on Developmental Disabilities (DD Council) makes recommendations regarding the allocation of funds for specific strategies that are directly related to the DD Council's business – information, education and training – and will result in the increased independence, productivity, integration and inclusion of people with developmental disabilities and their families. The process of reviewing applications and making funding decisions must be as free as possible from any conflict of interest.

A conflict of interest exists when members of the DD Council participate in the process that results in recommendations related to funding of programs or projects while, at the same time, they have a direct or indirect personal or financial interest in one or more of these programs or projects. In order to avoid problems in this area, Council members who have a direct or indirect personal or financial interest in an application or proposal or an organization that submitted an application or proposal must abstain from participating in the entire process of reviewing the applications in which the DD Council member has a conflict of interest. In this context, "personal or financial interest" includes, but is not limited to, the following:

1. The Council member or a member of the family is an officer of the applicant organization, serves on a committee that governs the applicant organization, or serves on the Board of the applicant organization;
2. The Council member or a member of the family will be employed by or is a paid consultant to the applicant organization;
3. The Council member or a member of the family is receiving services from the applicant organization in any capacity if the applicant is funded;
4. The Council member or a member of the family is receiving services from the applicant organization, or will receive services from the applicant organization if the application is funded;

5. The Council member or member of the family is a party in any legal action in which the applicant organization is also a party.

Those members of the Council who have, or believe they have, a direct or indirect personal or financial interest in any of the applications being considered by the Council must abstain from participating in the entire process of reviewing the application in which the Council member has a conflict of interest and must be recorded as abstaining when votes are taken.

This policy applies to all Council staff and consultants involved in the grant process.

Approved by the Council, Dec. 14, 1988; Amended by the Council, Aug. 1, 1990; Amended by the Council, Dec. 7, 1994.

### **5.C. Appeal Process**

All applicants are informed, in writing and at the same time, about the results of the DD Council's proposal review process. Applicants who do not agree with the DD Council's decision may appeal. The following steps apply to the appeal process:

1. An applicant who wishes to appeal must notify the DD Council in writing within 15 working days of the date on the letter informing the applicant about the decision;
2. The appeal letter must include the basis for the appeal. The appeal must be based on the criteria used by the Grant Review Committee to review and evaluate each proposal (see Part 4.B: Evaluation Criteria);
3. Upon receipt of the letter of appeal, the DD Council Chair will establish an Ad Hoc Appeals Committee. This committee will be comprised of the DD Council Chair, Grant Review Committee Chair, and at least one DD Council member who is not a Grant Review Committee member;
4. The Ad Hoc Appeals Committee will meet as soon as possible (in no case later than the next regular DD Council meeting) to consider the appeal;
5. The Ad Hoc Appeals Committee will review the deliberations of the Grant Review Committee and information presented by the applicant in the appeal letter. The Grant Review Committee may also request to hear from the applicant;
6. The Ad Hoc Appeals Committee review will determine if the recommendation of the Grant Review Committee appears to have been made according to the criteria contained on the Evaluation of the Proposal form. Because the appeal

letter must be based on these criteria, the information presented by the applicant will also be considered at this time;

7. The Ad Hoc Appeals Committee will present its findings in writing to the applicant and the full GCDD at the next regular GCDD meeting.

#### **5.D. Reminder Checklist**

Following is the first of two checklists to help you in preparing your proposal. This first checklist is simply a reminder of some of the important information already given in this RFP.

##### **Reminders:**

- Your proposal must be received on time. If a courier service fails to deliver your proposal by the deadline, the responsibility still lies with you, and the proposal will not be considered for funding.
- Your proposal must be prepared according to the instructions in Part 3 and must include all sections.
- The proposal must be produced by a computer, not handwritten, and pages must be numbered.
- Those who write letters of support or recommendation on behalf of your proposal should be reminded that the letters must be sent to you so that you can include the letters with your application. Letters that are not included in your application will not be accepted.
- A suggestion: You are encouraged to be innovative and creative in your approach, and in developing project activities to reach expected outcomes.
- A suggestion: If your proposal is clear and concise, it will be easier for the GCDD to understand what you propose. Proposals that are too wordy or full of jargon are difficult to read and it may hurt your review score.

