DIRECTORY OF
DEPARTMENT OF HEALTH
GRANT PROGRAMS
FOR THE
2014 - 2015 FISCAL YEAR

FEBRUARY 2014

Prepared by:
Office of Financial Services

Chris Christie
Governor

Kim Guadagno
Lt. Governor

Mary E. O’Dowd, M.P.H.
Commissioner
TO ALL INTERESTED PARTIES:

The Department of Health is pleased to provide the enclosed Directory of Grant Programs for the State Fiscal Year 2015. This directory provides a comprehensive listing of grant funds available from the Department. If additional grant funds become available during the year, notice of these funds will be posted on the Department’s internet web site as an addendum to this Directory and can be found at [http://www.state.nj.us/health/grants/directory.shtml](http://www.state.nj.us/health/grants/directory.shtml).

The Department of Health awards grants from State appropriations, federal awards, and other funding sources. Since the award and appropriations of these funds do not always conform to the State Fiscal Year, the information included in this directory is based on the anticipated grant programs that will become available during the period July 1, 2014 through June 30, 2015.

The directory is divided into separate programs, which provide specific services through grant awards. Many programs are funded jointly by State, federal and other funds. The information identified in the directory is without reference to the source of funding.

There are certain funds awarded within the grant category that have been excluded from this directory. They represent formula grants which, by law, are distributed to specific agencies (i.e., counties and municipalities); special legislation to provide funding to a specific agency; and disbursement of funds by other than grants awards. Please contact the Grants Management and Review Program at 609-633-7809 to provide additional information on these programs or by fax at 609-633-1705.

To receive additional copies of this directory, please contact the Grants Management and Review Program. Copies can be downloaded from Department’s web site at [www.state.nj.us/health/grant/index.shtml](http://www.state.nj.us/health/grant/index.shtml).

Sincerely,

Mary E. O'Dowd, M.P.H.
Commissioner

Enclosure
This publication may be viewed and printed through the Internet:

http://www.state.nj.us/health/grants/index.shtml
# TABLE OF CONTENTS

## HIV/AIDS, STD AND TB SERVICES

<table>
<thead>
<tr>
<th>Service</th>
<th>Page No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Behavioral Surveillance</td>
<td>1</td>
</tr>
<tr>
<td>Care and Treatment</td>
<td>2</td>
</tr>
<tr>
<td>HIV Prevention Services - Federal</td>
<td>3</td>
</tr>
<tr>
<td>HIV Prevention Services - State</td>
<td>4</td>
</tr>
<tr>
<td>Ryan White Part B</td>
<td>5</td>
</tr>
<tr>
<td>Sexually Transmitted Disease Services</td>
<td>6</td>
</tr>
<tr>
<td>Tuberculosis Services</td>
<td></td>
</tr>
<tr>
<td>Case Management Assistance</td>
<td>7</td>
</tr>
<tr>
<td>Regional TB Specialty Clinic Services</td>
<td>8</td>
</tr>
</tbody>
</table>

## CANCER CONTROL AND TOBACCO PREVENTION SERVICES

<table>
<thead>
<tr>
<th>Service</th>
<th>Page No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commission on Cancer Research</td>
<td>9</td>
</tr>
<tr>
<td>Implementation of New Jersey Comprehensive Cancer Control Plan</td>
<td>10</td>
</tr>
<tr>
<td>Tobacco Control Prevention Interventions</td>
<td>11</td>
</tr>
</tbody>
</table>

## CHRONIC DISEASE AND PREVENTION

<table>
<thead>
<tr>
<th>Service</th>
<th>Page No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chronic Renal Services</td>
<td>12</td>
</tr>
<tr>
<td>Coordinated Integrated Initiative</td>
<td>13-14</td>
</tr>
<tr>
<td>Diabetes Prevention &amp; Control</td>
<td>15</td>
</tr>
<tr>
<td>Huntington’s Disease Services</td>
<td>16</td>
</tr>
<tr>
<td>New Jersey Cancer Education and Early Detection</td>
<td>17</td>
</tr>
<tr>
<td>New Jersey Heart Disease and Stroke Program</td>
<td>18</td>
</tr>
<tr>
<td>Pediatric Adult Asthma Coalition Program</td>
<td>19</td>
</tr>
<tr>
<td>Pharmaceutical Services for Adults with Cystic Fibrosis</td>
<td>20</td>
</tr>
</tbody>
</table>

