

ffiliate Information	Request Information	Project Budget	Anticipated Results	Communications	Terms	Attachments	Review My A	Application
Required before fi	inal submission		Affiliate Infor	mation		Printer Fr	iendly Version	E-mail Draft
Affiliate IRS Informa	ition							
The information in t	this section has been retr	ieved from the IRS	database. If this is no	ot your affiliate, use the	back button	in your browse	r to reenter the	e correct
IRS Employee ID I 630002660	Number (EIN)							
Affiliate Legal Nan Alabama Education								
Doing Business A as it appears on the								
Tax Registration D	Date							
Affiliate General Info	ormation							
if different than wha	affiliate name is the orga at the IRS has on file. Fed	nization name regis deral Education Ass	stered with the IRS fo sociation should provi	r the EIN number provide the International Affi	ded. You ma iliate requesi	ny change this to ting the grant.	o your local afi	filiate name
Alabama Education	on Association Inc							
Street Address								
City\Province For non-U.S., provi	de state, province, territo	ry, county as requi	red					
State Non-U.S. affiliates	select "na"							
- Select One - ∨								
Country - Select One -	~							
* Postal Code								
Fostal Code								
Affiliate Partners Will you be partne	ring with other NEA aff	iliates on this pro	ject?					
Yes ∨								
List all NEA state a	nd local affiliate partners	for this grant reque	est below.					
Affiliate Partner Na	ame 1	Affiliate State	Partner Type 1	Affiliate Key Contact	t 1			
Affiliate Partner N	ame 2	Affiliate State	Partner Type 2	Affiliate Key Contact	t 2			
Detail the roles of	each affiliate partner ic							

Word count 0 of 300			
	Save & Finish Later	Next	



iliate Information Ro	equest Information	Project Budget	Anticipated R	esults Communications	Terms	Attachments	Review My	y Application
			Request	Information		Printer	Friendly Version	n E-mail Draft
Required before final	l submission		·					
equest General Infor	mation							
Submission Date	mation							
7/30/2019								
Project Title				√				
				,				
Word count 0 of 100								
Total Request Amou	int							
Is your State Affiliate	aware of this grant	application?						
Yes ∨								
equest Primary Gran	t Contact							
The information in this	s section is pre-popula	ited from the last a	oplication you su	ubmitted. Please update as a	applicable to	ensure our re	ecords are up to	o date.
Prefix	First Name	Middle I	Name\Initial	Last Name	Suff	ix		
- Select One - V					_ ouii			
Title						lone> ∨		
Title Work Address Work City\Province						one> ∨		
	state, province, territo	ory, county as requi				one> ∨		
Title Work Address Work City\Province	state, province, territo	pry, county as requi				one> ∨		
Work Address Work City\Province For non-U.S., provide Work State						one> ∨		
Work Address Work City\Province For non-U.S., provide Work State For Federal Education						one> ∨		
Title Work Address Work City\Province For non-U.S., provide Work State						one> ∨		
Work Address Work City\Province For non-U.S., provide Work State For Federal Education - Select One - \(\)						one> ∨		
Work Address Work City\Province For non-U.S., provide Work State For Federal Education - Select One - \(\sigma \)						one> ∨		
Work Address Work City\Province For non-U.S., provide Work State For Federal Education - Select One - Work Country - Select One -	n Association select "n					one> ∨		
Work Address Work City\Province For non-U.S., provide Work State For Federal Education - Select One - Work Country - Select One -	n Association select "n					one> ∨		
Work Address Work City\Province For non-U.S., provide Work State For Federal Education - Select One - Work Country - Select One -	n Association select "n					one> ∨		
Work Address Work City\Province For non-U.S., provide Work State For Federal Education - Select One - Work Country - Select One -	n Association select "n					one> ∨		
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Work City\Province For non-U.S., provide Work State For Federal Education - Select One - Work Country - Select One -	n Association select "n					one> ∨		
Work City\Province For non-U.S., provide Work State For Federal Education - Select One - Work Country - Select One -	n Association select "n	a"				one> ∨		
Work City\Province For non-U.S., provide Work State For Federal Education - Select One - Work Country - Select One -	n Association select "n	a"				one> ∨		
Work City\Province For non-U.S., provide Work State For Federal Education - Select One - Work Country - Select One - Work Postal Code E-mail Work Phone	n Association select "n	a"				one> ∨		

