

State of Nevada
Aging and Disability Services Division

Notice of Funding Opportunity

Assisted Living Supportive Services
*(Assisted Living Facility Establishment,
Expansion, and Operation)*

Funding Opportunity Number: ADSD-ALSS2025-C

Applications Due: April 12, 2024

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State of Nevada
Aging and Disability Services Division

Funding Opportunity Title:	Assisted Living Supportive Services (Assisted Living Facility Establishment, Expansion, and Operation)
Funding Opportunity Number:	ADSD-ALSS2025-C
Project and Budget Period:	July 1, 2024 – June 30, 2025
Due Date for Applications:	April 12, 2024

Funding Opportunity Description

Background

In accordance with NRS 439.630(e), the Aging and Disability Services Division (ADSD) is seeking partner organizations to provide assisted living supportive services to individuals aged 65 and older residing in Nevada, through the provision of state funding for the establishment, expansion, and operation of Assisted Living Facilities.

This Notice of Funding Opportunity (NOFO) establishes the requirements applicants must meet to be considered for funding. Funding awarded through this NOFO must benefit individuals on or deemed eligible for ADSD's Home and Community-Based Waiver for the Frail Elderly (Medicaid Waiver). Eligible applicants must meet the criteria outlined in NRS 319.147 regarding certification of assisted living facilities.

Please thoroughly read the referenced NRS to determine eligibility for use of this funding.

Funding Description

Nevada Revised Statute ([NRS 439.630\(e\)](#)) sets aside \$200,000 annually from the Fund for Healthy Nevada to award competitive grants for the **establishment, expansion, and operation of assisted living facilities** to provide supportive services pursuant to the provisions of the home and community-based services waiver in [NRS 422.3962](#). Applicants may apply for up to \$200,000. Funding awarded through this NOFO must benefit individuals on or deemed eligible for ADSD's Home and Community-Based Waiver for the Frail Elderly (Medicaid Waiver) for assisted living services and who are age 65 or older.

Eligible Applicants

Non-profits, public agencies, and for-profit businesses may apply if interested in providing services outlined in this funding opportunity. To be considered for funding, the assisted living facility must meet the regulations outlined in the [NRS 422.3962](#), as well as the criteria for certification set forth in [NRS 319.147](#) and subsection 7 of [NRS 449.0302](#).

All applicants must be in good standing with the State of Nevada and the Federal Government. If an applicant has not responded to any audit finding from the Aging and Disability Services Division (ADSD) or the Department of Health and Human Services, their application may not be considered for funding.

Resources

- ADSD Funding Opportunities:
https://adsd.nv.gov/Programs/Grant/Notices_of_Funding_Opportunities/
- Grant Writing, Training, Additional Funding Information:
<https://ofa.nv.gov/>

Award Information

Subrecipient Responsibilities

These awards are competitive, and applications will be evaluated, in part, on the applicant's stated plan of action and their demonstrated capacity to effectively and expeditiously begin implementing subaward activities within sixty days of the start of the subaward project period. The subaward is an agreement between the applicant and the Aging and Disability Services Division (ADSD).

The subaward recipient agrees to the responsibilities outlined below:

In addition to the Applicant Certifications included in the ADSD Subaward Application form, the following conditions apply for funded projects.

- Applications must be signed by the Authorized Organizational Representative (AOR) (head of the agency) unless additional authorized signers are indicated on the ADSD Subaward Application form.
 - The AOR may list up to two (2) Additional Authorized Signers on the application, indicating authorized representatives who are able to sign other documents such as the NOSA or Requests for Reimbursements.
 - Future changes to the AOR and/or Authorized Signers must be submitted in writing by the Agency's AOR. A signed, dated, letter should be submitted to: ADSDGrants@adsd.nv.gov. Authorized Signer letters are valid for one year.
- Programs awarded funding must provide any requested revisions to ADSD by the date indicated in the notification email. A Notice of Subaward (NOSA) cannot be issued by ADSD without requested revisions.
- All subaward recipients must have a Unique Entity ID (UEI) Number issued from SAM.gov.
- All subaward recipients must have an Employer Identification Number (EIN) or Federal Tax Identification Number.

