

Rural Nursing Education Request for Application- Application Materials

Applicant Information Sheet

NAME OF ORGANIZATION	
ADDRESS	
PROJECT MANAGER	
PROJECT MANAGER	
TITLE	
TELEPHONE	
EMAIL	
EMAIL	
TAX	
IDENTIFICATION	
NUMBER (TIN)	
WA UBI number **	
Statewide Vendor **	
Unique Identifier **	
DDODOOED BUDOET VE 12 1	
PROPOSED BUDGET YEAR 1	
PROPOSED BUDGET YEAR 2	

Print Name of Authorized Signatory



Signature of Authorized Signatory
Title/Date
** If you do not have these numbers at the time of your application, you will need to apply and receive them before having a contract in place with WA DOH. Allow at least 30 days to get these numbers.
You can use the following links to request these numbers:
WA UBI: Registrations and filings required for businesses Washington Department of Revenue
 Statewide Vendor Number: <u>Vendor Payee Registration Office of Financial</u> <u>Management (wa.gov)</u>
 Follow this link for more support applying for this number: <u>Apply for a Statewide Vendo</u> <u>Number</u>
Unique Identifier: <u>Unique Entity Identifier Update GSA</u>
Year 1 budget considerations: Contract year one is estimated to be between six and nine months of program work. DOH will negotiate with successful applicants to develop an adjusted year one budget. Year two and three will be 12 months of program work.
Eligibility
1. Do you represent a Washington State Board of Nursing approved nursing program?YesNo
2. Will the program lead students to be able to pass the NCLEX-RN?YesNo



Letters of Support

Letters of support are optional. A maximum of 3 letters of support can be submitted with the application. These letters can be from partner organizations, community members, students, or rural hospitals or facilities.

Project Plan

Planning Questions			
 Describe your organization's capacity to implement education for nursing students living in rural communities. Include details about your staff and their roles. 			
Tell us about your commitment to creating a sustainable workforce with diverse skills			
and from different communities. How will your program help increase the supply of Registered Nurses in rural Washington?			
Registered Narioes III Farar Washingtoni			



3. Share your plan for preparing nursing students to meet the unique needs of working in rural communities. Describe how you'll recruit students, guide them through the program, and help them succeed. Include a high-level timeline with key steps and activities.
Describe how you'll deliver rural practice nursing concepts to students, including classroom, lab, and clinical training. How will you give students exposure and experience to rural settings, including labor and delivery?



 List any existing relationships you have with hospitals and health systems. Please explain how you will work with these partners in the educational process to develop curriculum, offer clinical placements, and give students experience in rural obstetrics care.
6. How will you track student participation and progress in the program. What methods will you use to measure and report the program impact?



Project Budget

Please fill out the budget summary for the proposed years 1 and 2. Include a description of how you plan to use the grant funds. For more information on allowable costs, please see the MHI Allowable Costs Guidance.

Budget		Year 1	Year 2	Budget Description
Category		Budget	Budget	
A. Sala	ries Wages			
B. Fring Bend	ge efits			
C. Trav	el			
D. Equi	ipment			
E. Sup				
F. Con	tracts			



G. Other		
Total Direct Costs		
H. Indirect Costs*		
Total		

*Please note: Indirect costs can include administrative expenses to do business. Follow the federally approved indirect rate agreement. If you don't have an agreement in place, use the 10% de minimus rate for indirect charges. All indirect costs are subject to approval by the Washington State Department of Health before contract implementation.