2021 Request for Proposals
Healthy Youth Development Initiative
(formerly the Youth Support Systems and Community Trauma Response Initiatives)

Background
Boston Children’s Collaboration for Community Health aims to improve the health and well-being of children and families disproportionately impacted by systemic injustices and inequities in health and the social determinants of health. Our goal is to help promote and support safe, stable, nurturing, healthy relationships and environments for infants, children, youth, and young adults so they can thrive. Through the Collaboration, Boston Children’s seeks to support projects that advance change through 1) creating and expanding programs and services; 2) policy, advocacy and knowledge building; and 3) systems change and cross-sector coordination.

Funding Opportunity
Addressing the current and overwhelming needs of youth and young people today may help to mitigate potential long-term consequences of the COVID pandemic. We recognize that we must focus on the trauma that young people have endured and continue to endure during this time.

This opportunity provides three years of grant funding to community organizations, collaborations, or agencies that are youth serving and/or work within trauma prevention or intervention. Organizations should describe how their projects will positively impact youth development through policy and advocacy, capacity and knowledge building, programs and services, cross-sector collaboration, and/or systems change. Projects must include a plan to address trauma as part of the proposal. This includes youth serving organizations that implement or intend to implement trauma informed practice as well as trauma prevention and intervention programs that are expanding to include youth. Boston Children’s is also interested in projects that address barriers to participation and provide low or no cost programming.

Key objectives and strategies for this initiative include but are not limited to:

- Foster personal development of youth through leadership skill-building, mentorship, interest exploration, and identity formation and/or affirmation
  - Provide youth programming inclusive of all ages, including underserved populations such as 13-14 year olds
  - Incorporate youth-centric approaches or youth participatory decision-making into programs and services
  - Create opportunities for youth voice, empowerment, and healing in supportive community settings
• Expand career pathways for youth through college, trades/training, and direct employment
  o Provide youth employment, college readiness, and internship opportunities
  o Strengthen academic and professional skills (e.g., applications, interviews)

• Strengthen capacity of community-based organizations to work with youth who have experienced violence and other forms of trauma
  o Ensure staff have opportunities for trauma-informed professional development trainings and workshops
  o Support curriculum development that focuses on social-emotional wellness
  o Provide resources to address vicarious trauma among staff

Examples of potential outcomes for this initiative:
  o Support for youth leadership and skill building, and career awareness
  o Increase in professional opportunities including internships and networking
  o Improvement in youth skills or readiness for education and/or employment
  o Increase in educational attainment
  o Improvement in youth employment status
  o Building organizational capacity and infrastructure to improve services
  o Increase in staff knowledge and skills related to trauma-informed services
  o Increase in youth access to community-based mental health support
  o Improved mental, physical, and sexual health
  o Increased connectedness among community members

Total Funding for the Healthy Youth Development Initiative
• Up to $2,651,800 will be available within this request.
• Funding will support projects for 3 years, May 1, 2022 to April 30, 2025.
• Three tiers of funding are available:
  o Tier 1: Up to $25,000/year for single organization applicants
  o Tier 2: Up to $50,000/year for single organization applicants or two organizational partners who commit to working together and sharing resources
  o Tier 3: Up to $100,000/year for at least two organizational partners who commit to working together and sharing resources, or partnerships with organizations from two or more sectors

Eligibility and Priorities
• Priority will be given to projects that benefit children, families, and communities of color in the Boston neighborhoods of Dorchester, East Boston, Hyde Park, Mattapan, Roxbury, and Jamaica Plain (including Mission Hill). Projects focused on statewide efforts will be considered in the context of this initiative’s goals and objectives, and the applications received.
Eligible institutions include community-based organizations, community health centers, intermediary organizations, coalitions or advocacy organizations.

Public agencies, including schools, are eligible to apply in partnership with at least one community-based organizational partner.

Organizations must have been in existence for at least two years.

Tax-exempt organizations and groups with a tax-exempt fiscal agent are eligible to apply. Private foundations are not eligible.

Practices or entities owned by Boston Children’s Hospital are not eligible to apply or receive funds but may serve as collaborators.

If you need assistance or have questions about your eligibility, please contact TalkToUs@childrens.harvard.edu.