## COMMISSION ON BRAIN INJURY RESEARCH

<table>
<thead>
<tr>
<th>Service</th>
<th>Page No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual Research Projects</td>
<td>21-22</td>
</tr>
<tr>
<td>Multi-Investigator Research</td>
<td>23-24</td>
</tr>
<tr>
<td>Pilot Research Projects</td>
<td>25-26</td>
</tr>
<tr>
<td>Postdoctoral and Graduate Student Fellowship</td>
<td>27-28</td>
</tr>
</tbody>
</table>
### TABLE OF CONTENTS

**COMMISSION ON SPINAL CORD RESEARCH**

- Exploratory Research Grant ........................................................................................................ 29-30
- Postdoctoral and Graduate Student Fellowships ..................................................................... 31-32
- Research Grant .......................................................................................................................... 33-34
- SCI Techniques Training Travel .............................................................................................. 35-36

**EPIDEMIOLOGY, ENVIRONMENTAL AND OCCUPATIONAL HEALTH SERVICES**

- Health Programs for Refugees ................................................................................................. 37
- Indoor Tanning Safety ................................................................................................................ 38
- Special Program to Increase Immunization Levels ................................................................. 39

**GOVERNOR’S COUNCIL ON AUTISM**

- Clinical Autism Programs ....................................................................................................... 40-41

**MATERNAL, CHILD AND COMMUNITY HEALTH SERVICES**

- Abstinence Education Program .................................................................................................. 42
- Adolescent Health Services ....................................................................................................... 43
- Child Health ................................................................................................................................ 44
- Children’s Oral Health ............................................................................................................... 45
- Family Planning ......................................................................................................................... 46
- Fetal Alcohol Syndrome Prevention ........................................................................................... 47
- Outreach and Education ............................................................................................................. 48
- Personal Responsibility Education Program ................................................................................ 49
- Tourette Syndrome .................................................................................................................... 50

**MINORITY AND MULTICULTURAL HEALTH**

- Community Health Disparities Prevention Program ................................................................. 51
- Chronic Disease-Self Management ............................................................................................ 52
# TABLE OF CONTENTS

## PRIMARY CARE SERVICES

- Federally Qualified Health Centers Expansion Program ............................................................... 53
- Primary Care Cooperative Agreement ........................................................................................... 54
- Rural Health Program..................................................................................................................... 55

## PUBLIC HEALTH INFRASTRUCTURE  PREPAREDNESS AND EMERGENCY RESPONSE

- EMS Task Force – Medical Coordination Centers..................................................................... 56
- New Jersey Poison Information and Education System............................................................... 57-58
- Healthcare Emergency Preparedness – MCC.............................................................................. 59
- Public Health Emergency Preparedness – LHD............................................................................ 60
- Public Health Emergency Preparedness – LINCS........................................................................ 61

## SPECIAL CHILD AND EARLY INTERVENTION HEALTH SERVICES

- Case Management Services........................................................................................................... 62
- Child Evaluation Centers............................................................................................................... 63
- Early Intervention System............................................................................................................. 64
- Hemophilia Services...................................................................................................................... 65
- HIV Family Centered Care Network............................................................................................. 66
- Newborn Screening and Genetic Services .................................................................................... 67
- Pediatric Tertiary Services ........................................................................................................... 68

## SUPPLEMENTAL NUTRITION SERVICES FOR WOMEN, INFANTS AND CHILDREN (WIC)

- Supplemental Nutrition Services for Women, Infants and Children............................................ 69
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Behavioral Surveillance

STATUTORY AUTHORITY:
New Jersey Statute 26:5 C-1 et seq.

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To conduct behavioral surveillance in the Newark Metropolitan Statistical Area. Persons identified at high-risk for HIV will be surveyed to assess sexual and drug use history, testing experience and the use of prevention services. The data will help to enhance prevention planning.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Grant amount to $160,000. Award begins on July 1, 2014 through June 30, 2015 and will be made for a 12-month budget period. Funding estimates vary and are subject to the Annual Appropriations Act. Grant is contingent upon receipt of state funding.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Universities, hospitals, non-profit corporations, state agencies, local governments and community-based organizations.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Knowledge of HIV/AIDS in at risk populations. Proven ability to implement and follow epidemiologic study methodologies and CDC protocols in community-based agencies, shelters, drug treatment centers and neighborhood social venues. Appropriate professional licenses and compliance with appropriate regulations.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.
Submission of a concept paper may or may not be required. If required, the concept paper must include delineated goals and objectives and tentative budget.
Contact information below.