#### **5.E. Proposal Checklist**

Following is the second of two checklists to help you in preparing your proposal. This second is a guide to make sure that you have included everything needed in your proposal.



**Be sure to include:**

- A completed one-page Application Cover, with the original signed in blue ink. A blank copy of the required form is included with this RFP.
- A one-page Program Summary of your proposal.
- A Program Narrative. No more than ten (10) pages describing your knowledge and experience, your proposed plan of action, and the people who will be involved in key roles in your project.
- A document (such as from the IRS) confirming your status as a public or private organization, or as a 501(c)(3) non-profit organization if applicable.

**PLEASE NOTE:** This document counts toward the ten-page limit for your Program Narrative.

- No more than two pages describing your Performance Measures, including how IPSII will be measured, how AIDD customer satisfaction survey data will be collected, and how AIDD Performance Measures will be collected and reported.
- A Program Budget and the Budget Justification narrative. A blank copy of the required form is included with this RFP. Together, the budget and the budget justification should be no more than four (4) pages.
- Three letters of support or recommendation.
- Fifteen (15) complete copies of the entire proposal. Each copy should be stapled or bound.
- Make sure the address is correct:

Minnesota Governor's Council on Developmental Disabilities  
370 Centennial Office Building  
658 Cedar Street  
Saint Paul, Minnesota 55155

**Part 6: Required Forms**

Attached are copies of the two forms required for an application: the Application Cover sheet, and the Budget Form. Both documents are one (1) page in length.

## APPLICATION COVER

GOVERNOR'S COUNCIL ON DEVELOPMENTAL DISABILITIES  
MINNESOTA DEPARTMENT OF ADMINISTRATION  
370 CENTENNIAL OFFICE BUILDING  
658 CEDAR STREET  
ST. PAUL, MINNESOTA 55155  
(651) 282-2899 VOICE (651) 297-7200 FAX  
(877) 348-0505 TOLL FREE  
(800) 627-3529 Minnesota Relay Service OR 711  
EMAIL: [admin.dd@state.mn.us](mailto:admin.dd@state.mn.us)

1. Organization:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_

MN Tax ID Number: \_\_\_\_\_ Federal Tax ID Number: \_\_\_\_\_

2. Project Title:

3. Budget Summary:

Council Share: \$\_\_\_\_\_ (75%)

Local Match: \$\_\_\_\_\_ (25%)

Total cost: \$\_\_\_\_\_

4. Certification:

I certify that to the best of my knowledge and belief, all information contained in this proposal is correct and complete; that, if approved, the program will be conducted according to this proposal, the requirements of the Minnesota Governor's Council on Developmental Disabilities, Department of Administration, and provisions of the standards for programs funded under P.L. 106-402; and that the local match will be contributed as proposed. I also certify that the applicant organization has authorized me, as its representative to give these assurances and submit this proposal.

Signature: \_\_\_\_\_

(original signature in blue ink on original copy)

Title: \_\_\_\_\_ Date: \_\_\_\_\_

## BUDGET

Expense Category	COUNCIL FUNDS	LOCAL MATCH
<b>Personnel</b>		
Salary		
Fringe		
<b>Rent</b>		
<b>Travel</b>		
<b>Staff</b>		
Mileage/pkg		
Food/Lodging		
<b>Participants</b>		
Mileage/pkg		
Food/Lodging		
<b>Supplies</b>		
Office (consumables)		
Program Materials		
A/V Equipment		
<b>Communications</b>		
Phone/Fax		
Internet/Email		
Postage		
Copying		
Alternative Formats		
<b>Other</b>		
Indirect Costs/Audit		
Consultants/Speakers		
Respite/Child Care		
Personal Care Assistance		
Interpreter/Facilitator		
<b>TOTAL</b>		