**Two Step Process for this RFP**

Step 1. Letter of Intent (LOI). Required.

Step 2. Full Proposal. By invitation only in January 2022.

LOIs will be reviewed by committee and successful applicants will be invited to submit full proposals.

**Support for Applicants**

Applicants may contact Boston Children’s with questions or for guidance with their application. Applicants may schedule a time to speak with Boston Children’s or Mathematica staff by using this form to sign up for Zoom office hours. Copy and paste this link into your browser: https://forms.gle/S9G2A9CyWxNz2VnM6

Email questions to TalkToUs@childrens.harvard.edu.

**Use of Grant Funds**

Grant funds may be used for project staff salaries, consultant fees, data collection and analysis, meetings, supplies, project-related travel, youth stipends, and other direct expenses, including a limited amount of equipment deemed essential to the project. Indirect expenses may not exceed 10% of total request. Grant funds may not be used to provide medical services, support clinical trials, construct or renovate healthcare facilities, or substitute funds currently being used to support similar activities.

**Monitoring and Evaluation**

Mathematica serves as Boston Children’s evaluation partner for the Collaboration for Community Health. Mathematica will assess the evaluation sections of successful proposals for availability and access to data sources, data collection methods, and monitoring and outcome measures. Mathematica will also provide successful applicants with technical assistance.
Applicants should consider the funding tier as they develop their evaluation plans. Tier 1 projects may have a smaller scope or scale. Therefore, data collection sources and process and outcomes measures should reflect that. Projects funded in Tier 2 and 3 should have a broader scope that could include more significant reach or depth. These applicants should include a variety of data sources and shared measures across partners and/or sectors.

**Sharing and Learning**
Selected projects will be expected to participate in at least two sharing and learning activities annually hosted by Boston Children’s. Organizational leadership and project staff can attend.

**2021-2022 Funding Timeline**

<table>
<thead>
<tr>
<th>Date</th>
<th>Item</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday, October 25, 2021</td>
<td>Letter of Intent online application opens for <strong>Mental Health Systems and Healthy Youth Development</strong> Initiatives</td>
</tr>
<tr>
<td>October 26 – November 21, 2021</td>
<td>Letter of Intent office hours with Boston Children’s or Mathematica staff. Sign up by copying and pasting this link into your browser: <a href="https://forms.gle/S9G2A9CyWxNz2VnM6">https://forms.gle/S9G2A9CyWxNz2VnM6</a></td>
</tr>
<tr>
<td>Thursday, November 4, 1-2pm</td>
<td>Information session (register <a href="#">here</a>)</td>
</tr>
<tr>
<td>Monday, November 22 by 5:00 PM</td>
<td>Letter of Intent due</td>
</tr>
</tbody>
</table>
| By Monday, January 24, 2022 | • Notification of Letter of Intent decisions/Invitation to apply for Full Proposal  
• Full Proposal opens |
| January 27 – February 24, 2022 | Full Proposal office hours with Boston Children’s Boston Children’s or Mathematica staff. Sign up by copying and pasting this link into your browser: [https://forms.gle/S9G2A9CyWxNz2VnM6](https://forms.gle/S9G2A9CyWxNz2VnM6) |
| Monday, February 28, 2022 by 5:00 PM | Full Proposals due |
| Tuesday, April 26, 2022 | Applicants notified of decisions |
| May 1, 2022 | Funding period begins for selected projects |
If you need technical assistance with the application portal, please contact Debbie Lay at Debbie.Lay@childrens.harvard.edu.

For evaluation-related questions, please reach out to BCHevalpartner@mathematica-mpr.com.

STEP 1 – Letter of Intent Instructions

Process
Applicants may contact Boston Children’s staff with questions. You can schedule a time to speak with Boston Children’s or Mathematica staff. Sign up by copying and pasting this link into your browser: https://forms.gle/S9G2A9CyWxNz2VnM6

Email questions to TalkToUs@childrens.harvard.edu.