FOR INFORMATION CONTACT:
Barbara Bolden, Ph.D., Epidemiologic Services
New Jersey Department of Health
Division of HIV/AIDS Services
P.O. Box 363
Trenton, NJ 08625-0363
TELEPHONE: (609) 984-5940
FAX: (609) 633-2791
E-MAIL: barbara.bolden@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Varies by grant; usually four (4) months prior to funding.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Varies by grant; usually two (2) months prior to funding.
## NOTICE OF GRANT AVAILABILITY

**NAME OF GRANT PROGRAM:**
Care and Treatment

**GRANT PROGRAM NO.:** 15-11-AIDS

**STATUTORY AUTHORITY:**
New Jersey Statute 26:5 C-1 et seq.

**TYPE OF AWARDS TO BE ISSUED:**
Cost-reimbursement Grants and Letters of Agreement

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**PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:**
To develop a coordinated continuum of care for individuals with HIV/AIDS and their families. Specific activities include: medical and nursing care, dental, outreach, case management, housing and support services.

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**AMOUNT OF MONEY IN THE GRANT PROGRAM:**
Approximately $9,000,000 will be available in FY 2015 to begin on or about July 1, 2014 and will be made for a 12-month budget period. Funding estimates may vary and are subject to the Annual Appropriations Act. Grant is contingent upon receipt of state funding.

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**ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:**
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

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**GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:**
Local government agencies, state agencies, private non-profit corporations, hospitals, local health departments, municipalities, federally qualified health care centers, and community-based agencies.

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**QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:**
Experience with the provision of community health and social services. Experience with HIV/AIDS and/or affected populations. Appropriate professional licenses and compliance with appropriate regulations.

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**APPLICATION PROCEDURES:**
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: [www.sage.nj.gov](http://www.sage.nj.gov). The Request for Applications (RFA) can be obtained by writing or calling the office listed below. Submission of a concept paper may or may not be required. If required, the concept paper must include delineated goals and objectives and tentative budget.

Contact information below.

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**Sindy M. Paul, MD, MPH, FACPM**
New Jersey Department of Health
Division of HIV/AIDS Services
P.O. Box 363
Trenton, NJ 08625-0363

**TELEPHONE:** (609) 984-6328
**FAX:** (609) 292-4244
**E-MAIL:** sindy.paul@doh.state.nj.us

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**DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:**
Varies by grant. Information will be included in the Request for Application (RFA). Concept papers will be accepted throughout the year.

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**DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:**
Applicant will be notified within one month of the beginning of the project period.
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
HIV Prevention Services

STATUTORY AUTHORITY:  TYPE OF AWARDS TO BE ISSUED:
Sec. 301 (A) 317 PHS Act as Amended (Federal)  Cost-reimbursement Grants

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To provide people living with HIV or at increased risk of HIV-infection, with HIV prevention services, including information, education and referral; outreach; social networking strategies; HIV counseling and testing with referral to care and support services; social marketing; and evidence-based interventions delivered to individuals and/or groups. Priority populations include people living with HIV/AIDS; men who have sex with men (MSM); injecting drug users; and women and adolescents at high of acquiring HIV infection and their sexual partners.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Approximately $10,000,000 should be available in State Fiscal Year 2015 to fund 17 to 28 awards. Grants range from approximately $30,000 to $750,000. Awards will begin on or about January 1, 2015, and will be made for a 12-month budget period. Funding estimates may vary and are subject to the Annual Appropriation Act. Continuation awards within an approved budget period will be based on satisfactory progress and availability of funds. Applicants currently receiving grants for this activity and have performed satisfactorily will be given first priority for continued funding.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Local government agencies, state agencies, private non-profit corporations, hospitals, local health departments, municipalities, and community-based agencies.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Varies by grant, but at a minimum, must have prior experience of at least three years in the successful, documented delivery of the HIV prevention services for which the applicant applies.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.
Submission of a concept paper may or may not be required. If required, the concept paper must include delineated goals and objectives and tentative budget. Contact Information below.