Provide a general descrip	tion of yo	ur Retired (Organizing pı	ojeci.	
					*
Word count 0 of 300					
Please provide a timeline	of events	with a desc	cription of pr	oject activities	
					*
Word count 0 of 300					
Describe the capacity and	d readines	s of your st	tate affiliate t	o implement y	our project.
					*
Word count 0 of 300					
List the principle people i	nvolved a	nd their ma	ajor responsil	bilities.	
					*
Word count 0 of 300					
Have you previously been	n awarded	a grant by	the Retired C	Organizing Pro	gram? If so, indicate the purpose, amount and grant award data of each.
Geographical Area Serve Select the State or Country	d by the gi	rant? ST impacte	ed.		
Geographical Area Serve Select the State or Country - Select One -	d by the gi	rant? ST impacte	rd.		
Select the State or Country - Select One -	that is MO	<u>ST</u> impacte			
Select the State or Country - Select One - Membership Category(ies	that is MO	ST impacte			
Select the State or Country - Select One -	that is MO	s <u>T</u> impacte			
Select the State or Country - Select One - Membership Category(ies	that is MO	ST impacte			
Select the State or Country - Select One - Membership Category(ies Aspiring Educators	s) served b	s <u>T</u> impacte			
Select the State or Country - Select One - Membership Category(ies Aspiring Educators Active Professional	s) served b	ST impacte y ty the grant %			
Select the State or Country - Select One - Membership Category(ies Aspiring Educators Active Professional Higher Education ESP	s) served b 0 0 0	sy the grant % % %			
Select the State or Country - Select One - Membership Category(ies Aspiring Educators Active Professional Higher Education	s) served b 0 0 0	sy the grant % % %			
Select the State or Country - Select One - Membership Category(ies Aspiring Educators Active Professional Higher Education ESP	s) served b 0 0 0	sy the grant % % %			
Select the State or Country - Select One - Membership Category(ies Aspiring Educators Active Professional Higher Education ESP Retired	s) served b 0 0 0	sy the grant % % %			
Select the State or Country - Select One - Membership Category(ies Aspiring Educators Active Professional Higher Education ESP Retired	s) served b	sy the grant % % % % %	17	n") hoot doorii	one the primary focus of your great proposal?
Select the State or Country - Select One - Membership Category(less Aspiring Educators Active Professional Higher Education ESP Retired trategic Objectives Which one of the following	s) served b	sy the grant % % % % %	ntent clusters	s") best descril	pes the primary focus of your grant proposal?
Select the State or Country - Select One - Membership Category(ies Aspiring Educators Active Professional Higher Education ESP Retired	s) served b	sy the grant % % % % %	17	s") best descril	pes the primary focus of your grant proposal?
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Select the State or Country - Select One - Membership Category(ies Aspiring Educators Active Professional Higher Education ESP Retired trategic Objectives Which one of the followin - Select One - Select up to five areas the Community outreach at ESSA Membership retention NEA-retired intergeners New leaders developm Political advocacy Recruitment of early ca Recruitment of retirees	s) served b 0 0 0 0 0 0 dependent of the department of the departm	sy the grant % % % % % areas ("condescribe younger (parent)	ntent clusters	gram content a	

ist all NON-affiliate partners for this grant r	equest below	
Non-Affiliate Partner Name 1	Non-Affiliate Partner Type 1	NA Key Contact 1
	Government ∨	
Non-Affiliate Partner Name 2	Non-Affiliate Partner Type 2	NA Key Contact 2
	Government ✓	
Detail the roles of each NON-affiliate part	iner identified above.	
Detail the roles of each NON-affiliate part		



