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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**

\* **City/Province**

Non-U.S. affiliates provide state, province, territory, county as required

\* **State**

For Federal Education Association select "na"

\* **Country**

\* **Postal Code**

\* **Affiliate Type**

\* **Membership Density**

\* **Are you a Local Option UniServ?**

\* **Number of Affiliate Members**

\* **Number of Potential Affiliate Members**

### Request Information

**Request General Information**

**\* Submission Date**

8/19/2021 

**\* Project Title**

Word count 0 of 100

**\* Total Request Amount**

**\* Grant Term (in months)**

12

**\* Will you accept a shorter term?**

Yes 

**\* Is your State Affiliate aware of this grant application?**

Yes 

**\* Geographical Area Served by the grant?**

Select the State or Country that is MOST impacted.

- Select One - 

**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.

**Prefix**

- Select One - 

**First Name**

**Middle Name\Initial**

**Last Name**

**Suffix**

<None> 

**Title**

**Work Address**

**Work City\Province**

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

**Work State**

For Federal Education Association select "na"

- Select One - 

**Work Country**

- Select One - 

**Work Postal Code**

**E-mail**

**Work Phone**

**Extension**

**work Fax**

**Mobile Phone**

**Request Detail**

**\* Will the project impact the work of staff assigned to your affiliate? If yes, has this been discussed with the manager of the impacted staff?**



Word count 0 of 300

**\* Please provide a bullet point list of communications objective(s)**

*Up to five (5)*

Word count 0 of 300

**\* Provide an explanation of how the proposed paid media will support the Association's strategic goals.**

Word count 0 of 300

### RESEARCH

**\* Provide an explanation of existing research data being used to inform communications strategies.**

Word count 0 of 300

Provide an executive summary of research, if available OR an explanation of how new baseline research will be conducted including ...

- Who will conduct research
- How the research will be conducted
- When the research will be conducted
- Cost of the research
- Who pays for the research

Word count 0 of 300

### MESSAGE AND AUDIENCE

**\* Who are the target audience(s)?**

Word count 0 of 300

**\* Outline the key messages.**

Word count 0 of 300

### EXECUTION

\* Provide an explanation of communications strategy and recommended tactics.

[Empty text box]



Word count 0 of 500

\* Explain the proposed media selection and where is it to be placed.

[Empty text box]



Word count 0 of 500

**MEASUREMENT**

\* Please provide a plan for measuring success including indicators/methods.

[Empty text box]



Word count 0 of 500

**TIMELINE OF CAMPAIGN**

\* Detail the timeline of the proposed campaign.

[Empty text box]

Word count 0 of 500

**Strategic Objectives**

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

- Select One -

\* Which one of these ten content areas ("content clusters") best describes the primary focus of your grant proposal?

- Select One -

\* Select up to five keywords that further describe your grant program content and focus:

- Community outreach and engagement (parents, family, community)
- Community schools
- Mentoring/coaching
- Priority schools
- Professional learning/professional communities
- Retention in the profession
- Safe and healthy schools
- School improvement
- Social justice
- Student success

**Project Budget**

**Anticipated Budget**

\* Amount Requested for Year 1

[Empty text box]

Enter your anticipated budget amounts for each budget category. Please note that you will be required to submit ACTUAL SPENDING by budget category via online progress and final reports.

**CONSULTANTS/VENDORS**

**\* SUB-TOTAL: CONSULTANTS/VENDORS**

**\* Provide a detailed justification for the proposed consultants/vendors grant expenditures.**

Word count 0 of 300

**Anticipated Results**

**Results Summary**

**\* Statement of Need** 

Word count 0 of 300

**\* Grant Strategy** 

Word count 0 of 300

**\* Evaluation Plan** 

Word count 0 of 300

**\* Sustainability Plan** 

Word count 0 of 300

**Program Specific Quantitative Metrics**

**\* Anticipated # Facebook Page Followers**

**\* Anticipated # Twitter Followers**

**\* Anticipated # Youtube Channel Viewers**

**Grant Specific Metrics**

Please provide detail for up to 5 goals specific to this grant request.

Goal 1 Description

[Empty text box for Goal 1 Description]



Word count 0 of 300

\* Goal 1 Measurable Outcome(s)

[Empty text box for Goal 1 Measurable Outcome(s)]



Word count 0 of 300

\* Goal 1 Key Activities

[Empty text box for Goal 1 Key Activities]



Word count 0 of 300

\* Goal 1 Anticipated Total Engagement

0

\* Goal 1 Engagement Roles and Purposes

[Empty text box for Goal 1 Engagement Roles and Purposes]



Word count 0 of 300

[Four horizontal lines for additional input]

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 acceptable and accessible database that allows the information to be appended to the member's profile.
3. After initial notification of the award, (if more than \$100,000) one-half (1/2) of the approved funds will be provided to the affiliate upon receipt of an invoice on affiliate letterhead. The remaining funds will be provided to the affiliate upon receipt of the 6-month progress report, as documented progress and outcomes are achieved.
4. Progress reports are due electronically, in the format provided, upon completion of the campaign or every six (6) months if you undertake a year-long campaign. Reports should include budget reports comparing the actual expenses incurred during grant implementation with the original budget. If significant changes are being made to the approved work, the primary grant contact should contact their assigned NEA liaison.
5. 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.
6. 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.
7. 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.
8. A NEA liaison will be assigned to each awarded grant. The affiliate grant contact will respond promptly to communications from the NEA liaison.
9. 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.
10. 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.
11. 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 entitle 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