FOR INFORMATION CONTACT:
Steven Saunders, MS, Director, Prevention Unit
New Jersey Department of Health
Division of HIV/AIDS Services
P.O. Box 363
Trenton, NJ 08625-0363
TELEPHONE: (609) 984-6050
FAX: (609) 292-6009
E-MAIL: errol.saunders@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Varies by grant; usually four (4) months prior to funding.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:Varies by grant; usually two (2) months prior to funding.
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
HIV Prevention Services

GRANT PROGRAM NO. 15-15-AIDS

STATUTORY AUTHORITY: New Jersey Statute 26:5 C-1 et seq.

TYPE OF AWARDS TO BE ISSUED: Cost-reimbursement Grants

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To provide people living with HIV or at increased risk of HIV-infection, with HIV prevention services, including information, education and referral; outreach; social networking strategies; HIV counseling and testing with referral to care and support services; social marketing; and evidence-based interventions delivered to individuals and/or groups. Priority populations include people living with HIV/AIDS; men who have sex with men (MSM); injecting drug users; and women and adolescents at high risk of acquiring HIV infection and their sexual partners.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Approximately $10,000,000 is available in SFY2015 to fund ten to fifteen awards. Grants range from approximately $50,000 to $750,000. Awards will begin on or about July 1, 2014, and will be made for a 12-month budget period. Funding estimates may vary and are subject to the Annual Appropriation Act. Continuation awards within an approved budget period will be made based on satisfactory progress and availability of funds. Applicants currently receiving grants for this activity and which have performed satisfactorily will be given first priority for continued funding.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Local government agencies, state agencies, private non-profit corporations, hospitals, local health departments, municipalities, and community-based agencies.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Varies by grant, but at a minimum, must have prior experience of at least three years in the successful, documented delivery of the HIV prevention services for which the applicant applies.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below. Submission of a concept paper may or may not be required. If required, the concept paper must include delineated goals and objectives and tentative budget.

Contact Information below.

FOR INFORMATION CONTACT:
Steven Saunders, MS, Director, Prevention Unit
New Jersey Department of Health
Division of HIV/AIDS Services
P.O. Box 363
Trenton, NJ 08625-0363

TELEPHONE: (609) 984-6050
FAX: (609) 292-6009
E-MAIL: errol.saunders@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Varies by grant; usually four (4) months prior to funding.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Varies by grant; usually two (2) months prior to funding.
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Ryan White Part B

STATUTORY AUTHORITY:    GRANT PROGRAM NO. 15-20-AIDS
Public Health Service Act Cost-reimbursement Grant
Public Law 101-380

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To develop a coordinated continuum of care for individuals with HIV and their families through the funding of HIV-related health care and support service programs to marginalized populations. Services eligible to be funded include outpatient ambulatory/medical care, medical case management, mental health, oral health, outpatient substance abuse treatment, medical nutrition therapy, housing, legal, medical transportation, psychosocial support, treatment adherence, residential substance abuse treatment, outreach and Minority AIDS Initiative.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Approximately $8,558,983 will be available in FY 2015 to begin on or about April 1, 2015 and will be made for a 12-month budget period. Funds are contingent upon a Federal appropriation for the Ryan White Treatment Modernization Act to the Department of Health. Contact the person identified below to determine if funds have been awarded, and to receive further information. Grant is contingent upon receipt of federal and/or state funding.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Local government agencies, state agencies, private non-profit corporations, hospitals, local health departments, municipalities, federally qualified health care centers, and community-based agencies.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Experience with the provision of community health and social services. The past two years of experience providing services to those infected with HIV/AIDS. Appropriate professional licenses and compliance with appropriate regulations.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Applications can be obtained by writing or calling the office listed below. Submission of a concept paper may or may not be required. If required, the concept paper must include delineated goals and objectives and tentative budget. Contact information below.

FOR INFORMATION CONTACT:
Sindy M. Paul, MD, MPH, FACPM
New Jersey Department of Health
Division of HIV, STD and TB Services
P.O. Box 363
Trenton, New Jersey 08625-0363
TELEPHONE: (609) 984-6191
FAX: (609) 633-2494
E-MAIL: sindy.paul@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Deadline will be posted in the Department’s System for Administering Grant Electronically (SAGE). Concept papers will be accepted throughout the year.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Applicant will be notified approximately one month prior to the project period.
## NOTICE OF GRANT AVAILABILITY

### NAME OF GRANT PROGRAM:
Sexually Transmitted Disease

### GRANT PROGRAM NO.
15-36-STD

### TYPE OF AWARDS TO BE ISSUED:
Cost-reimbursement Grants

### STATUTORY AUTHORITY:
State Appropriation Act (Pblc. Lw. 1994, Chptr. 67)

### PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To augment existing Sexually Transmitted Disease services, such as improved diagnostic functions and to perform intervention, outreach, educational and prevention activities.