filiate Information	Request Information	Project Budget	Anticipated Results	Communications			Review My Application
			Project Bu	dget		Printer F	Friendly Version E-mail Draft
Required before	final submission						
anticipated Budget	t						
Amount Request	ed						
Enter your anticipa	ated budget amounts for	r each budget catego	ory. Please note that y	ou will be required to	submit <u>AC7</u>	UAL SPENDING	፭ by budget category via
online progress ar	nd final reports.						
REVENUE							
In Kind	* Affiliates	* Non-Affilia	nton 🗔				
In-Kind 0	* Affiliates 1		ates 🛐				
OTHER DIRECT							
Training	Curriculum	▼ Office	*	*			
Training Materials	Materials Materials	* Supplies	* Equip		fice Space	0	
Training Materials	Materials 0	* Supplies	0 Equip	0 Or	fice Space	0	
Training Materials	Materials Materials	* Supplies	Equip	Direct	fice Space	0	
Training Materials 0	Materials 0 Postage	* Supplies * Printing	0 Equip	0 Or	fice Space	0	
Training Materials 0 Promotional Items	Materials O Postage Comm.	* Supplies * Printing	0 * Other	Direct	fice Space	0	
Training Materials 0 Promotional Items	Materials Postage Comm. 0	* Supplies * Printing	0 * Other	Direct	fice Space	0	
Training Materials 0 Promotional Items 0 SUB-TOTAL: OTI	Postage Comm. O HER DIRECT	* Supplies * Printing	0 ** Other	Direct	fice Space	0	
Training Materials 0 Promotional Items 0 SUB-TOTAL: OTI	Materials Postage Comm. 0	* Supplies * Printing	0 ** Other	Direct	fice Space	0	
Training Materials 0 Promotional Items 0 SUB-TOTAL: OTI	Postage Comm. O HER DIRECT	* Supplies * Printing	0 ** Other	Direct	fice Space	0	
Training Materials 0 Promotional Items 0 SUB-TOTAL: OTI	Postage Comm. O HER DIRECT	* Supplies * Printing	0 ** Other	Direct	fice Space	0	
Training Materials 0 Promotional Items 0 SUB-TOTAL: OTI	Postage Comm. O HER DIRECT	* Supplies * Printing	0 ** Other	Direct	fice Space	0	
Training Materials 0 Promotional Items 0 SUB-TOTAL: OTI	Postage Comm. O HER DIRECT	* Supplies * Printing	0 ** Other	Direct	fice Space	0	
Training Materials 0 Promotional Items 0 SUB-TOTAL: OTI	Postage Comm. O HER DIRECT	* Supplies * Printing	0 ** Other	Direct	fice Space	0	
Training Materials 0 Promotional Items 0 SUB-TOTAL: OTI	Postage Comm. O HER DIRECT	* Supplies * Printing	0 ** Other	Direct 0	fice Space	0	



Affiliate Information	Request Information	Project Budget	Anticipated Results	Communications	Terms A	ttachments	Review My A	Application
40			Anticipated Re	esults		Printer Frie	endly Version	E-mail Draft
* Required before	final submission							
Results Summary								
* Statement of Ne	ed 🛐		✓					
Word count 0 of 300								
* Grant Strategy	i							
			•					
Word count 0 of 300								
* Evaluation Plan	i							
			✓					
Word count 0 of 300								
* Custoinability DI	en 💷							
* Sustainability PI	an <u>n</u>		✓					
Word count 0 of 300								
NEA Quantitative I	Metrics							
Provide values for	r all applicable quantitati	ve metrics below. F	For those metrics not app	licable to your grant re	equest, leave	default value o	f zero (0).	
If awarded, actua	I figures will be collected	as part of regular p	progress reports.					
* Anticipated # Me	embers Engaged							
0								
* Of those membe	ers engaged, the anticip	oated # that takes	part in other/additional	union activities, pro	ograms, and/o	r events		
0								
* Anticipated # Me	embers Recruited							
0								
* Anticipated # of	Sharable Resources Do	eveloped						
NOTE: These res	cources are expected to b	be shared with NEA	l.					
U								
	mmunity Stakeholders	Engaged						
0								
* Anticipated # Le	aders Identified							
0								
	Quantitative Metrics							
* Anticipated # Re	tirees Trained							

