

BOARD OF TRUSTEES OF THE NEBRASKA STATE COLLEGES
ITEMS FOR DISCUSSION AND ACTION\FISCAL, FACILITIES AND AUDIT

ACTION: **Approve Grant Application and Awards**

The following grants have maintenance of effort or matching fund expectations which required Board approval under Policy 6704. When the applications for these grants are submitted to the funding agency and Board approval is not possible due to the timing of the application window, the Colleges request approval from the Chancellor to move forward with the application when matching funds are included. The Chancellor reviewed the grant applications before submission and recommends approval by the Board of Trustees. The specific match obligations for each of these three grants are provided below:

WSC - NCAA Strategic Alliance Matching Grant - 25% matching in year one (\$19,209), 50% in year two (\$36,854), 75% in year three (\$55,365) and then 100% in year four (\$75,606) and in year five (\$77,270).

WSC - Nebraska Business Development Center Grant - The institution is providing a match of \$21,362 and waiving their 24% in direct costs at a value of \$22,647.

NSCS - State and Local Cybersecurity Grant Program - Matching fund of 10% of the total award, which is \$20,000 for the State College System for the \$200,000 requested. The complete grant request is for \$640,000 to support additional activity at the Community Colleges and University System, and those institutions are responsible for their portion of the match.

The System Office recommends approval of the Approve Grant Application and Awards.

ATTACHMENTS:

- WSC Grant Accept NCAA Strategic Alliance Matching Grant (PDF)
- WSC Grant Accept NBDC 2023 (PDF)
- NSCS Grant Application SLCGP - CLP (PDF)

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

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| College: Wayne State College | | Date: 6/15/23 |
| Notice of Intent | Application: | Accept Award: X |
| Name of Program: NCAA Strategic Alliance Matching Grant | | |
| Funding Source: NCAA Also indicate if the source is federal, state or private: Private | | |
| Is this grant a Sub-Award ? | Yes: | No: X |
| If a sub-award, indicate the agency the sub-award is through: | | |
| Amount Requested: \$112,435 | Amount Awarded: \$112,435 | Funding Period: 7/1/2023 – 6/30/2026 |
| Closing Date for Application Submission: January 31, 2023 | | |
| When reporting Grant Award-- Has Grant Application been approved/reviewed by the Board? Initial Approval was received from Chancellor January 27, 2023. | | Date Approved/Reviewed: |
| Does this grant include Indirect Cost Funds 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: X | No: |
| If yes, indicate dollar amount and specific uses of funds (i.e., salaries, honorariums, travel, office supplies, phone, postage, space rental, equipment, etc.): Salary and benefits paid by WSC: Year 1: 25%; Year 2: 50%; Year 3: 75%; Year 4: 100%; Year 5: 100% WSC is required to hold position for a total of 5 years. | | |
| Will this grant require In-Kind Support ? | Yes: X | No: |
| If yes, describe briefly (i.e., faculty release time, support personnel, use of office space, telephone, office supplies, etc.): Office space, telephone, office supplies, professional development stipend \$3,000 per year | | |
| Is State Maintenance of Effort or Future Fiscal Responsibility required? | Yes: X | No: |
| If yes, describe briefly. WSC is obligated to fulfill sixty (60) months of the proposal within six years (72 months). | | |
| Are there restrictions imposed by regulation on claiming indirect costs? | Yes: | No: X |
| How many FTE positions will the grant fund? | FTE: 1.0 | |
| How many of these are new positions? | New FTE: 1.0 | |
| Briefly describe the purpose(s) of this application/award: The athletics department is creating a position for Assistant Director for Athletics Compliance. | | |
| Is this grant a continuation of a previous/existing grant? | Yes: X | No: |
| If a continuation grant, describe the previous grant in terms of amount, funding period, and any differences in program: NCAA Women's and Minorities Internship Grant for 2022-23, one year grant \$30,000 | | |
| Has this grant application been previously denied? | Yes: | No: X |
| If yes, please state the reason: | | |
| Person responsible for the preparation of the application: Mike Powicki, Director of Athletics | | |
| Administrator responsible for approving the application: Marysz Rames, President | | |

