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**APPLICATION FOR SELF-ADVOCATE SCHOLARSHIP FUNDING**

***-Funding Requests limited to $2,000 per applicant organization-***

**Submission Date:**

**Amount of Funds Requested:**  **$**

**Organization Information:**

1. **Organization Name:**
2. **Organization Contact:**

 E-Mail:       Phone No:

1. **Purpose/Role of Organization:**
2. **Organization Type (click on field to select):** Choose an item.

**Event Information:**

1. **Event Title:**
2. **Event Date(s):**
3. **Event Host(s):**
4. **Event Location:**
5. **Event Description** (include purpose & goals of event/conference, intended participants, attach agenda, if available):

 **Description of budget request and funding associated with each line item:**

|  |  |
| --- | --- |
| **Description of Budget Item****(travel, accommodation, meal, registration, etc.)** | **Funding Amount Requested per Budget Item ($)** |
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**Self-Advocate Information:**

1. **Will all scholarship recipients have a developmental disability (DD)?** YES [ ]  NO [ ]
2. **Total number of self-advocates with DD supported by funding request:**

**Impact Information:**

1. **Describe how the event will support self-advocates with DD:**
2. **Do you agree to administer surveys to the participating self-advocates with DD, using relevant survey questions listed in the “Event Support Procedures” document?**

YES [ ]  NO [ ]

1. **Please note any participant survey questions that you anticipate adding to, or removing from, the list in the “Event Support Procedures” document because of the nature of this particular event:**

**Identification of State Plan Objective Addressed:**

1. **State a specific Board** [**State Plan objective**](https://vbpd.virginia.gov/about/publications/state-plan/) **and describe how the event will support the objective:**

**Actual/Potential Event Supporters:**

1. **Identify other organizations supporting the event or to whom you have submitted a request for support:**

**Demonstration of Cultural Diversity:**

1. **Describe how your organization currently embraces cultural diversity and how the scholarship funding you receive will exemplify this. Include in the description how the particular event/conference attended by the self-advocate(s) will ensure meaningful diversity, and be inclusive of an individual’s race, sex, color, national origin, religion, sexual orientation, gender identity, age, political affiliation, disability, and veteran status.**

Completed applications should be emailed to the Board’s Grants Manager at jason.withers@vbpd.virginia.gov and must be received by the deadlines listed in the [procedures](https://vbpd.virginia.gov/wp-content/uploads/2024/03/Event-Support-Procedures-Final-Draft-3.13.24-2.pdf) document.

*Please note that LATE applications will not be considered for review.*