Deadline
The deadline for Letters of Intent to be submitted is Monday, November 22, 2021 by 5:00 PM. All applications must be submitted online at https://bostonchildrens.smapply.io/

Submission Instructions
Applications will be accepted using our online application portal. Sign up for an account if you are a new user. Once you have logged in, select the initiative you are applying for to start your application. If you are a grant writer, please register using the name and email address for the primary contact of the application. Once you have completed the application, you must click ‘Submit’ to formally submit your application. You will receive notification by email that the submission was received. Use Google Chrome for best experience. See Survey Monkey Apply Applicant Frequently Asked Questions here.

Letter of Intent Requirements
Please review the Healthy Youth Development Initiative’s Theory of Change. Answer the applicable questions below. To be considered for review, all questions must be completed.

Section 1. Current Funded Partner Organizations
Please complete questions 1 through 5 below. All other applicants please skip to Question 6.

1. Are you a current Collaboration for Community Health funded partner?
   □ Yes
   □ No (Please skip to Question 6)

2. Please indicate what type of project you are seeking for 2022 funding:
   □ Continuation of original 2019 project in full or in part
   □ New project

2021 Boston Children’s Office of Community Health | RFP: Healthy Youth Development Initiative | October 2021
3. a. Do you anticipate having remaining funds from your existing project beyond the end of the current grant period (April 30, 2022)?
   - No
   - Yes

   b. If yes, how much funding do you anticipate remaining and how do you plan to use the remainder of those funds as you enter the new grant period? Please clarify if you plan to repurpose them into the new proposal or complete activities aligned with the current project. (100 words)

4. Describe any challenges you’ve experienced with evaluation and reporting. What have you learned and what might you do differently over another three years? (300 words)

5. Reflect on the successes and challenges that you have experienced with your project including any adjustments made due to the COVID pandemic. What learnings do you plan to carry forward into another three years and how is sustainability being planned for? (300 words)

Section 2. Proposed Project (To be completed by all applicants.)

6. Project goals: In a bulleted list, provide one or two goals for your proposed project for the three-year timeframe (2022-2025). (50 words)

7. Project description: Describe the project and clearly state how it will benefit the health and well-being of children, youth, and families. Briefly discuss your organization’s engagement with the community and, if applicable, your partnerships and how you will achieve your project goals. (400 words)

8. Equity: Boston Children’s is deepening our commitment to racial equity by prioritizing projects that will advance health equity. Please describe how your project will support the health and well-being of children, families, and communities of color. (100 words)

9. Leadership: Describe the racial, ethnic, gender and geographic identities of your organization’s leadership and how this diversity might inform or benefit the project. (100 words)
10. **Population served**: Indicate below the *anticipated* total number of individuals for those populations who you intend to reach *over the three-year project period*. Please focus on the number of participants who will be served through this project, not the total served from your overall program.

- **By Age and Participant** (Check all that apply and identify numeric totals)
  - Young children (ages 0-5) ___
  - Children (ages 6-14) ___
  - Young adults (ages 15-24) ___
  - Parents/guardians ___
  - Community residents (ages 25+) ___
  - Providers (healthcare, childcare, etc.) ___
  - Families ___
  - Minority and women owned small business owners ___
  - Other, please identify ______________

- **By Race and Ethnicity** (Check all that apply and identify numeric totals)
  - Black or African American (non-Hispanic/Latino) ___
  - Hispanic/Latino (any race) ___
  - Asian ___
  - White ___
  - Multiple Races (non-Hispanic/Latino) ___
  - American Indian/Alaska Native ___
  - Native Hawaiian or other Pacific Islander ___
  - Other, please identify ___

- **By Geography** (Check all that apply and identify numeric totals)
  - Mattapan (zip code 02126)
  - Roxbury (zip codes 02118, 02119, 02120)
  - Dorchester (zip codes 02121, 02122, 02124, 02125)
  - Hyde Park (zip code 02136)
  - East Boston (zip code 02128)
  - Jamaica Plain (zip code 02130)
  - Other neighborhoods: Please list and indicate zip code ______
  - Statewide, please indicate specific communities if applicable

11. For the populations you identified above, please approximate the percentage of all participants who you anticipate are people of color.
  - Approximately >90% of project participants
Approximately 50% to 90% of project participants
Approximately <50% of project participants
Do not know at this time