- All subaward recipients must be registered with the State of Nevada and must have a vendor number. Vendor Registration Forms are available at <http://controller.nv.gov>.
- If a subaward recipient's address changes, the subaward recipient must submit a Vendor Information Update and/or Additional Remittance Form to the Nevada State Controller's Office. ADSD must be notified of address changes in advance to avoid payment delays.
- All subaward recipients must comply with ADSD's General Service Specifications: adsd.nv.gov/Programs/Grant/ServSpecs/Documents/. The Service-Specific Specifications for Assisted Living Supportive Services Service are being redeveloped and will be disseminated to subaward recipients upon availability.
- All subaward recipients must comply with the Nevada Department of Health and Human Services' (DHHS) Grant Instructions and Requirements (GIRS) and ADSD Requirements and Procedures for Grant Programs (RPGPs). The GIRS and RPGPs are statements of DHHS and ADSD policy that ensure fiscal compliance with statutes, regulations, and/or rules:
 - GIRS: <https://dhhs.nv.gov/uploadedFiles/dhhsnv.gov/content/Programs/Grants/GrantInstructionsandRequirementsRevisedOctober2020.pdf>
 - RPGPs: <http://adsd.nv.gov/uploadedFiles/agingnv.gov/content/Programs/Grant/FiscalRequirements.pdf>.
- The Request for Reimbursement (RFR) form must be submitted in accordance with the ADSD Reporting Schedule, including all required backup documentation: <https://adsd.nv.gov/Programs/Grant/Reporting/Instructions/>.

ADSD staff agrees to the responsibilities outlined below:

- ADSD team members will provide reporting instructions to all subaward recipients.
- All subaward recipients will be assigned a Program Coordinator (PC) who is available to aid with aspects of subaward management, program-specific technical assistance, and program development. Auditors are available to address questions regarding fiscal matters.
- The assigned PC will contact subaward recipients regarding requested revisions before a Notice of Subaward (NOSA) can be issued.
- NOSAs will be distributed to funded programs in June 2024 or as soon as possible pending receipt of requested revisions.
 - The Request for Reimbursement (RFR) Workbook will be distributed with the NOSA.
- Programs will be assessed to evaluate fiscal accountability; progress towards achieving program goals, objectives, and projected outcomes; client satisfaction; and adherence to all regulations, statutes, and/or rules. Programmatic and fiscal monitoring will be scheduled in accordance with Department of Health and Human Services (DHHS) policies.

Matching Funds

Matching funds are required at 15% of the ADSD-requested amount. Match may be cash or in-kind and must be reflected and thoroughly described on the Budget Summary tab of the Excel application file. Program income cannot be used as match. Examples of cash match include other funding sources to support this service. An example of in-kind match is volunteer time. See 'Matching Funds Requirements' under the Budget Summary section below as well as the Grant Instructions and Requirements (GIRS) for additional information regarding match: [Grant Instructions and Requirements revised October 2020 \(nv.gov\)](#).

Application and Submission Information

Division Contacts

General program/service questions and technical assistance on the required forms, beyond instructions provided in this document, can be directed to ADSD Grants Management at ADSDGrants@adsd.nv.gov.

Questions and answers that are helpful for all applicants will be posted with this NOFO online at http://adsd.nv.gov/Programs/Grant/Notices_of_Funding_Opportunities/.

Application Forms and Submission Information

Three (3) files are to be used when completing the subaward application. The submitted application must have all elements of these files included:

1. ADSD Competitive Subaward Application with Project Narrative (PDF)
 2. ADSD Subaward Budget Template (Excel)
 3. ADSD Work Plan Template (Word) - *Optional for this funding opportunity*
- Additionally, applicants must submit attachments as requested in the [Application Checklist](#). Attachments are categorized by "required," "optional," or "if applicable."