### AMOUNT OF MONEY IN THE GRANT PROGRAM:
Approximately $700,000 should be available in State Fiscal Year 2015 to fund several awards. Awards will be made for a twelve-month period beginning July 1, 2014 or January 1, 2015. Funding estimates may vary and are subject to state and federal appropriations. Applicants currently receiving grants for these activities and have performed satisfactorily will be given priority for continued funding.

### ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

### GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Applicants are accepted from local health departments, hospital-based clinics, CBO’s and Health Centers.

### QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
The agency must have the ability to provide individual services to a minimum of 100 clients per month.

### APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: [www.sage.nj.gov](http://www.sage.nj.gov). The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

### FOR INFORMATION CONTACT:
Program Manager, STD Program
New Jersey Department of Health
Division of HIV, STD & TB Services, Post Office Box 363
Trenton, NJ 08625-0363

**TELEPHONE:** (609) 826-4869  
**FAX:** 609-826-4870  
**E-MAIL:** Patricia.Mason@doh.state.nj.us

### DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Varies. Information will be included in formal request for application

### DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Usually one month prior to funding period.
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
TB Prevention and Control
Case Management Assistance and Ambulatory Care

GRANT PROGRAM NO. 15-28-TB

STATUTORY AUTHORITY:
Public Health Services Act, Section 301(A)

TYPE OF AWARDS TO BE ISSUED:
Cost-reimbursement Grants

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To provide assistance with basic needs (housing, food, utilities, clothing, etc.) for TB cases and suspects statewide to remove significant barriers to care and improve performance against stated objectives related to completion of treatment in difficult to manage patient populations.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Approximately $1,200,000.00 will be available for the CY2015 health service grant.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Non-profit, non-governmental organizations with proven experience in the management of patient incentive programs.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
The willingness and ability to establish and maintain a network of housing providers and provide other assistance as needed to a diverse and under-privileged patient population throughout New Jersey. Maintain effective accounting and control of a complex incentive program.

The service area of each Regional TB Specialty Clinic seeking funding, during the three previous calendar years, either be (1) a county with an average of 45 verified TB cases (2) serve a multi-county area with an average of 45 or more verified TB cases or (3) be a previous grantee.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
Acting Program Manager, TB Program
New Jersey Department of Health
Post Office Box 363
Trenton, NJ 08625-0363
TELEPHONE: (609) 826-4878
FAX: 609-826-4879
E-MAIL: Frank Romano@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Applications should be submitted by October 15, 2014 for funding beginning January 1, 2015 for a 12 month period.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
If the application is received as indicated above, applicant will be notified of award by December 1, 2014.
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
TB Prevention and Control
Regional TB Specialty Clinic Services

GRANT PROGRAM NO. 15-37-TB

STATUTORY AUTHORITY:
Public Health Services Act, Section 301(A)
State Appropriations Act, Section 317

TYPE OF AWARDS TO BE ISSUED:
Cost Reimbursement Grants

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To provide clinical care, treatment, nurse case management and/or outreach services to TB cases and suspects, their associated contacts and Class B1/B2 immigrants and refugees for a defined group of local health jurisdictions.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Approximately $2,400,000 will be available for the SFY2015 - CY2015 TB health service grants.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
County and/or municipal health departments, hospitals, private medical providers and private health care agencies providing clinical, diagnostic, laboratory monitoring, treatment, nurse case management and/or outreach services under the auspices of a New Jersey Department of Health's Regional TB Specialty Clinic site.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
The service area of each Regional TB Specialty Clinic seeking funding must, during the three previous calendar years, either be (1) a county with an average of 45 verified TB cases or (2) serve a multi-county area with an average of 45 or more verified TB cases.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
Acting Program Manager, TB Program
New Jersey Department of Health
Post Office Box 363
Trenton, NJ 08625-0363
TELEPHONE: (609) 826-4878
FAX: 609-826-4879
E-MAIL: Frank.Romano@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Varies, grant periods are 12 months and will begin July 1, 2014 or January 1, 2015. Applications are due 75 days prior to the beginning of the funding period.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
If applications are received as indicated above, applicants will generally be advised of funding status 30 days before the funding period begins.
NOTICE OF GRANT AVAILABILITY

