## **CHANCELLOR INFORMATIONAL ITEMS**

January 14, 2020

INFORMATION ONLY: Grant Applications and Awards for Information

Board Policy 6024 requires the reporting of grant awards and applications to the Board as information, if they do not have a state maintenance of effort or future fiscal responsibility.

## Chadron State Application

• Rural Behavioral Health Webinar (Behavioral Health Education Center of Nebraska [BHECN]) -- \$10,000

## **ATTACHMENTS:**

• CSC Grant Application-Rural Behavioral Webinar (PDF)

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## NOTICE OF INTENT TO APPLY FOR, OR TO ACCEPT, AWARDS OF NON-STATE CONTRACTS OR GRANTS

College: Chadron State College		Date: January 14, 2020		
Notice of Intent	Application: X	Accept Award:		
Name of Program: Rural Behavioral Health Webinar				
Funding Source: Behavioral Health Ed Also indicate if the source is federal, s	ducation Center of Nebraska (BHECN) state or private: State			
Is this grant a <b>Sub-Award</b> ?			Yes: X	No:
If a sub-award, indicate the agency the sub-award is through: University of Nebraska Medical Center				
Amount Requested: \$10,000.00	Amount Awarded:	Funding Period: 10/1/2019 to 8/31/2020 Please indicate specific dates for the grant.		
Closing Date for Application Submission: September 20, 2019				
When reporting Grant Award Has Grant Application been approved/reviewed by the Board? No		Date Appr	ate Approved/Reviewed:	
Does this grant include <b>Indirect Cost Funds</b> for the College's use?			Yes:	No: X
If yes, indicate dollar amount and/or percentage rate allowed:				
Will this grant require State Matching Funds?			Yes:	No: X
If yes, indicate dollar amount and specific uses of funds (i.e., salaries, honorariums, travel, office supplies, phone, postage, space rental, equipment, etc.):				
Will this grant require In-Kind Support?			Yes:	No: X
If yes, describe briefly (i.e., faculty release time, support personnel, use of office space, telephone, office supplies, etc.):				
Is State Maintenance of Effort or Future Fiscal Responsibility required?			Yes:	No: X
If yes, describe briefly				
Are there restrictions imposed by regulation on claiming indirect costs?			Yes:	No:
How many FTE positions will the grant fund?			FTE: 0	
How many of these are new positions?			New FTE:	
Briefly describe the purpose(s) of this application/award: This project proposes completing three webinars based on rural behavioral health practice. Once completed, the webinar will be housed on the BHECN website and behavioral health providers will be able to view them for continuing education credit.				
Is this grant a continuation of a previous/existing grant?			Yes:	No: X
If a continuation grant, describe the previous grant in terms of amount, funding period, and any differences in program:				
Has this grant application been previously denied?			Yes:	No: X
If yes, please state the reason:				
Person responsible for the preparation of the application: Dr. Tara Wilson				
Administrator responsible for approving the application: Dr. Randy Rhine				