Deadline: Friday, April 12, 2024 (by 11:59 pm, PST)

Submission: Applications must be emailed to ADSDGrants@adsd.nv.gov

Application Review Information

Application Screening

- Each application will undergo an initial review for completeness and adherence to instructions. Applications that do not meet all requirements will not be accepted for funding consideration. Applicants with rejected applications will receive written notification in mid to late May 2024.
- Rejected applicants may appeal this decision, in writing, to the ADSD Administrator. The request for review must be received within five working days of the notification of non-acceptance.
- The ADSD Administrator, or designee, will notify the applicant of the Administrator's decision, in writing, within ten working days of receiving the applicant's appeal.
- The ADSD Administrator's decision is final. There is no additional appeal process.

Review and Selection Process

After application screening, ADSD staff and independent reviewers will review all applications for each service and make initial funding recommendations based on scoring criteria defined in the following section.

Funding decisions will be made by the ADSD Administrator based on application scores, funding availability, and regional allocations. Reporting and compliance history of previous or current subaward recipients will also be considered.

ADSD may negotiate with or seek additional information from applicants before final decisions are made.

The ADSD Administrator's funding decision is final.

Scoring Criteria

Competitive applications will be scored according to the following matrix (50-point total) based on all application components:

1. Project Relevance, Current Need, and Priority Populations (up to 10 points)

- The applicant clearly identifies the proposed project, project relevance, as well as the unmet needs and service gaps that will be addressed by the applicant's project.
- The targeting plan is well defined and expands awareness and access to the service.
- The applicant identifies priority populations to be served. Priority is given to underserved and the most vulnerable populations which may include individuals who are frail, homebound, isolated, low-income, a minority, and/or living in rural or frontier areas.
- The applicant describes anticipated barriers and plans to address barriers.

2. Capacity and Approach (up to 15 points)

- The applicant clearly describes the proposed project, including their approach and specific activities to be completed. Activities to reach priority populations are included.
- The applicant demonstrates their experience and ability to complete the proposed project.
- The applicant identifies and defines the role of key staff, partnerships, and other resources that will have a significant role in completing project activities.
- The project describes new or innovative approaches that will help expand their capacity to increase access to the service.

3. Cost Effectiveness and Sustainability (up to 10 points)

- The submitted budget is complete and the applicant's projected costs are reasonable.
- There are other funding sources identified to help support the project.
- The level of funding requested is explained and justified within the proposal.
- The applicant demonstrates cost-effectiveness and financial accountability.
- Projected costs are relevant to project activities.

4. Project Impact (up to 10 points)

- Project goals, objectives, and intended outcomes are clearly stated.
- The applicant describes methods of documenting and evaluating project effectiveness, quality of service delivery, and impact on target populations.
- Goals and objectives are relevant to the intent of funding and address identified gaps and needs.
- Goals and objectives support activities that help improve access to services and promote program awareness.
- The goals, objectives, and activities of the project have an established timeline that is reasonable.

5. Adherence to application instructions and accurate completion of forms (up to 5 points).

- The applicant followed the instructions. Required forms/sections were completed accurately and completely.
- Responses are detailed and concise.

Anticipated Announcement Award Date

Subaward decisions will be announced via email in mid to late May 2024. Requested application revisions must be received timely and approved by ADSD in order for a Notice of Subaward to be issued.

Subrecipient Training

ADSD will make training available to all subaward recipients as needed. Available training will include the Request for Reimbursement process and reporting requirements.