12. Is Boston Children’s Hospital the sole source of funds for this project?
   - Yes
   - No

13. Funding tier: Please select the tier of funding you are requesting.
   - Tier 1: Up to $25,000/year for single organization applicants
   - Tier 2: Up to $50,000/year for single organization applicants or two organizational partners who commit to working together and sharing resources
   - Tier 3: Up to $100,000/year for at least two organizational partners who commit to working together and sharing resources, or partnerships with organizations from two or more sectors

14. Amount justification: Briefly discuss how the funds will be used and why the funding tier requested is appropriate, taking into account the number of participants served. If a smaller number of participants will be served, provide details on intensity of services. If Boston Children’s is the sole source of funds for this request, please explain further. (150 words) NOTE: Full budget details will be required at the Full Proposal stage.

15. (Required for proposals including partnerships) Partnership description: Describe the relationship between the organizations applying for the grant opportunity. Is this a new or existing relationship? (100 words) NOTE: Partnership letters are required at the Full Proposal stage.

Section 3. Alignment with the Theory of Change (To be completed by all applicants.)
For the questions below, we are interested in how you see your proposed project aligning with the initiative’s Theory of Change. Applicants may refer to this initiative’s Theory of Change to answer the questions below. Please reach out to Boston Children’s staff if you have questions about this section. (Note: If you are invited to Step 2 Full Proposal, you will be asked to identify the data you will be tracking.)

16. Focus Area and Project Activities: Select the primary focus area and activities for your proposed project. You do not need to make selections in each section. If the activities listed below do not exactly fit with your project, you may identify your own.
Policy, Advocacy and Knowledge Building: Foster youth personal development through leadership skill-building, mentorship, interest exploration, and identity formation and/or affirmation

- Opportunities for youth to build leadership skills and provide input on youth programming
- Opportunities for youth voice, empowerment, and healing in supportive community settings
- Other activity, please describe__________________

Systems Change and Cross-sector Coordination: Strengthen the capacity of community-based organizations to respond to the needs of youth, particularly youth affected by trauma

- Foster coordination within and across sectors
- Professional development opportunities for youth-facing staff to learn trauma-informed practices
- Support curriculum development that focuses on the social-emotional wellness of youth
- Provide resources to address vicarious trauma among staff
- Other activity, please describe__________________

Programs and Services: Support innovations or expand proven youth programs and services that foster educational and career development

- Create or expand programs and services focused on youth development and mentoring
- Create or expand programs and services focused on educational success and college readiness
- Create or expand programs and services focused on youth employment and career preparedness
- Other activity, please describe__________________

17. Short to medium term core outcomes: The short and medium term core outcomes are the changes you expect to see within the project funding period. For the question below, select the primary short to medium term core outcomes that best align with your project. You do not need to make selections in each section. If the outcomes listed below do not exactly fit with your project, you may identify your own. (Note: If you are invited to Step 2 Full Proposal, you will be asked to identify the data you will be tracking for each outcome.)

Supportive Communities:

- Increased youth participation, leadership, and decision-making in projects and processes affecting their communities
- Improved knowledge of, and connections to, available community-based assets and resources
- Increased connections with community leaders
18. **Long-term core outcomes**: The long-term core outcomes for this initiative are changes you expect to see that go beyond the project funding period. From the list below, select the

☐ Increased access to mental health and trauma support in community based settings
☐ Other, please identify: ____________________________________________________________

____ Supportive Services:
☐ Increased access to career exploration and planning
☐ Increased capacity and access to social, emotional, and physical health services for youth
☐ Increased quality and cultural capacity of services
☐ Improved retention and completion of higher education and vocational/trade programs
☐ Other, please identify: ____________________________________________________________

____ Supportive Systems and Infrastructure:
☐ Implementation of policies and practices across stakeholders to support successful completion of college or trade school
☐ New internships/employment opportunities by local employers
☐ Strengthened relationships between employers and youth-facing organizations
☐ Increased coordination between youth serving resources including coordination with other sectors
☐ Improved staff knowledge and awareness of trauma’s impacts on youth served
☐ Improved policymaker knowledge and awareness of trauma’s impacts on youth
☐ Other, please identify: ____________________________________________________________