0	
Grant Specific Metrics	
Please provide detail for up to 8 goals specific to this grant request.	
* Goal 1 Description	✓
Word count 0 of 300	
* Goal 1 Measurable Outcome(s)	~
Word count 0 of 300	
* Goal 1 Key Activities	✓
Word count 0 of 300	
* Goal 1 Anticipated Total Engagement	
Soal 1 Engagement Roles and Purposes Solution	✓
Word count 0 of 300	
Goal 2 Description	✓
Word count 0 of 300	
Goal 2 Measurable Outcome(s)	✓
Word count 0 of 300	
Goal 2 Key Activities	~
Word count 0 of 300	
Goal 2 Anticipated Total Engagement	
Goal 2 Engagement Roles and Purposes	
	✓

Word count 0 of 300

Goal 3 Description	✓
Word count 0 of 300	
Goal 3 Measurable Outcome(s)	✓
Word count 0 of 300	
Goal 3 Key Activities	✓
Word count 0 of 300	
Goal 3 Anticipated Total Engagement	
Goal 3 Engagement Roles and Purposes	✓
Word count 0 of 300	
Goal 4 Description	✓
Word count 0 of 300	
Goal 4 Measurable Outcome(s)	✓
Word count 0 of 300	
Goal 4 Key Activities] ✓
Word count 0 of 300	
Goal 4 Anticipated Total Engagement	
Goal 4 Engagement Roles and Purposes	✓
Word count 0 of 300	

Goal 5 Description	
	~
Word count 0 of 300	
Goal 5 Measurable Outcome(s)	✓
	·
Word count 0 of 300	
Coal F Kou Antivities	
Goal 5 Key Activities	
Word count 0 of 300	
Goal 5 Anticipated Total Engagement	
0	
Goal 5 Engagement Roles and Purposes	
Court o Engagement Notes and 1 diposes	✓
Word count 0 of 300	
word count 0 of 300	
Goal 6 Description	√
Word count 0 of 300	
Goal 6 Measurable Outcome(s)	
Court of modelination outcome (c)	✓
Word count 0 of 300	
Goal 6 Key Activities	
	~
Word count 0 of 300	
Goal 6 Anticipated Total Engagement	
Goal 6 Anticipated Total Engagement	
0	✓
0	✓
0	

Wash 1997 0 4 5 0 0 0	
Word count 0 of 300	
Goal 7 Measurable Outcome(s)	✓
Word count 0 of 300	
Goal 7 Key Activities	
Cour Fitty Activities	
Word count 0 of 300	
Goal 7 Anticipated Total Engagement	
0	
Goal 7 Engagement Roles and Purposes	✓
Word count 0 of 300	
Goal 8 Description	✓
Word count 0 of 300	
Goal 8 Measurable Outcome(s)	
	✓
Word count 0 of 300	
Word Could 0 01 300	
Goal 8 Key Activities	✓
Word count 0 of 300	
Goal 8 Anticipated Total Engagement	
0	
Goal 8 Engagement Roles and Purposes	
	✓
Word count 0 of 300	
Save &	Finish Later Next
ouve a	