Form Instructions

Application Format

All Applications MUST conform to the following requirements to be considered for funding:

- Applications must be computer-generated on the ADSD Application Forms. There are three files required for all competitive applications: (1) ADSD Subaward Application – Competitive with Project Narrative (PDF), (2) ADSD Subaward Budget Template (Excel), and (3) ***If applicable***, the ADSD Work Plan (Word).
- The application must be concise and no more than 10 pages (excluding attachments). Do not include cover sheets, cover letters, unsolicited attachments, or application instruction pages, as they will be included in the page limit. Specific page limits are listed next to the page names below.
- Applications are expected to be free of spelling and grammatical errors. All application forms have pre-set formatting including fonts, line spacing, and margins.
- Submitted applications must be on the digital version of white, 8 ½ x 11 size paper and assembled according to the instructions on the [Application Checklist](#).
- Applicants must submit one PDF file consisting of the ADSD Subaward Application - Competitive with the Project Narrative. The ADSD Subaward Budget template must be

submitted as an Excel File. The ADSD Work Plan is optional for this funding opportunity. If submitted, the ADSD Work Plan must be submitted as a Word document.

- All applicable sections of the Subaward Application must be signed and dated.
- **Applications must be submitted via email to ADSDGrants@adsd.nv.gov.**

ADSD Subaward Application with Project Narrative – PDF File – Instructions

A. Applicant Organization Information

This section captures information regarding the Applicant Organization. The Applicant Organization is the named subrecipient on the Notice of Subaward and is responsible for the funds awarded. All information in this section must match exactly what is on record with the Nevada Controller's office. *Failure to provide correct information in this section will prevent ADSD from making payments to the subrecipient if funding is approved.*

The Authorized Organizational Representative (AOR) is the individual authorized to submit an application on behalf the organization and who is responsible for the organization's compliance with the terms and conditions of subawards, including compliance with state and federal laws/regulations. In non-profit organizations, this person is the President of the Board of Directors.

- Applications must be signed by the Agency's AOR.
- The Agency's AOR may list up to two (2) Additional Authorized Signers on the application, indicating authorized representatives who are able to sign Requests for Reimbursements (RFRs) or other documents.
- Changes to the AOR and/or Authorized Signers must be submitted in writing by the Agency's AOR. A signed, dated, letter should be submitted to ADSDGrants@adsd.nv.gov.

The Fiscal Officer is the point of contact for any concerns regarding the budget, requests for reimbursement, and annual audits.

B. Project Information

This section is for project specific information including the service category (Assisted Living Supportive Services), proposed service (Establishment, Expansion and/or Operation), physical address of the project, and areas to be served (statewide, county, or city to be served). This section should also list the Project Director assigned as the manager/coordinator/lead for this project. The Project Director is the day-to-day contact for the ADSD Program Coordinator.

C. Applicant Certifications

These are required certifications for all applicants, acknowledging the information contained with the application is true and correct.

D. General Provisions and Assurances

This section lists the general provisions and assurances associated with the ADSD Notice of Funding Opportunity. If approved for funding, these assurances are superseded by the Assurances that are included in the formal Notice of Subaward.

Project Narrative

Provide detailed, but concise responses to each section of the project narrative using guidance below and throughout the Notice of Funding Opportunity. Page Limit: 10 pages.

The project narrative is the main description of the proposed project and includes five sections:

- Challenges and Needs
- Proposed Intervention
- Organizational Capacity & Partnerships
- Cost-Effectiveness & Sustainability
- Outcomes and Evaluation

Challenges and Needs

Describe, in both quantitative and qualitative terms, the nature and scope of the particular problem(s), challenge(s), need(s), and/or issue(s) the proposed intervention is designed to address. Include how the project will potentially impact older adults, individuals with disabilities, family members and caregivers, and include information about current gaps in services. Identify marginalized and traditionally underserved populations within the proposed service area as well as challenges to serving these populations.

Proposed Intervention

Describe clearly and concisely how your organization plans to carry out this service. Include a detailed description of specific activities planned that address the challenges and needs identified above, how your organization will overcome these challenges, and if the proposed intervention will target and serve historically underserved populations.

Describe the proposed service area and target population(s) to be served through this project. Provide details of new and innovative strategies (services and outreach activities) that will be used, including information regarding your organization's existing efforts, lessons learned, service gaps, and any statistical information to support proposed intervention(s).