____ Flourishing Youth:
☐ Improved knowledge of individual needs and how to access services and resources
☐ Adoption of behaviors that support social, emotional, and physical health
☐ Improved knowledge and awareness of trauma’s impacts to better recognize and address trauma in oneself and others
☐ Increased professional skills
☐ Improved youth employment or educational attainment
☐ Increased earnings
☐ Employment or college retention
☐ Improved youth confidence and personal development
☐ Strengthened connections with mentors, adults, and peers
☐ Other, please identify: ____________________________________________________________

Other, briefly list: ____________________________________________________________________
primary long-term core outcomes your project is most closely linked to. If the outcomes listed below do not exactly fit with your project, you may identify your own.

- Improved mental and physical health
- Increased lifelong earning potential
- Other, please identify: __________________________________________________________

**Selection Criteria for Letters of Intent**

Letters of Intent will be evaluated using the criteria below for invitation to submit a Full Proposal. (NOTE: For information on scoring see the [Letter of Intent Reviewer Tool](#))

- Clear and comprehensive understanding of the context of the need to be addressed and description of the approach (Q6, 7)
- Alignment with the initiative’s strategy and/or potential to meaningfully advance or make a new contribution to the initiative’s goals and outcomes (Q6, 7, 8, 9, 10, 11)
- Track record of community engagement or evidence of deep connection to the community in order to advance health equity (Q7, 8, 9)
- Appropriate amount of funding requested that accurately reflects the level of project effort (Q13, 14)
- Realistic goals and outcomes that can be achieved within the funding period (Q6, 16, 17, 18)
STEP 2 - Full Proposal Instructions (by invitation only)

This step is to be completed by applicants who have been invited to submit a Full Proposal. This step requires further detail on the project context, scope, work plans, evaluation, budget, organizational information, and letters of support.

**Process**

Applicants may contact Boston Children’s staff with questions. You can schedule a time to speak with Boston Children’s or Mathematica staff. Sign up by copying and pasting this link into your browser: [https://forms.gle/S9G2A9CyWxNz2VnM6](https://forms.gle/S9G2A9CyWxNz2VnM6)

Email questions to TalkToUs@childrens.harvard.edu.

**Full Proposal Information Session**

Applicants are invited to attend an optional information session to learn more about the Full Proposal process and ask questions. Please register [here](https://forms.gle/S9G2A9CyWxNz2VnM6).

**Deadline**

The deadline for completed applications is **Monday, February 28, 2022 by 5:00 PM**. All applications must be submitted online at [https://bostonchildrens.smapply.io/](https://bostonchildrens.smapply.io/)

Applicants will be notified of decisions by **Tuesday, April 26, 2022**.

**Submission Instructions**

Applications will be accepted using our [online application portal](https://bostonchildrens.smapply.io/). Once you have completed your application, you must click ‘Submit’ to formally submit your application. You will receive notification by email that your submission was received. Use Google Chrome for best experience. See Survey Monkey Apply Applicant Frequently Asked Questions [here](https://forms.gle/S9G2A9CyWxNz2VnM6).

For support using Survey Monkey Apply, email Debbie Lay, [debbie.lay@childrens.harvard.edu](mailto:debbie.lay@childrens.harvard.edu).

**Completed Full Proposal application components include:**

- Cover letter. Please include amount of funding requested and key contact information.
- Full proposal narrative
- Project budget (Template provided)
- Scope of Services with details on the project work plan and data to be tracked (Template provided)
- W-9 Tax Form. W-9 submitted must include the specific address where payment should be mailed.
• Organization or partnership budget
• Letters of support. Two letters from project participants or partners outside of your organization. Each letter must be one-page maximum.
• If applicable, Partnership letters. One letter of support per partner or a joint letter from all partners.
• If applicable, Project Partner list (Template provided)
• Other supporting materials (optional)

Section 1: Funding Tier

1. **Funding Tier:** Please select the tier of funding you are requesting.
   - Tier 1: Up to $25,000/year for single organization applicants
   - Tier 2: Up to $50,000/year for single organization applicants or two organizational partners who commit to working together and sharing resources
   - Tier 3: Up to $100,000/year for at least two organizational partners who commit to working together and sharing resources, or partnerships with organizations from two or more sectors

