Exit

Affiliate Partner Name 1

Affiliate Partner Type 1

State

䔱

Affiliate Key Contact 1

Affiliate Key Contact 2

Affiliate Partner Type 2

Affiliate Partner Name 2

Grant Request Information

Project Budget

Anticipated Results

Communications

Terms

Attachments

Affiliate Information

Review My Application

You can review the information you've provided so far and make necessary modifications here. If you're satisfied with the contents of the application, click

Submit to forward your application for consideration. If you're not ready to submit your application yet, click Save & Finish Later.

Affiliate Information

Printer Friendly Version

 |

E-mail Draft

 *Required before final submission*

Affiliate IRS Information

*The information in this section has been retrieved from the IRS database. If this is not your affiliate, use the back button in your browser to reenter the correct EIN*

*number.*

IRS Employee ID Number (EIN)

Affiliate Legal Name

Doing Business As

*as it appears on the IRS database*

Tax Registration Date

Affiliate General Information

Affiliate Name

*The pre-populated affiliate name is the organization name registered with the IRS for the EIN number provided. You may change this to your local affiliate name if*

*different than what the IRS has on file. Federal Education Association should provide the International Affiliate requesting the grant.*

Street Address

䈬

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City\Province

*For non-U.S., provide state, province, territory, county as required*

State

*Non-U.S. affiliates select "na"*

-

Select One

-

䔱

Country

Select One

-

-

䔱

Postal Code

Affiliate Partners

Will you be partnering with other NEA affiliates on this project?

Yes

䔱

*List all NEA state and local affiliate partners for this grant request below.*

State

䔱

Prefix

-

-

Select One

䔱

First Name

Middle Name\Initial

Last Name

Suffix

>

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None

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Work Phone

Extension

work Fax

Detail the roles of each affiliate partner identified above.

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Word count

0

 of

300

Grant Request Information

Request General Information

Submission Date

7/29/2020

Project Title

䈬

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Word count

0

 of

100

Total Request Amount

Is your State Active Affiliate aware of this grant application?

Yes

䔱

Request Primary Grant Contact

*The information in this section is pre-populated from the last application you submitted. Please update as applicable to ensure our records are up to date.*

Title

Work Address

䈬

䈭

Work City\Province

*For non-U.S., provide state, province, territory, county as required*

Work State

*For Federal Education Association select "na"*

-

Select One

-

䔱

Work Country

-

Select One

-

䔱

Work Postal Code

E-mail

Mobile Phone

Grant Request Detail

Provide a general description of your Retired Organizing project.

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Word count

0

 of

300

Please provide a timeline of events with a description of monthly project activities.

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Word count

0

 of

300

Describe the capacity and readiness of your state affiliate to implement your project.

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Word count

0

 of

300

List the principle people involved and their major responsibilities.

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Word count

0

 of

300

Have you previously been awarded a grant by the Retired Organizing Program? If so, indicate the title, purpose, amount and outcome of each.

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Geographical Area Served by the grant?

 *impacted.*

*MOST*

*Select the State or Country that is*

-

-

Select One

䔱

Membership Category(ies) served by the grant?

Aspiring Educators

0

 %

Active Professional

0

 %

Higher Education

0

 %

ESP

0

 %

Retired

0

 %

Strategic Objectives

Which one of the NEA Goals is most aligned with the purpose of your grant proposal?

Select One

-

-

䔱

Select up to five areas that further describe your grant program content and focus:

Community outreach and engagement (parents, family, community)

ESSA

Membership retention

NEA-Retired intergenerational mentoring

New leaders development

Political advocacy

Recruitment of early career educators

Recruitment of retirees and/or pre-retired

Retired organizing

School to prison pipeline

Social/racial justice in education

Non-Affiliate Partners

Will you be partnering with any non-affiliate organizations on this project?

NA Key Contact 1

Non-Affiliate Partner Name 1

Non-Affiliate Partner Type 1

Government

䔱

Non-Affiliate Partner Name 2

Non-Affiliate Partner Type 2

Government

䔱

NA Key Contact 2

Yes

䔱

*List all NON-affiliate partners for this grant request below*

Detail the roles of each NON-affiliate partner identified above.

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Word count

0

 of

300

Project Budget

Anticipated Budget

Total Budget Amount Requested

*NOTE:*

 *you will be required to attached the Retired Organizing Budget Detail Sheet on the Attachments page of this application.*

Anticipated Results

Results Summary

Statement of Need

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Word count

0

 of

300

Grant Strategy

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Word count

0

 of

300

Evaluation Plan

䈬

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Word count

0

 of

300

Sustainability Plan

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Word count

0

 of

300

NEA Quantitative Metrics

*Provide values for all applicable quantitative metrics below. For those metrics not applicable to your grant request, leave default value of zero (0).*

*If awarded, actual figures will be collected as part of regular progress reports.*

Anticipated # Members Engaged

0

Of those members engaged, the anticipated # that takes part in other/additional union activities, programs, and/or events