Identify any anticipated technical assistance needs. Include specific types of assistance to be provided based on the needs of the proposed service area.

Describe the organization's targeting plan. Include information on how the organization plans to communicate and collaborate with civic and minority organizations, as well as other service providers and partners, to maximize service options for the target population.

Discuss the anticipated impact of proposed intervention strategies.

Describe strategies that will be used to reach the population(s) to be served. Identify any barriers that may prevent service delivery.

Organizational Capacity and Partnerships

Describe the organization's capacity to perform the proposed intervention(s). Include past experiences and/or anticipated increased capacity as a result of this funding. Identify the

professional staff and their specific responsibilities under this project, as well as the facilities and other resources in place to support project activities. Describe how training and ongoing communication will be used to develop and maintain a well-trained, competent workforce consisting of paid staff, volunteers, and community partners. Resumes of professional staff can be included.

Identify key partnerships and describe in detail how they will enhance coordination of services under this project. Include partnerships with government entities, as well as other community partners. Letters of Commitment can be attached and do not count towards the application page limit.

Describe existing and planned efforts to collaborate with community, county, regional, or statewide organizations to meet project goals, enhance service delivery, increase outreach, and/or implement proposed intervention(s).

Discuss technological capacity to obtain and provide training, deliver services, perform outreach, capture, and report data, and achieve program objectives.

Cost-Effectiveness and Sustainability

Describe resources outside ADSD funding to be used to support this project. How will these resources be used to enhance service delivery and/or outreach? Provide a thorough justification for the level of funding requested from ADSD in this application. If an increase or decrease was requested for a current subaward, fully address the reason for the request.

Describe other efforts to deliver this service efficiently, including but not limited to volunteer services. Provide information about contractual organization(s) that will have a significant role in implementing and achieving outcomes.

Discuss the impact upon the proposed service area should this project not be funded. Describe plans to maintain cost-effectiveness and to support a model that is sustainable and replicable.

Outcomes and Evaluation

List measurable outcomes and describe the methods, techniques, and tools that will be used to measure desired outcomes and the effectiveness of proposed intervention(s). Include at least 2 anticipated outcomes, based on this project's proposed intervention(s) that will directly impact target populations. Outcomes should link to project priorities and activities provided in the proposed intervention section. Although output (such as number of clients served, number of training sessions, number of outreach events) should be discussed in this area, measurable outcomes and output are not the same.

Describe the techniques and tools to be used to determine the effectiveness, efficiency, quality, and/or success of project activities. Also, describe plans for evaluating the success of reaching project goals and achieving desired outcomes.

ADSD Subaward Budget Template – Excel File – Instructions

This file is required for all ADSD Subawards, regardless of type. For additional guidance on budgets, applicants should refer to the [Grant Instructions and Requirements \(DHHS\)](#) and the [Requirements and Procedures for Grant Programs \(ADSD\)](#) for rules and regulations on allowable expenses.

The Excel file has formatting that is accessible to all users. While adding information to the Excel file, you may format the cells and rows as needed to fit your text.


There are 2 forms (tabs) in this workbook: Budget Narrative and Budget Summary. Each form is a separate worksheet (tab) at the bottom of the page/workbook. If you do not see the tabs at the bottom of the page, maximize the screen by clicking the button on the top right side of the screen that looks like a window.

PLEASE NOTE: Do not use multiple copies of the Excel file to create your application; there are formulas that carry from page-to-page. For best results, complete each tab of the workbook in order. Additionally, do not paste information from past applications, as it can cause problems with the formulas. This will ensure that invalid error messages are not shown on the application and linked boxes will have a value.

Budget Narrative

Enter the applicant's name and service type at the top of the page.

Describe program expenses requested from ADSD in the budget categories included in the Budget Narrative using the descriptions below as a guide to describe each category of expense. Be sure to provide a detailed response, explain how each expense is related to the proposed project, and identify any one-time costs. Provide calculations where requested and follow the examples.

