IOWA DEPARTMENT OF NATURAL RESOURCES
Resource Enhancement and Protection

REAP GRANT APPLICATION

Conservation Education Program (CEP)

561--12.1(455A) Purpose. The conservation education program shall serve Iowa citizens by providing effective curricula, program materials, and educator stipends to increase environmental awareness and understanding of stewardship, and enhance natural resources.

APPLICATION CONTACT

Organization: _____ **Contact Person:** _____

Email: _____ **Telephone:** _____

Applicant Mailing Address: _____

City, State, Zip Code: _____

PROJECT DESCRIPTION

a. **Title:** _____

b. **Project Summary:** (Maximum of 500 characters summarizing the REAP Grant request)

PROJECT TIMELINE

a. **Estimated Project Dates:**

Start: _____ Completion: _____

BUDGET SUMMARY – Mini Grant up to $3,500 – Standard Grant over $3,501

REAP CEP Request	Cash & In–kind Support	Total Project Cost
		$ 0.00

Application and Submittal Instructions: Submit to reapcep@dnr.iowa.gov
Proposals will be accepted electronically by 5pm Central time on May 15 and November 1, unless those days fall on a weekend or state holiday in which case applications will be due by 5pm Central time on the next business day.

CERTIFICATION

By signing below, whether typing your name or signing it digitally, I certify that all the information provided in this application is true and correct.

Signature: _____ **Date:** _____

NEEDS ASSESSMENT - 10 points
Describe how this project will conserve and protect natural resources.

- **What need(s) does this project seek to fill? What observations, data, and/or expert testimony document this need(s)? (maximum 1,800 characters)**

- **In what ways is this project important to environmental education in Iowa? (maximum 1,800 characters)**

PROJECT DESCRIPTION & EVALUATION - 35 points
Describe what your project is going to do.

- **Describe what your project is going to do, how you are going to do it, and how your project will meet your needs assessment. (maximum 1,800 characters)**

- **Who is your direct audience, how many do you intend to directly reach and indirectly impact, and explain why these are realistic and cost-effective for the proposed project. If you intend to reach underrepresented groups who might not typically participate in your project, describe the strategies you plan to increase participation. (maximum 1,800 characters)**

- **What do you want your audience to know or do at the end of the project? What does success look like? If you are working with K-12 students in the public/private schools, clearly articulate which Iowa Core Standards the project will address. (For more information, go to https://iowacore.gov/iowa-core.) (maximum 2,000 characters)**

- **What evidence will you collect to evaluate the success of your project? How will you evaluate your project? (maximum 1,500 characters)**

Summary of Milestone Objectives/Action Steps to be accomplished during the project The following outline will be utilized for the grant agreements and reporting	Beginning Date	Ending Date

BUDGET EXPLANATION - 25 points

List all eligible expenses and the method/calculation (show your work) to determine the estimate. Project expenses are to enhance the work of the organization and are not intended to replace the current business needs/operations. Justification for expenses is necessary for the Board to best understand the project. For additional clarification contact REAPCEP@dnr.iowa.gov.

Ineligible Expenses

The following items are not allowed for REAP CEP grant funding (but may be covered by match funds, partners, or in-kind support):

- Office and personal equipment
- Construction, renovation and remodeling
- Out of state travel (unless approved by the Board)
- Development of outdoor classrooms (e.g., prairie seed, fencing, tools)
- Land
- Administrative/Indirect costs in excess of 10 percent – provide the organization's administrative/indirect costs policy and calculation

Eligible Expenses

The following types of items are eligible for grant funds:

- Salaries and fringe benefits including contractors (calculation rates must be included)
- Travel - suggested rates averaging the Federal and State of Iowa Reimbursements are $0.4625 per mile and $86 hotel.
- Supplies that are necessary for the grant project
- Technology essential for the grant project
- Other necessary expenses such as stipends to attend training sessions, fees for use of facilities, etc.

Include an explanation of your non-REAP CEP sources of funding. Include which sources have provided firm financial commitments to the project, and the sources to which you will be requesting financial support.

Partner Commitment Support Letters: Include letters from partners indicating firm, specific commitments to participation. Letters must include who wrote the letter, the date it was written, and should describe the levels of commitment, such as stiff time devoted to active participation on project committees, direct financial commitments and/or commitments to attend workshops. Electronic letters of commitment will be accepted, with or without signatures.

Category	REAP CEP Request	Cash & In–kind Value	Description of Cash, In-kind, or other Contributions	Cash, In-kind, or Partnership Letter included	Total Cost
Personnel				☐ **Yes** ☐ **No**	$ 0.00
Travel				☐ **Yes** ☐ **No**	$ 0.00
Supplies				☐ **Yes** ☐ **No**	$ 0.00
Technology				☐ **Yes** ☐ **No**	$ 0.00

Other				☐ **Yes** ☐ **No**	$ 0.00
Totals					$ 0.00

Personnel Summary and Calculation - List the staff/partners/contractors who are or will be responsible for completing the project, their qualifications, estimated number of hours for the project, and justified or explain hourly/daily rate.