**NAME OF GRANT PROGRAM:**
Commission On Cancer Research

**GRANT PROGRAM NO.** 15-23-CCR

**TYPE OF AWARDS TO BE ISSUED:**
Cost - Reimbursement

<table>
<thead>
<tr>
<th>STATUTORY AUTHORITY</th>
<th>TYPE OF AWARDS TO BE ISSUED</th>
</tr>
</thead>
<tbody>
<tr>
<td>P.L. 83, C. 6, 52:9U-1 et al</td>
<td>Cost - Reimbursement</td>
</tr>
<tr>
<td>P.L. 2011, c.35:46.86-18</td>
<td>Cost - Reimbursement</td>
</tr>
</tbody>
</table>

**PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:**
To support new investigators seeking to become established in New Jersey; assist established scientists looking for new directions in cancer research; and encourage promising, novel translational, epidemiologic and clinical studies.

**AMOUNT OF MONEY IN THE GRANT PROGRAM:**
Approximately $1 million may be available for one to two year Pre- and/or Post Doctoral Research Fellowship awards at $50,000 per annum.

**ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:**
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

**GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:**
Applicants must be non-profit research institutions headquartered and operating in New Jersey, and not individual students. Awards are made to institutions, not students.

**QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:**
Proposals are evaluated based upon scientific merit and study feasibility. Additional factors considered in the review include: qualifications of investigators, research facilities, scientific/budget overlap and relevance to statutory mandates.

**APPLICATION PROCEDURES:**
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: [www.sage.nj.gov](http://www.sage.nj.gov). The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

For SAGE registration questions, e-mail Anna Battle at: AnnaLS.Battle@doh.state.nj.us If funds are made available, the RFA will be posted to the NJCCR website on or about June 1, 2014 at ([www.njccr.gov](http://www.njccr.gov)).

**FOR INFORMATION CONTACT:**
New Jersey Department of Health
NJ Commission on Cancer Research
Executive Director
50 E. State St. - 6th Floor
PO Box 369
Trenton, NJ 08625-0369

TELEPHONE: 609-292-8540
FAX: 609-292-3580
E-MAIL: njccr@doh.state.nj.us

**DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:**
NJCCR Fellowship applications are due by July 1, 2014 or as directed by the NJCCR Office.

**DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:**
Award notification will be made in mid-August 2014 or as directed by the NJCCR Office with a September 1, 2014 project start date.

FS-12
**NOTICE OF GRANT AVAILABILITY**

**NAME OF GRANT PROGRAM:**
Comprehensive Cancer Control 2015  
Implementation of Comp Cancer Control Program

**GRANT PROGRAM NO.** 15-84-CCC

**STATUTORY AUTHORITY:**
P.L. 2005, Chapter 280 supplementing Title 26 and Executive Order No. 114 of 2000

**TYPE OF AWARDS TO BE ISSUED:**
Cost-reimbursement

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**PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:**
The purpose of this grant program is to implement evidence/practice based cancer prevention and control programs to reduce morbidity, mortality, and related health disparities during a multi-year project period.

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**AMOUNT OF MONEY IN THE GRANT PROGRAM:**
Approximately $1,200,000 in state and federal funding may be available in SFY15 to fund 10 awards. Awards will begin on or about July 1, 2014 and will be made for a 12 month budget period with a multi-year project period. Funding estimate may vary and is subject to the Annual Appropriation Act. Continuation awards within an approved project period will be made based upon satisfactory progress and availability of funds. Applicants currently receiving Grants for this activity and have performed satisfactorily during the previous project period will be given first priority for continued funding.

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**ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:**
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

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**GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:**
Currently funded Office of Cancer Control and Prevention grantees who have demonstrated compliance with the Terms and Conditions of the 2013-2014 project period.

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**QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:**
Currently funded Office of Cancer Control and Prevention grantees who have demonstrated compliance with the Terms and Conditions of 2013-2014 project period.