Section 2: Project Description

2. **Project name:** Provide the name of the project and a one sentence description of the project. (50 words)

3. **Project goals and objectives:** Confirm or update your project’s goals from the Letter of Intent #6. For each goal, in a bulleted list include up to three objectives that you hope to achieve by the end of the project period in 2025. (100 words) *Use this information to help you complete the Scope of Services template in Section 5. Required Uploads.*

4. **Project description:** Within the context of your project, identify the key inequities or disparities faced by children and/or families. Describe how the proposed project will address these inequities and improve the health and well-being of children, youth, and families. Be sure to discuss project activities and organization’s engagement with the community. Include culturally responsive practices, evidence-based or practice-informed frameworks, or curricula that will be used for the project. (850 words) *Use this information to help you complete the Scope of Services template in Section 5. Required Uploads.*

5. **Population served:** Indicate below the *anticipated* total number of individuals you intend to reach over the three-year project period. Please focus on the number of participants who will be served through this project, not the total served from your overall program.
6. For the populations you identified above, please approximate the percentage of all participants who you anticipate are people of color.
   □ Approximately >90% of project participants
   □ Approximately 50% to 90% of project participants
   □ Approximately <50% of project participants
   □ Do not know at this time
7. **Health equity**: Health equity can be defined as ensuring everyone has a fair and just opportunity to be as healthy as possible by **removing obstacles** to health (poverty, discrimination, power imbalances, etc.) and **their consequences** (lack of access to good jobs with fair pay, quality education and housing, safe environments, etc.). Discuss how your project’s approach will remove obstacles and consequences to equity in children’s health. (300 words)

8. **Racial equity**: Race and ethnicity are socially constructed categories that significantly influence child and family health outcomes. Discuss how your project will create or proactively reinforce policies, practices, attitudes, or actions that produce equitable power, access, opportunities, treatment, and outcomes for children, youth, and families of color. (300 words)

9. **Project staffing**: Describe the skills and capabilities of the staff who will implement your project’s activities. If there are new staff roles to be filled, describe your plans for hiring, including how you will make progress on your project should there be a hiring delay (i.e., if new staff are not able to be hired within 3 months of the grant award). (250 words)

**Section 3: Project Evaluation**

In this section you are being asked to provide information on the changes you hope to see and what you will measure. For questions or guidance in completing this section, please contact our Mathematica evaluation partner at BCHevalpartner@mathematica-mpr.com. (Note: If your proposal is selected for funding, you have the opportunity to work with Mathematica to refine your data and evaluation plans in the first quarter of the project period.) Please use the information you provide in this section to complete the Scope of Services template in Section 5.

**Required Uploads.**

10. What’s the headline you’d like others to know about if you’re successful? (100 words)

11. What changes do you hope to achieve within the next three years? (100 words)

12. **Data to be tracked**: First, select the primary focus area for your project (refer to question 16 in your Letter of Intent). You do not need to select every focus area, only the area that best reflects your project. Then, in bullets, list the process and outcome indicators that you will track. Indicators may be qualitative or quantitative. Process indicators measure the project’s activities (products and deliverables). Outcome indicators refer to specific observable or measurable changes resulting from the project and are measured over time.

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When listing indicators, provide as much description in the name as possible and include the target number where appropriate. Provide no more than 15 indicators total, with at least two of them being outcome indicators. (Note: Use the indicator example sheet as a guide for proposing your own process and outcome indicators.) Use your response in this section to help you complete the Scope of Services template in Section 5. Required Uploads.