0

Anticipated # Members Recruited

0

Anticipated # of Sharable Resources Developed

*NOTE: These resources are expected to be shared with NEA.*

0

Anticipated # Community Stakeholders Engaged

0

Anticipated # Leaders Identified

0

Program Specific Quantitative Metrics

Anticipated # Retirees Trained

0

Grant Specific Metrics

*Please provide detail for up to 8 goals specific to this grant request. (Must list a minimum of 3 Goals)*

Goal 1 Description

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Word count

0

 of

300

Goal 1 Measurable Outcome(s)

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䈭

Word count

0

 of

300

Goal 1 Key Activities

䈬

䈭

Word count

0

 of

300

Goal 1 Anticipated Total Engagement

0

Goal 1 Engagement Roles and Purposes

䈬

䈭

Word count

0

 of

300

Goal 2 Description

䈬

䈭

Word count

0

 of

300

Goal 2 Measurable Outcome(s)

䈬

䈭

Word count

0

 of

300

Goal 2 Key Activities

䈬

䈭

Word count

0

 of

300

Goal 2 Anticipated Total Engagement

0

Goal 2 Engagement Roles and Purposes

䈬

䈭

Word count

0

 of

300

Goal 3 Description

䈬

䈭

Word count

0

 of

300

Goal 3 Measurable Outcome(s)

䈬

䈭

Word count

0

 of

300

Goal 3 Key Activities

䈬

䈭

Word count

0

 of

300

Goal 3 Anticipated Total Engagement

0

Goal 3 Engagement Roles and Purposes

䈬

䈭

Word count

0

 of

300

Goal 4 Description

䈬

䈭

Word count

0

 of

300

Goal 4 Measurable Outcome(s)

䈬

䈭

Word count

0

 of

300

Goal 4 Key Activities

䈬

䈭

Word count

0

 of

300

Goal 4 Anticipated Total Engagement

0

Goal 4 Engagement Roles and Purposes

䈬

䈭

Word count

0

 of

300

Goal 5 Description

䈬

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Word count

0

 of

300

Goal 5 Measurable Outcome(s)

䈬

䈭

Word count

0

 of

300

Goal 5 Key Activities

䈬

䈭

Word count

0

 of

300

Goal 5 Anticipated Total Engagement

0

Goal 5 Engagement Roles and Purposes

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Word count

0

 of

300

Goal 6 Description

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Word count

0

 of

300

Goal 6 Measurable Outcome(s)

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Word count

0

 of

300

Goal 6 Key Activities

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䈭

Word count

0

 of

300

Goal 6 Anticipated Total Engagement

0

Goal 6 Engagement Roles and Purposes

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Word count

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 of

300

Goal 7 Description

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䈭

Word count

0

 of

300

Goal 7 Measurable Outcome(s)

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䈭

Word count

0

 of

300

Goal 7 Key Activities

䈬

䈭

Word count

0

 of

300

Goal 7 Anticipated Total Engagement

0

Goal 7 Engagement Roles and Purposes

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Word count

0

 of

300

Goal 8 Description

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Word count

0

 of

300

Goal 8 Measurable Outcome(s)

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䈭

Word count

0

 of

300

Goal 8 Key Activities

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Word count

0

 of

300

Goal 8 Anticipated Total Engagement

0

Goal 8 Engagement Roles and Purposes

acceptable and accessible database that allows the information to be appended to the member’s profile.

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Word count

0

 of

300

Communications

Communications Plan Summary

*A Communication Plan outlines a strategic approach to providing stakeholders with information regarding your project. The plan defines who should be given*

*information, when that information should be delivered and what communication channels will be used to deliver the information. Please provide summary information*

*regarding your communications plan for this grant.*

*If not applicable you must enter "NA"*

Communications Plan - Description and Goal(s)

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Word count

0

 of

300

Communications Plan - Measurable Outcome(s)

䈬

䈭

Stakeholder Communications Detail

*Provide information about how you will reach the specific audience groups below (if applicable).*

Internal Audience(s)

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䈭

Word count

0

 of

300

External Audience(s)

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䈭

Word count

0

 of

300

Partner Audience(s)

䈬

䈭

Word count

0

 of

300

National Audience

䈬

䈭

Word count

0

 of

300

Terms

NEA GRANT TERMS

1

.Only NEA affiliates are eligible for these NEA grants. By applying for this grant, you affirm that your affiliate is an NEA affiliate subject to the

requirements of the NEA Constitution and Bylaws.

2

.Record all member recruitment and engagement data (one on ones, new members, and new leaders) in My Workers VAN, NEA360, or another mutually

4

.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

3. Funds will be provided to the affiliate as documented progress is reported and outcomes are achieved, per NEA approval.

should contact their assigned NEA liaison for prior approval.

1. 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.
2. 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.
3. 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.
4. A NEA liaison will be assigned to each awarded grant. The affiliate grant contact will respond promptly to communications from the NEA liaison.
5. 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.
6. 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.
7. 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

# Attachments

There are no files attached.

 Save & Finish Later Submit