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**APPLICATION PROCEDURES:**
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: [www.sage.nj.gov](http://www.sage.nj.gov). The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

---

**FOR INFORMATION CONTACT:**
New Jersey Department of Health  
Susan Sanna-Bartelt  
Program Coordinator  
PO Box 364  
Trenton, NJ 08625

**TELEPHONE:** (609)-292-8540  
**FAX:** (609) 984-3346  
**E-MAIL:** susan.bartelt@doh.state.nj.us

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**DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:**
May 1, 2014

**DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:**
May 31, 2014

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FS-12  
NOV 10
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Tobacco Control Prevention Interventions

STATUTORY AUTHORITY:
N.J.S.A 26:1A - 1B

GRANT PROGRAM NO. 15-9-TOB

TYPE OF AWARDS TO BE ISSUED:
Cost - Reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
Grants will be awarded to agencies to implement tobacco control evidence-based interventions designed to: decrease the acceptability of tobacco use among all populations; decrease the number of youth who start smoking; increase the number of people who start and complete treatment for tobacco dependence; increase awareness and decrease involuntary exposure to second hand smoke; reduce disparities related to tobacco use and its effects among different population groups.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Funds available for this program are contingent upon Federal appropriation. Approximately $800,000 in Federal Center for Disease Control and Prevention (CDC) funding should be available to fund approximately four to seven organizations. It is expected that the award will begin April 1, 2014 and end March 30, 2015. Continuation of awards will be made based on satisfactory performance and availability of funds.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Not for profit agencies organizations with experience in implementing evidence-based tobacco interventions.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Demonstrated history and experience in developing, implementing and evaluating tobacco control evidence-based programs in New Jersey with a focus on environmental, health systems, health communication and community mobilization/linkages strategies. Selection of grantees will be made through a Request For Application (RFA) process. RFA will be issue between February to April 2014 depending on Federal determination of the new award project period. Prospective grantees must register in the SAGE system.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
New Jersey Department of Health
Janis Mayer, Program Coordinator
Division of Family Health Services
Chronic Disease: Office of Tobacco Control
P.O. Box 373Trenton, NJ 08625-0373

TELEPHONE: (609) 984-3317
FAX: (609) 984-3346
E-MAIL: janis.mayer-obermeier@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Approximately, -April, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Approximately, June, 2014
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Chronic Renal Services

STATUTORY AUTHORITY: N.J.S.A.26:2-87

GRANT PROGRAM NO. 15-59-CR

TYPE OF AWARDS TO BE ISSUED: Cost-Reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To provide financial assistance in obtaining select medications and nutritional supplements to eligible persons on chronic renal dialysis

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Approximately $480,000 should be available in SFY2015 to fund one award. It is expected that the Fiscal Year 2014 award will begin on or about July 1, 2014 and end June 30, 2015. Please be advised that all health service grant funding is based upon the availability of state appropriations and is subject to change at any time without notice.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Organization which has experience in providing financial assistance for qualified dialysis patients needing select medications and nutritional supplements to licensed New Jersey Renal Dialysis Centers. Continuation awards will be made based on satisfactory performance and availability of funds.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Non-profit status. Ability to administer a web based system of reimbursement.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
New Jersey Department of Health
Division of Family Health Services
Janice Ibezim, Program Officer, CDPC
P.O.Box 364, 50 East State St.
Trenton, NJ 08625-0364

TELEPHONE: (609) 292-8540
FAX: (609) 984-3346
E-MAIL: janice.ibezim@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
April 1, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
June 30, 2014

FS-12
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Coordinated Integrated Initiative

STATUTORY AUTHORITY:

TYPE OF AWARDS TO BE ISSUED:
Cost - Reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To implement evidence-based interventions aimed to prevent and control diabetes, heart disease & stroke, obesity and associated risk factors and promote School Health. Programs will focus on implementing strategies to increase provider and consumer knowledge on the importance of physical activity and good nutrition in various settings in NJ as well as implementing environmental and policy changes. Additionally, three grants will be awarded to establish Regional Diabetes Resource Coordination Centers to promote Diabetes Self-Management Training (DSMP) and Diabetes Prevention Programs to increase access to, referrals to, and utilization, and provider education and awareness campaigns related to diabetes prevention.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Approximately $750,000 should be available to fund approximately 7 to 10 awards in the areas of nutrition, physical activity, school health and diabetes prevention. The amounts of the awards will vary depending on federal requirements and contingent to availability of funding. The award will be for the Fiscal Year 2015 (July 1, 2014 through June 30, 2015). Funds available for this program are contingent upon Federal appropriation.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Non-profit status. Continuation awards will be made based on satisfactory performance and availability of funds.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Organization must have a previous track record in the delivery of evidence-based diabetes, heart disease & stroke nutrition, physical activity and school health interventions. Selection of grantees will be made through a Request For Application (RFA) process. RFA will be issue by April 2014. Prospective grantees must register in the SAGE system.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
New Jersey Department of Health
Division of Family Health Services
Laura Hernandez-Paine, Program Manager
Chronic Disease Prevention & Control
P.O.Box 364
Trenton, NJ 08625

