
This outline is intended to help providers prepare answers in advance of filling out the grant application. Please note that stability/staff capacity questions may vary from the questions listed below. See form at the link below for dropdown menus and full details for each question. All applications must be completed via the online form to advance to the review process.

Submit all answers to these questions on the [DP Provider Grant Application](#) form.

Section I: Organization Information

- Organization Name
- Organization Street Address
- Contact Name
- Contact Phone
- Contact Email
- Name of Organization Lead
- Title of Organization Lead
- How many years of experience does the organization have with supporting individuals with intellectual disabilities and/or delays and other disabilities?
- Provide a brief list of current programs and services offered
- During the past fiscal year (7/1/2022-6/30/2023), how many unique individuals with I/DD were served?
- In the last 12 months, how many unique individuals served resided in Adams, Arapahoe, Douglas, or Elbert Counties while served?
 - List totals for each county within the DP catchment
- What is the legal status of your organization?
- Is your organization a Program Approved Service Agency (PASA)?
 - Explain where you are in the approval process.
- What are the funding sources your organization uses/accepts?
- What is the organization staff size?
- What is your organization's annual budget?
- Does the organization have experience managing grants?
- Has the organization received previous grant funds from DP?
 - If applicable, List Previous Grant Amounts Received from DP & Purpose of Funds
- Select the type of funding request (stability/staff capacity or innovation/capacity building)
- Select a funding sub-category.

Section II: Proposal/Request

1. Title of Proposal/Request
2. Total Amount Requested

3. What is the Project Budget Total (if different than the amount requested)
4. Will grant funds help launch a new program?
5. How many total individuals w/IDD do you anticipate serving with this proposal?
6. Select the counties within the DP catchment area that you anticipate serving in proposal.
7. Describe the proposed project/program.
8. What is the issue or opportunity addressed?
9. What are the primary goals of this request?
10. What resources are needed to accomplish goals?
11. How is this innovative or new to your program and/or the community?

Section III: Proposal Project Planning

12. Describe the project plan.
13. How will you evaluate the success of this grant?
14. Describe how the impact of this project will be measured.
15. List collaborations/partnerships related to proposal.
16. Describe the sustainability plan.
17. List other funding sources utilized to support this project.
18. Proposed Project Start Date
19. Proposed Project End Date

Section IV: Supporting Documentation

- Is the organization budget attached?
- Is the project budget attached?
- Upload the following:
 1. Annual Budget/Year End Financial Statement
 2. Balance Sheet (List of assets and liabilities)
 3. Project Budget
 4. Other Supporting Documentation (Project Plan, Gantt Chart, Letters of Support, Estimates/Price Quotes, etc.)
 5. Note: A business plan is required for new organizations