<table>
<thead>
<tr>
<th>Category</th>
<th>Process Indicators:</th>
<th>Outcome Indicators:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy, Advocacy, and Knowledge Building</td>
<td></td>
<td></td>
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<tr>
<td>Systems Change and Cross-Sector Coordination</td>
<td></td>
<td></td>
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<tr>
<td>Programs and Services</td>
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</tbody>
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13. **Data sources:** For each of the indicators listed in the previous question, provide information on where current and proposed data will come from and how it will be collected. (200 words)
14. **Secondary data:** What other data sources do you use to inform your work and the broader context in which this work fits? Examples of secondary data sources include the [Child Health Opportunity Index](https://www.childhealthindex.org/) and the [Health of Boston report](https://www.boston.gov/department-of-health). (100 words)

15. **Key evaluation staff and partners:** Describe the skills and resources to support data collection and evaluation. Who are the key staff and partners who will be responsible for evaluation? (300 words) *Note: Resources may be allocated towards evaluation activities in the proposed budget and should align with the level of effort for the proposed project.*

16. **Challenges:** Name any challenges you anticipate with evaluating the impact of your project and how you might overcome these challenges. Are there specific challenges you might encounter in collecting unduplicated data or the race/ethnicity and geographic location of populations served? (200 words)

17. **Evaluation support:** List any specific areas or topics for support on evaluation activities that would benefit your project. (200 words)

**Section 4: Project Budget and Organization/Partnership Information**

18. **Use of funds:** Describe how funds from this grant will support the project’s overall success and any ways it will help to leverage other funding sources. (150 words)

19. **Sustainability:** Describe the strategies that you will use to ensure that the work or impacts will continue beyond the funding period. How will you use the data from the project for sustainability? (200 words)

20. **(Required for partnerships) Key project partners:** Describe how the project partners will work together to ensure the partnership is effective and the project goals are met. (500 words) *Note: In Section 5. Required Uploads, include either individual or a jointly signed letter for each key partner and complete the Project Partners List template.*

**Section 5: Required Uploads**

Complete and upload the documents described below. Documents 1 – 6 are required for all applicants. Documents 7 - 8 are required for applicants who have identified a funding tier requiring key partners. If you are unable to upload any of the documents required below, email Debbie Lay [debbie.lay@childrens.harvard.edu](mailto:debbie.lay@childrens.harvard.edu).

1. **Cover Letter** (One-page, single spaced. Include amount of funding requested and key contact information.)
2. Completed Scope of Services template or project work plan (Use form provided or upload own project work plan. If uploading own work plan, be sure to include the same information.)

3. Completed Project Budget (Use template provided.)

4. Organizational Budget (Use own format.)

5. Completed W-9 tax form for organization or from fiscal sponsor (Use form provided or upload own form. **W-9 submitted must include the specific address where payment should be mailed.**)

6. Two Letters of Support (One-page each, single spaced, combined into single document.)

7. If applicable, partnership letters (A jointly signed letter or one-page letter from each key partner, single spaced, combined into single document.)

8. If applicable, Project Partners List (Use template provided)

**Section 6: Optional Uploads**

1. Most recent annual report
2. Project management chart for proposed project
3. Project theory of change and/or logic model
4. Evaluation supporting materials (e.g. project evaluation plan; draft data collection tools; peer-reviewed publications)

**Selection Criteria for Full Proposals**

Full Proposals will be evaluated using the criteria below. (NOTE: For information on scoring see the [Full Proposal Reviewer Tool](#))

- Clear and comprehensive understanding of the context of the need to be addressed and description of the approach (Q3, 4)
- Alignment with the initiative’s strategy and/or potential to meaningfully advance or make a new contribution to the initiative’s goals and outcomes (Q3, 4, 5, 6, 7, 8, 10, 11)
- Track record of community engagement or evidence of deep connection to the community (Q4, 7, 8)
- Potential to advance children’s health equity and racial equity (Q4, 5, 6, 7, 8)
- A strong plan with appropriate capacity and resources to collect and report data (Q13, 14, 15, 16, 17)
- Goals and objectives that are realistic, measurable, and achievable (Q3)
- Process and outcome indicators that are clear and relevant to initiative (Q12, 13)

- Budget that is appropriate, realistic, justified and accurately reflects the level of project effort (Q9, 15, 18)
• Potential for sustained impact beyond the funding period (Q18, 19)

Boston Children’s or Mathematica staff will follow up with applicants by email at any point in the process if further information is needed to complete their consideration of a request. Applicants may be asked to participate in a conference call or a site visit. Requests to participate in a conference call or site visit do not guarantee selection as a grantee. All applicants will be notified via email as to whether their full proposal application is selected for funding.