THIS TAB IS NOT PROTECTED. Do not delete formulas. Ensure text in each row is visible; expand rows as needed (go to numbered rows on the left side of worksheet and drag the bottom line of the row down when you see your cursor change to , or right click on the row number and choose Row Height to enter a height). Each section has additional rows that you may unhide for additional data entry. Contact ADSD if you need assistance.

PERSONNEL - Line A: List *program* and *administrative* staff (Name, Title, PCN) that will provide **direct** service under the proposed services and the associated costs to be charged to the subaward, using the column headers as guides. Costs associated with administrative staff providing **indirect** services may only be included in this section in fixed-fee proposals; otherwise, the expenses may be included as part of the indirect/administrative expense percentage at the end of the Budget Narrative. Place an asterisk (*) beside all new positions. If your agency does not have a Position Control Number (PCN) system, one must be developed to identify each position. Line B, for each position listed: List the fringe benefits provided (FICA, Medicare, vacation, state industrial insurance, unemployment insurance, etc.). Briefly describe the position's duties as they relate to the funding and program objective.

TRAVEL/TRAINING: Identify in-state and out-of-state travel to be completed during the budget period. The red writing must be replaced with actual trip information, such as the name of a conference, location, etc. Complete the trip expenses and enter a justification. If multiple trips are proposed, use copy and paste to include another in-state or out-of-state section in the

budget as stated on the form. Utilize <https://www.gsa.gov> for mileage, per diem and lodging. If lodging exceeds the GSA rate, provide an explanation in the Justification section.

If requesting general in-state mileage for operational purposes, enter the cost in the mileage section *below* "In-State Travel," and provide an explanation of the cost calculation and the reason for travel.

OPERATING: Include SPECIFIC facility and vehicle costs associated with the proposed program (not the agency as a whole), such as rent, maintenance expenses, insurance (split by type), fuel, as well as utilities such as power, water, and communications (phone/internet). Also list tangible and expendable personal property such as office supplies, program supplies, necessary software, postage, etc. Provide a calculation for each line.

EQUIPMENT: List equipment to purchase or lease, which costs \$5,000 or more (per item), and justify these expenditures. Also list any computers or computer-related equipment to be purchased regardless of cost. Equipment items that cost less than \$5,000 should be listed under Operating. Justify the need for these items. There is no guarantee that ADSD will have funds available for equipment.

CONTRACTUAL/CONSULTANT SERVICES: Explain the need and/or purpose for the contractual and/or consultant service. Identify and justify these costs. Only include costs for which there is a written contract or agreement that can be presented to ADSD, if requested.

OTHER: Identify and justify all other expenditures that cannot be identified within another category. These costs may include any relevant expenditure associated with the project. These costs are to be included only if they are associated exclusively with this program. If they are associated with multiple sources of funding, the costs are to be included in Administrative Expenses. Follow the example on the form.

ADMINISTRATIVE/INDIRECT EXPENSES or FEDERAL INDIRECT COST RATE (FICR): Administrative/Indirect expenses and FICR are to be used to help cover expenses that are not easily assigned to a specific program or unit within an organization. These costs are associated with depreciation and use allowances, facility operation and maintenance, general administrative expenses such as accounting, payroll, legal and data processing, and any personnel not providing direct services to the project. If requested, the expenses are limited to the maximum rate listed, depending on the funding source and existence of a FICR letter. Once a funding source is assigned to an approved subaward, the allowable rate will apply, and a budget revision may be required if excess expenses are included. Administrative/Indirect expenses do not apply to equipment or fixed-fee subawards or portions of subawards. Reference the Requirements and Procedures for Grant Programs (RPGPs) GR - 20*. Modified Direct Costs (de minimis rate of 10%) must be based upon expenses as outlined within the RPGPs. The FICR amount must be based upon allowed expenses per your organization's current FICR letter. Attach a copy of your FICR letter to the application, as applicable.

