



OPIOID SETTLEMENT FUND GRANT APPLICATION

Grant applications must be filled out completely and submitted with all required documents. Incomplete application may not be considered. Submissions must include the following:

- Opioid Settlement Fund Grant Application
- Project Narrative
- Project Budget
- Project SMART Goals
- Extended Risk Assessment Documentation (as applicable)

Completed applications should be submitted to opioidproject@region5systems.net no later than Friday, July 25, 2025, at 5:00 p.m.

Date of Application: _____

* Required before final submission.

Organizational Information

* Name: _____

* Tax ID Number (EIN): _____ * Telephone: _____ EXT: _____

* Address: _____

* City: _____ * State: Nebraska * Zip Code: _____ * County: _____

* Legal Status: ☐ For Profit ☐ Non-Profit ☐ Public ☐ Other: _____

Fax: _____ Website Address: _____

Organization Director/CEO

* Name: _____ * Title: _____

* Email: _____ * Telephone: _____

* Cell Phone: _____

Fiscal Officer/CFO

☐ Same As Organization Director/CEO

* Name: _____ * Title: _____

* Email: _____ * Telephone: _____

* Cell Phone: _____

Project Contact

☐ Same As Organization Director/CEO

* Name: _____ * Title: _____

* Email: _____ * Telephone: _____

* Cell Phone: _____

Project Information

* Project Title: _____

* Amount Requested: _____ * Project Length: ☐ 1 Year ☐ 2 Years

* Please indicate which counties your proposed project will serve: _____

Please identify the priority opioid abatement strategy/strategies from the grant announcement your project will address by indicating their identified letter and number below.

* Primary Opioid Abatement Strategy Addressed Letter: _____ Number: _____

Secondary Opioid Abatement Strategy Addressed Letter: _____ Number: _____

Project Narrative

Attach a project narrative no longer than 10 pages. You must indicate the question number above each of your responses and respond in the order provided below. You may not combine questions or refer to another section of the project narrative in your response. Submissions that do not include response to all questions and/or do not indicate questions numbers may not be considered.

- * 1. Provide a brief description of the applicant's history, mission, ownership, and organizational structure. Include any experience the organization has in providing the proposed project, employee turnover rate, and tenure of key leadership positions.
- * 2. Provide a brief project description, including a minimum of 3 project SMART (specific, measurable, achievable, relevant, and time bound) goals, desired outcomes (target), and vision for success.
- * 3. Identify any employee positions that will work on this project. If an employee is already employed by the organization, include a short description of their expertise to work on the proposed project.
- * 4. Describe the target population/focus of your project. How are the activities of the project with these populations aimed at addressing racial, ethnic, or other disparities?
- * 5. Describe the key activities of the project. Please include your organization's strategy for identification, outreach, and systems of distribution for the target population.
- * 6. Describe the procedures for direct consumer involvement in the project (if applicable). Including an explanation of:
 - a) How potential consumers will be informed about the program and consumer rights.
 - b) How meaningful participation of consumers will be incorporated into the development, evaluation, and ongoing modifications of the program.
- * 7. Provide a brief narrative presenting evidence the project can be sustained beyond the grant period.

Project Budget

Attach a completed Opioid Settlement Fund Budget Request form to this application.

Applicants must complete each tab of the Opioid Settlement Fund Budget Request form to be considered for an award.

Project SMART Goals

Attach a completed Opioid Settlement Fund Project SMART Goals form to this application.

Describe how you will assess progress towards the project's SMART (specific, measurable, achievable, relevant, and time bound) goals as identified in question #2 narrative. Identify specific metric(s) you will track to understand progress, emerging insights, and measures of success. Include any available baseline and/or industry standards (if available) and targets.

Extended Risk Assessment

The following documentation is required for proposed project budgets that are \$10,000 or more. Applications that do not include these documents and are \$10,000 or more may not be considered.

- ☐ Organizational Chart
- ☐ Strategic Plan
- ☐ Proof of Insurance
- ☐ Most Recent Audited Balance Sheet
- ☐ Description of your Organizational Internal Controls
- ☐ Documentation of Licensure (if applicable)

Certifications

I hereby certify the following:

- The funds applied for under this grant program are neither to supplant or replace existing federal or state funding.
- All information included and/or attached to this grant application is accurate and true to the best of my knowledge.

Signature of Organization Director/CEO

Date