filiate Information	Request Information	Project Budget	Anticipated Results	Communications	Terms	Attachments	Review My A	pplication
Required before	final submission		Communica	tions		Printer Fr	riendly Version	E-mail Draft
ommunications I	Plan Summary							
information, wher	n Plan outlines a strategio n that information should ding your communication	be delivered and w	hat communication cha	nnels will be used to de	our project. T eliver the info	The plan define ormation. Pleas	es who should b se provide sum	pe given mary
Communications	s Plan - Description and	d Goal(s)	✓					
Word count 0 of 300								
Communication	s Plan - Measurable Ou	tcome(s)						
Communication	i i i i i i i i i i i i i i i i i i i	teome(s)	~					
takeholder Comn	nunications Detail							
Provide information	on about how you will rea	ach the specific aud	lience groups below (if	applicable).				
Internal Audienc	e(s)							
			✓					
Word count 0 of 300								
External Audien	ce(s)							
Word count 0 of 300								
Partner Audienc	e(s)		✓					
Word count 0 of 300								
National Audien	ce							
			√					
Word count 0 of 300								
			Save & Finish Late	r Next				



Affiliate Information Request Information Project Budget Anticipated Results Communications Terms Attachments Review My Application

Terms

* Required before final submission

NEA GRANT TERMS

- 1. Funds will be provided to the affiliate as documented progress is reported and outcomes are achieved, per NEA approval.
- 2. Progress reports are due electronically in the format provided as agreed upon. This includes budget reports comparing the actual expenses incurred during grant implementation with the original budget. If significant changes are being made to the approved work or budget, the primary grant contact should contact their assigned NEA liaison for prior approval.
- 3. Affiliate leaders will share program development, materials, and key learnings with other affiliates electronically (e.g., virtual events and www.mynea360.org) and/or at appropriate events.
- 4. Any grant funds received will be spent by the end of the grant term in accordance with the approved goals, program, and budget. NEA reserves the right to request any remaining funds be returned if unused by the end of the term, or if there has been a lack of progress. If the grant term needs to be altered, the affiliate should contact their assigned NEA liaison for consideration/approval.
- NEA has the ability, based upon reporting and other discovery, to withhold grant payments if it is determined there is a lack of appropriate progress.
- 6. A NEA liaison will be assigned to each awarded grant. The affiliate grant contact will respond promptly to communications from the NEA
- 7. Grantees are expected to promote the grant program and utilize the NEA brand on all communications and materials as part of the approved communications plan.
- 8. If your grant request is approved, the information provided in this application will constitute the grant agreement between NEA and your affiliate, including all goals, deliverables and proposed outcomes, and budget. NEA reserves the right to request additional clarifications or terms as part of the grant agreement, which will take the form of an addendum and be mutually agreed upon by NEA and your affiliate.
- 9. Your affiliate agrees to assign to NEA all right, title, and interest to any copyrightable works, trademarks, and other intellectual property that arises from any course curriculum, professional development sessions for educators, micro-credential courses or similar activities created by your affiliate using the grant funds (collectively, the "Intellectual Property"). In exchange for this transfer of rights, NEA grants your affiliate a limited license to use, reproduce, distribute, and publicly display the Intellectual Property solely in connection with that affiliate's everyday business activities.

If your grant is awarded for \$250,000 or greater, these following terms and conditions will also apply:

- 1. In recognition of the scale of NEA investment, your affiliate agrees as a condition of receipt of these grant funds, that it shall not disaffiliate from NEA or its state affiliate for at least five years after the date this MOU is executed.
- 2. If your affiliate terminates its affiliation with NEA or takes any action that justifies NEA's termination of said affiliation under its governing documents and/or policies, this grant agreement will terminate as of the effective date of termination of affiliation. Within thirty days after the effective date of termination of this agreement, pursuant to this section, your affiliate will pay to NEA, as liquidated damages, the full amount of payments made by NEA to your affiliate as part of this grant.
- 3. The parties agree that any disaffiliation effort, either attempted or completed, shall entitled NEA to a temporary restraining order, preliminary injunctive relief and permanent injunctive relief from a court of competent jurisdiction.

Agreement to Terms Enter the name of the person who has reviewed the NEA grant terms above and is authorized to agree to them. * Name of Person Authorized to Agree to Grant Terms Verify Name of Person Authorized to Agree to Grant Terms

Save & Finish Later

Next