REAP CEP Request (maximum 1,200 characters):

Cash, In-Kind, or Other Contributors (maximum 800 characters):

Travel Summary and Calculations - mileage, lodging, food, etc.
REAP CEP Request (maximum 1,200 characters):

Cash, In-Kind, or Other Contributors (maximum 800 characters):

Supplies Summary and Calculation - That are necessary for the grant project
REAP CEP Request (maximum 1,200 characters):

Cash, In-Kind, or Other Contributors (maximum 800 characters):

Technology Summary and Calculations - essential for the grant project
REAP CEP Request (maximum 1,200 characters):

Cash, In-Kind, or Other Contributors (maximum 800 characters):

Other Summary and Calculations - eligible expenses beyond the above categories
REAP CEP Request (maximum 1,200 characters):

Cash, In-Kind, or Other Contributors (maximum 800 characters):

PROGRAM/PARTICIPANT TRANSFERABILITY & SUSTAINABILITY - 15 points

- **How can this project be sustained in the future, transferred to another entity, or continued on through participant knowledge/activities? (maximum 1,800 characters)**

- **List REAP CEP Grants received in the past 5 years and explain what you learned from these grants that will/have impact/ed your current application. If you are requesting funding for a project that received past CEP support, explain how your evaluation of that project demonstrates the need for continuation. (maximum 1,800 characters)**

- **If you are aware of the environmental education community is/has conducted/ing a similar type of project, explain what you have learned from it that may be applied to your project.**

- **What types of communication will you use to inform the public of CEP funding support? (maximum 1,800 characters)**

INNOVATION & OVERALL IMPACT - 15 points

Do not complete this section. Reviewers will award points on the project's overall promise of success and description of creative ideas & strategies.

PROJECT SCORING CRITERIA
(for grant reviewers' use only)

Available pts	Awarded pts	Category
10		**Needs Assessment**
35		**Project Description & Evaluation**
25		**Budget Explanation**
15		**Program/Participant Transferability and Sustainability**
15		**Innovation & Overall Impact**
100		TOTAL

Minority Impact Statement

Pursuant to 2008 Iowa Acts, HF 2393, Iowa Code Section 8.11, all grant applications submitted to the State of Iowa which are due beginning January 1, 2009 shall include a Minority Impact Statement. This is the state's mechanism to require grant applicants to consider the potential impact of the grant project's proposed programs or policies on minority groups. **Please choose the statement(s) that pertains to this grant application. Complete all the information requested for the chosen statement(s).**

☐ The proposed grant project programs or policies could have a disproportionate or unique **positive** impact on minority persons.

Describe the positive impact expected from this project

Indicate which group is impacted:

- ☐ Women
- ☐ Persons with a Disability
- ☐ Blacks
- ☐ Latinos
- ☐ Asians
- ☐ Pacific Islanders
- ☐ American Indians
- ☐ Alaskan Native Americans
- ☐ Other

☐ The proposed grant project programs or policies could have a disproportionate or unique **negative** impact on minority persons.

Describe the negative impact expected from this project

Present the rationale for the existence of the proposed program or policy.

Provide evidence of consultation of representatives of the minority groups impacted.

Indicate which group is impacted:

- ☐ Women
- ☐ Persons with a Disability
- ☐ Blacks
- ☐ Latinos
- ☐ Asians
- ☐ Pacific Islanders
- ☐ American Indians
- ☐ Alaskan Native Americans
- ☐ Other

☐ The proposed grant project programs or policies are **not expected to have** a disproportionate or unique impact on minority persons.

Present the rationale for determining no impact.

I hereby certify that the information on this form is complete and accurate, to the best of my knowledge:

Name: _____ **Title:** _____

Definitions

"Minority Persons", as defined in Iowa Code Section 8.11, mean individuals who are women, persons with a disability, Blacks, Latinos, Asians or Pacific Islanders, American Indians, and Alaskan Native Americans.

"Disability", as defined in Iowa Code Section 15.102, subsection 5, paragraph "b", subparagraph (1):

b. As used in this subsection:

(1) "*Disability*" means, with respect to an individual, a physical or mental impairment that substantially limits one or more of the major life activities of the individual, a record of physical or mental impairment that substantially limits one or more of the major life activities of the individual, or being regarded as an individual with a physical or mental impairment that substantially limits one or more of the major life activities of the individual.

"*Disability*" does not include any of the following:

(a) Homosexuality or bisexuality.

(b) Transvestism, transsexualism, pedophilia, exhibitionism, voyeurism, gender identity disorders not resulting from physical impairments or other sexual behavior disorders.

(c) Compulsive gambling, kleptomania, or pyromania.

(d) Psychoactive substance abuse disorders resulting from current illegal use of drugs.

"State Agency", as defined in Iowa Code Section 8.11, means a department, board, bureau, commission, or other agency or authority of the State of Iowa.