2020-2021 OTDA MINI-GRA NT
GUIDELINES & APPLICATION

Organ and Tissue Donation Awareness Project
Lancaster-Lebanon Intermediate Unit 13
1020 New Holland Avenue, Lancaster, PA 17601
Phone: (717) 947-1616 Fax: (717) 606-1991
Email: karen_herr@iu13.org


Eligibility: All Pennsylvania secondary schools that are willing to implement the Organ and Tissue Donation Awareness Education Curriculum Framework in one or more 7th through 12th grade classrooms.

Project Period: September 2, 2020 through June 15, 2021

Grant Amount: Up to $1,500.00 for first time applicants
Up to $2,500.00 for second time applicants
Up to $1,200.00 for third time applicants

Number of Awards: Based upon number of application approved and requested amounts

Application Deadline: June 14, 2020

Description:
The Pennsylvania Department of Education has contracted with Lancaster-Lebanon Intermediate Unit 13 (IU13) to develop and implement an Organ and Tissue Donation Awareness (OTDA) Education Curriculum Framework in Pennsylvania secondary schools. The IU13 has conducted field research to inform this curriculum project and, with the help of collaborators, has developed the OTDA Curriculum Framework and Classroom Toolkit.

The primary purpose of the OTDA mini grant initiative is to ensure the broadest implementation of the curriculum framework possible. The curriculum framework is multidisciplinary in nature and could be piloted by secondary teachers in any academic discipline. There is no expectation that every classroom will pilot every facet of the curriculum framework, however, it is required that the proposed project is curricular in nature.

In order to be eligible for selection as a grantee under this competitive application, applicants
must agree to the following:

1. Participation in an on-site visit by project staff during the project period.
2. Participation in all participant conference calls (no more often than quarterly).

**Principles of Practice:**
The curriculum framework and classroom toolkit are first generation materials in the Department of Education’s efforts to educate secondary students about organ and tissue donation. As such, it is hoped that implementation sites will:

1. Contribute to the ongoing development of curriculum materials, and
2. Begin a substantive conversation related to organ and tissue donation awareness education in Pennsylvania, and
4. If fundraisers are implemented, that proceeds will be designated to the Governor Casey Trust Fund.

**Selection Criteria:**
Implementation sites will be selected based upon the following criteria:

<table>
<thead>
<tr>
<th>Selection Criteria:</th>
<th>Possible Points:</th>
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<tbody>
<tr>
<td>Checklist</td>
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<tr>
<td>• <strong>Description of how grant funds and the OTDA Curriculum Framework will be implemented</strong> into the existing curriculum and aligned with PA Academic Standards</td>
<td>3</td>
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<tr>
<td>• <strong>Sustainability</strong> – How will the school district ensure quality organ and tissue donation awareness education beyond this year (even without grant dollars)?</td>
<td>4</td>
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<td>• <strong>Total number of students</strong> who will be directly involved</td>
<td>2</td>
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<tr>
<td>• <strong>Reasonableness of budget</strong></td>
<td>3</td>
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<tr>
<td>• <strong>Overall quality</strong> of proposal.</td>
<td>3</td>
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</table>

**Total: 15**
**Application Instructions:**
The following instructions establish the basic parameters for the format and content of implementation site applications. All applications must follow these instructions in order to be eligible for review. **Applications may be submitted electronically or as hard copies by the June 15th deadline.** All applications are retained by Lancaster-Lebanon Intermediate Unit 13 and will not be returned to the applicant.

**Application Format:**
The application has five (5) parts:
- Application Cover Sheet
- Project Narrative
- Budget sheet
- Proposed Time Line
- Attachments (as needed)

**The Application Cover Sheet**
The OTDA Implementation Site Application Cover Sheet is included in this package.

**The Project Narrative**
1) Identify key staff by both role and name.

2) A complete description of how the OTDA Curriculum Framework will be implemented in the school. This section should include specifics about which school(s) will be involved in implementation, which classroom(s) will use the OTDA Curriculum Framework and toolkit, specifics of how and where requested equipment will be used, and the responsibilities of key staff during implementation. **While we encourage student-led activities and association, only curricular implementation will be considered eligible by the OTDA Education Project.**

3) A description of how the OTDA Curriculum Framework and toolkit will be integrated into existing academic content and used to support the PA Academic Standards.

4) A statement of plans for sustainability. How will the school district work to ensure that the organ and tissue donation awareness education continues to be implemented beyond the project year?

5) Statement of how many students will be directly involved in classroom activities and school-based events related to the OTDA Project.

