



Date: _____

Amount Requested: \$ _____

Applicant Organization: _____

IRS Tax I.D. # _____

CONTACT INFORMATION

Applicant Organization _____

Address _____

(Note: Please use the address where RAD should mail notices, contracts, grant payments, etc.)

City, State, Zip Code _____

Website _____

Contact person for this grant _____

Title _____

Phone _____ Email _____

Assurances

The applicant certifies that all information contained in this application, including attachments and supporting material, is true and accurate to the best of their knowledge. This application and all attachments are a part of the public record. The applicant agrees to comply with the requirements of the Allegheny Regional Asset District, including all reporting, fiscal and/or performance reviews.

Signature of Authorizing Official

Date

Typed Name and Title

ALLEGHENY REGIONAL ASSET DISTRICT
Accessibility & Inclusion Grant Application Questions



If you require more space than the form allows, please attach supplemental pages.

1) Project Narrative

a. Project Need

For example, how the public will benefit from assistive listening devices. Include names of names of all collaborating organizations, if applicable, and explanation of why those listed.

(Limit 4,000 characters, including spaces.)

b. Project Goals
(Limit 4,000 characters, including spaces.)

c. Project Outcomes

*These must be **defined and measurable** (i.e. people with visual impairments will be able to access X number of programs/exhibits or X percent of program staff will be trained in sensory-friendly activities). Consider both the short-term and long-term. (Limit 4,000 characters, including spaces.)*

d. Project Management

Who will be in charge? How will the project be sustained? (Limit 4,000 characters, including spaces.)

e. Success

How do you define and measure success of this project? What are the benchmarks for the success of this project? (Limit 4,000 characters, including spaces.)

f. Communication Plan

How will you let the public know about the new accommodations?

(Limit 4,000 characters, including spaces.)

- 2) Indicate how this project will add value to the participants' overall operation.
(*Limit 4,000 characters, including spaces.*)

3) Provide a timeline for project implementation, including an anticipated completion date if not on-going. (Limit 2,000 characters, including spaces.)

4) Submit a detailed project budget including a listing of funds from other sources and their status (awarded, pending, etc.) as well as a breakdown of all costs. **Indirect costs are not eligible for support under this program.**

** If you are applying with any partner organizations that are **not** current RAD assets, they must complete the [Requirements For Non-RAD Asset Partners](#). Please include the completed required materials for all non-RAD asset partners with your application submission. By signing and submitting this application, the applicant signifies and takes all responsibility for the eligibility of partner organization(s).*

APPLICATION CHECKLIST:

- Application Cover Sheet
- Application Questions
- Project Budget
- Requirements for Non-RAD Asset Partners (if applicable)