NOTICE OF INTENT TO APPLY FOR, OR TO ACCEPT, AWARDS OF NON-STATE CONTRACTS OR GRANTS ITEM: 4.20
MEETING DATE: June 15, 2023

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| College: Wayne State College | | Date: June 15, 2023 |
| Notice of Intent | Application: | Accept Award: X |
| Name of Program: Nebraska Business Development Center | | |
| Funding Source: U.S. Small Business Administration Also indicate if the source is federal, state or private: Federal | | |
| Is this grant a Sub-Award ? | | Yes: X No: |
| If a sub-award, indicate the agency the sub-award is through: University of Nebraska at Omaha | | |
| Amount Requested: \$73,000 | Amount Awarded: \$73,000 | Funding Period: 01/01/23-12/31/23 Please indicate specific dates for the grant. |
| Closing Date for Application Submission: | | |
| When reporting Grant Award-- Has Grant Application been approved/reviewed by the Board? Yes | | Date Approved/Reviewed: 3/23/23 |
| Does this grant include Indirect Cost Funds 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: X No: |
| If yes, indicate dollar amount and specific uses of funds (i.e., salaries, honorariums, travel, office supplies, phone, postage, space rental, equipment, etc.): Matching funds of \$21,362 includes a portion of salary and benefits of the director as well as communications, supplies and travel expenses. | | |
| Will this grant require In-Kind Support ? | | Yes: X No: |
| If yes, describe briefly (i.e., faculty release time, support personnel, use of office space, telephone, office supplies, etc.): \$22,647 In-Kind support includes the College's indirect cost rate of 24% with the U.S. Small Business Administration. | | |
| 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: X |
| How many FTE positions will the grant fund? | | FTE: 0.91 |
| How many of these are new positions? | | New FTE: 0.00 |
| Briefly describe the purpose(s) of this application/award: This proposed sub agreement with the University of Nebraska-Omaha would provide funding to continue the operation of a regional center of the Nebraska Business Development Center at Wayne State College. It would provide partial funding for salary and benefit costs of the director. | | |
| 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: While not technically a continuation, this subcontract would continue to fund the Nebraska Business Development Center at Wayne as it has for a number of years. | | |
| Has this grant application been previously denied? | | Yes: No: X |
| If yes, please state the reason: | | |
| Person responsible for the preparation of the application: Mr. Loren Kucera, Director of Nebraska Business Development Center | | |
| Administrator responsible for approving the application: Steven Elliott, Vice President Academic Affairs | | |

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| College: System Office, CSC, PSC, WSC | | Date: 6/2/2023 |
| Notice of Intent: 4/1/2023 | Application: 4/29/2023 | Accept Award: |
| Name of Program: State and Local Cybersecurity Grant Program | | |
| Funding Source: Cybersecurity & Infrastructure Security Agency (CISA) / Federal Emergency Management Agency (FEMA) Also indicate if the source is federal, state or private: Federal | | |
| Is this grant a Sub-Award ? | | Yes: X No: |
| If a sub-award, indicate the agency the sub-award is through: Nebraska Emergency Management Agency (NEMA) and State and Local Cybersecurity Grant Program (CLCGP) | | |
| Amount Requested: All Nebraska Public Higher Education Institutions jointly applied for a total of \$640,000. The NSCS portion is \$200,000. | Amount Awarded: Pending | Funding Period: 7/1/2023 – 6/30/2025 Please indicate specific dates for the grant. |
| Closing Date for Application Submission: 4/30/2023 | | |
| When reporting Grant Award-- Has Grant Application been approved/reviewed by the Board? | | Date Approved/Reviewed: Pending |
| Does this grant include Indirect Cost Funds 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: X No: |
| If yes, indicate dollar amount and specific uses of funds (i.e., salaries, honorariums, travel, office supplies, phone, postage, space rental, equipment, etc.): 10% the first year, 20% the second year | | |
| 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: X |
| How many FTE positions will the grant fund? | | FTE: 0 |
| How many of these are new positions? | | New FTE: 0 |
| Briefly describe the purpose(s) of this application/award: To assess cybersecurity gaps and develop a Plan of Action (PoA) to address the gaps to overall improve the cybersecurity posture of NSCS. | | |
| 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: | | |
| Administrator responsible for approving the application: | | |