6) In an effort to expand our program, please include the name and contact information (email, school address, and phone) for a fellow educator in a neighboring District.
The Budget Sheet
The OTDA Implementation Site Application Budget Form is included in this packet.
When off-site professional development participation is required, the OTDA Project will pay
for food and lodging; school districts will be required to provide for travel and substitute
coverage; however, this need can be accounted for in the budget planning and included in
the grant application.

Applications in which the total grant funds requested exceed $4,000 or in which the
total equipment budget exceeds $1,500 or 40% of the total budget (whichever is less)
will be judged ineligible.

Mandatory participation in the OTDA Institute for Educators:
● Room and Board are provided free of charge
● Mileage can be reimbursed at a round trip rate for mileage from your local campus
to Educators Institute venue site using the state rate per program year (e.g. 2020-
2021 = $0.545/mile). This should be itemized in the travel lines of the budget and
included in your grant application.
● Substitute coverage x 2 days per teacher can be written into the proposed budget
under staff/personnel costs.

Proposed Timeline Sheet
The OTDA Proposed Timeline Sheet is included in this packet. Please complete this sheet by
including specific events and/or activities that your school will be doing as part of the grant.
These dates may change as the school year progresses, but please submit a proposed list of
the activities and the approximate dates they will occur during the school year.

Attachments
Attachments must be limited to 10 single-sided pages. Attachments are not required, but may
include key staff resumes, or supporting documentation that would assist project staff in
considering your application.

Submit all applications by June 15, 2020 to:
Lancaster-Lebanon Intermediate Unit 13
Attn: Karen Herr
1020 New Holland Avenue
Lancaster, PA 17601
or email: karen_herr@iu13.org

NONDISCRIMINATION POLICY
It is the policy of the Lancaster-Lebanon Intermediate Unit not to discriminate on the basis of sex, disability, age,
race, color and national origin in its education programs, activities or employment as required by the Title IX,
Section 504, and Title VI, and the Americans with Disabilities Act of 1990.

The Lancaster-Lebanon Intermediate Unit will take steps to assure that lack of English language skills will not be
a barrier to admission or participation in all educational programs. Further assurance is given that services,
activities and facilities are accessible to and usable by persons with disabilities.
Application Cover Sheet
Organ and Tissue Donation Awareness Project
Implementation Site Application: 2020-2021

School District __________________________________________________________

Has your School District received an OTDA mini-grant in the past?   YES   NO

If yes, which school years? ____________________________________________

Contact Person (s) __________________________ Email________________________
________________________ Email________________________

Telephone (best phone to use to call contact person) _____________________________

School Mailing Address:
______________________________________________________________________-
______________________________________________________________________-

This is to certify that all information contained herein is accurate, complete, and current.

_______________________________________               __________________________
Signature of School Superintendent        Date

_____________________________________
Print or type name of Superintendent
The Project Narrative

Please answer the following 6 items (no more than 1-2 pages per item):

1) **Key staff** identified by both role and name.

2) **A complete description of how the OTDA Curriculum Framework will be implemented within your school district.** This section should include specifics about which school(s) will be involved in implementation, which classroom(s) will implement the OTDA Curriculum Framework and toolkit, specifics of how and where requested equipment will be used, and the responsibilities of key staff during implementation.

3) A description of how the OTDA Curriculum Framework and toolkit will be integrated into existing academic content and used to support the PA Academic Standards.

4) A statement of plans for sustainability. How will the school district work to ensure that the OTDA education continues to be implemented beyond the project year (even without grant dollars)?

5) Statement of **how many students** will be directly involved in classroom activities and school-based events related to the OTDA Education Project.

6) In an effort to expand our program, please include the **name and contact information (email, school address, and phone) for a fellow educator in a neighboring District.**
Budget Form Application (Use this sheet or create your own)

School District: ____________________________________________  School Year: ________________

<table>
<thead>
<tr>
<th>Expenses (List Specifics)</th>
<th>Funds Requested</th>
<th>In-kind $</th>
<th>TOTAL</th>
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<tr>
<td>Personnel Costs</td>
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<td>Travel</td>
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<td>Supplies</td>
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<td>Communications</td>
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<td>Equipment*</td>
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<td>Contracted Services</td>
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<td>Other Costs</td>
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<td><strong>TOTAL COSTS</strong></td>
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*Note: Equipment may not exceed $1,500 or 40% of the total budget (whichever is less)
**Proposed Timeline for Implementation of Activities**

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<tr>
<th>Activity/Event Description</th>
<th>Month or Quarter</th>
<th>Personnel Responsible</th>
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