

## Fast Track Grant Submission Program

**Applicant Organization Name:**

**Project Name:**

### **1. Project Description**

- a. Explain how your project will increase organ, eye and tissue donation, and increase the number of Actionable Donor Designations (ADDs). ADDs specifically include sign-ups in one of the two NC Organ Donor Registries: 1) At the Department of Motor Vehicles when first getting or renewing a drivers license and 2) On the Internet 24/7 at [www.DonateLifeNC.org](http://www.DonateLifeNC.org).
- b. If your project includes advance care planning as a central part, explain how organ, eye and tissue donation plays a significant role in the model or project you are proposing.
- c. What are the most compelling needs you are addressing?

### **2. Project Collaboration, Community Served and Impact**

- a. If your project is collaborative in nature, what other community resources or organizations are involved in the project, and what is the status of their engagement and commitment? Submit a Commitment Letter (Form 3) from each collaborating organization and include their letters with the application.
- b. Describe the community to be served, including the population and geographic area.
- c. What are the primary objectives you expect to accomplish during the course of the grant funding? Attempt to make these objectives (outcomes) as measurable as possible. (Example: Increase ADDs in the target population by \_\_ percent.)
- d. What will be different after this project is completed? What outcomes are expected?
- e. How will you quantify the results?

### **3. Project Budget, Key Activities and Timeline**

- a. Specify how the funds will be used in the project. Expense categories include personnel, travel, supplies, food & beverages, advertising materials, items to be given away, and other expenses.
- b. Identify if other funds are necessary for this project to meet the expected outcomes. What is the status of these funds (already committed or awaiting approval)?
- c. Identify who will oversee the funding and support payment of expenses.
- d. When will the project begin and when will it be completed?
- e. Provide a monthly timeline for key project activities for the duration of the program.

### **4. Your Organization**

- a. Describe why your organization is capable of successfully implementing this project including specific expertise/experience with similar initiatives.
- b. How does this project relate to your organization's mission and goals?

### **5. Appendices**

- a. List the people who are involved in the program along with their qualifications.
- b. Provide a list of Board Members and their affiliation.