Budget Summary

The applicant's name and service type will auto-fill from information entered at the top of the Budget Narrative tab.

This page offers a summary of the subaward budget, match, and other funding. Information entered in the Budget Narrative tab will auto-populate the *ADSD Funds* column. Applicants will input funding information in the orange cells.

Matching Funds Requirements: The required match is 15% of the ADSD requested amount. The required match will calculate automatically. Break out match into the budget expense categories to show where it will be applied.

In the columns after Match, enter any other funding that will be used to support the proposed service. Enter the name of the funding source where indicated, whether the funding is pending or secured, and the amount to be used towards the program. Then, break out the funding into the budget expense categories.

Ensure all boxes on row 21 are zero as stated in the row header.

Add comments to box B, if needed. Format the row as needed to include all text.

Identify sources of match in box C (format as needed) and indicate whether it is pending or secured. Match can be non-federal cash or in-kind.

In-kind match is the value of any real property, equipment, goods, or services contributed to a funded program that would have been considered eligible expenses within the program's budget for the funded service.

List potential/estimated amounts and sources of program income, such as client donations, in box D (format as needed). If your program has a sliding fee scale or cost-sharing procedure, indicate how the program will manage the process according to the RPGPs.

Program Income

1. Client service donations may not be used as match but may be solicited for all services.

Solicitation must be non-coercive. The donation process must be confidential and voluntary.

2. Cost sharing means contributions made to a program based on a sliding-fee scale. The Division's Cost Sharing Policy can be found on pages 73-75 of the RPGPs:

<http://adsd.nv.gov/uploadedFiles/agingnvgov/content/Programs/Grant/FiscalRequirements.pdf>

ADSD Work Plan – Word File – Instructions

The ADSD Work Plan should be reflective of and consistent with the goals and proposed activities identified in the Project Narrative and Budget.

The ADSD Workplan is revisable. The goals listed on the template may not align with the prioritized goals of the proposed project. For instance, Goal 1 may be kept as "Outreach" or changed to "Target Population" or "Service Delivery".

For each goal, list relevant objectives, activities, and strategies to be implemented to achieve objectives. Identify timeframes involved (including start and end dates) under “Timeline.” Under “Evaluation Tool” list relevant tools, techniques, systems, and/or methods that will be used to collect, report, and measure outputs and outcomes. Finally, document projected output and expected outcomes based on activities and strategies to be implemented.

APPLICATION CHECKLIST

A complete application for funding consists of:

- The ADSD Subaward Application – Competitive (PDF)
- The ADSD Subaward Budget Template (Excel)
- The ADSD Work Plan Template (Word) – **Optional** for this funding opportunity

The ADSD Subaward Application form must include the Project Narrative and be submitted as one PDF file. The ADSD Subaward Budget template must be submitted as an Excel File. The ADSD Work Plan (if submitted) must be submitted as a Word document.

If any of the required documents are incomplete or missing, the application will be rejected. If application is not received by the date requested (including revisions), funding may be delayed or may not be awarded.

Required Documents:

- ADSD Subaward Application – Competitive (PDF Document)
- Project Narrative (included in the PDF Document)
- Budget Narrative (Excel File, tab one)
- Budget Summary (Excel File, tab two)

Optional Attachments – If included, these will not count towards the page limit.

- ADSD Work Plan (Word Document) (optional)
- Proof of Nevada 211 Listing - Agency and Service(s) (required upon funding approval)
- Sliding-Fee Scale/Cost Sharing Policy (required if applicant uses it for the service)
- Resumes for Project Director and Key Personnel (optional, but encouraged)
- Letters of Commitment/Support (optional, but encouraged)
- Contracts or Memorandums of Understanding (if applicable to the program/service)

***The ADSD Subaward Application and all attachments must be submitted via email to ADSDGrants@adsd.nv.gov no later than April 12, 2024.**