TELEPHONE: 609-292-8540
FAX: (609) 292-9288
E-MAIL: laura.hernandez-paine@doh.state.nj
DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
April 15, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
June 30, 2014

FS-12
NOV 10
**NOTICE OF GRANT AVAILABILITY**

**NAME OF GRANT PROGRAM:**
Diabetes Prevention and Control Program

**STATUTORY AUTHORITY:**
N.J.S.A. 26:1A-1B

**PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:**
To implement diabetes evidence-based interventions aim to reduce the impact of diabetes in NJ by: increasing awareness of diabetes and its complications; improving the quality of diabetes care and access to care; developing partnerships and increasing community involvement to address diabetes issues; utilizing data to better apply resources and improve health outcomes.

**AMOUNT OF MONEY IN THE GRANT PROGRAM:**
Depending on availability of federal funds, approximately $150,000 should be available to fund one award. The award will be for the Fiscal Year 2015 (July 1, 2014 through June 30, 2015).

**ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:**
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

**GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:**
Non-profit status. Continuation awards will be made based on satisfactory performance and availability of funds.

**QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:**
Organization must have a previous track record in the delivery of evidence-based diabetes interventions.

**APPLICATION PROCEDURES:**
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: [www.sage.nj.gov](http://www.sage.nj.gov). The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

**FOR INFORMATION CONTACT:**
New Jersey Department of Health
LorieAnn Wilkerson-Leconte, Program Coordinator
Chronic Disease Prevention & Control
Division of Family Health Services-NJDOH
P.O.Box 364
Trenton, NJ 08625

**TELEPHONE:** 609-984-6137
**FAX:** (609) 292-9288
**E-MAIL:** lorieann.wilkerson-conte@doh.state.nj.us

**DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:**
April 1, 2014

**DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:**
June 30, 2014
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Huntington's Disease Services Program

STATUTORY AUTHORITY:
N.J.S.A. 26:5B-1

GRANT PROGRAM NO.
15-63-HD

TYPE OF AWARDS TO BE ISSUED:
Cost-Reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To contract with a medical school to provide pre-symptomatic testing for Huntington's Disease, neurology and psychiatry services, neuropsychological evaluations, treatment and management for Huntington's Disease victims and their families, and the provision of outreach & educational services to professionals and family members.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
The availability of funds for this program is contingent on appropriation of State funds to the department. Approximately $310,000 could be available for in the Fiscal Year 2015 (July 1, 2014 to June 30, 2015) for one grant award. Please be advised that all health service grant funding is based upon the availability of state appropriations and is subject to change at any time without notice.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
New Jersey medical schools with documented experience in counseling clients with Huntington's Disease and their families. Continuation awards will be made based on satisfactory performance and availability of funds.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Documented experience in counseling clients with Huntington's Disease and their families, and previous working relationship with the NJ Chapter of the Huntington's Disease Society of America.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.
Contact the person identified below to determine whether the funds have been awarded and to receive further information.

FOR INFORMATION CONTACT:
New Jersey Department of Health
Division of Family Health Services
Janice Ibezim, Program Officer, CDPC
P.O. Box 364, 50 East State St.
Trenton, NJ 08625-0364

TELEPHONE: (609) 292-8540
FAX: (609) 984-3346
E-MAIL: janice.ibezim@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
April 1, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
June 30, 2014
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
NJ Cancer Education & Early Detection Program (NJCEED) Program

STATUTORY AUTHORITY:

GRANT PROGRAM NO. 15-47-CED

TYPE OF AWARDS TO BE ISSUED:
Cost-reimbursement Grant

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
Funds will be used to provide comprehensive cancer screening services to low-income women and men who are uninsured/underinsured. Centers for Disease Control and Prevention (CDC) funding is to be used to provide program-eligible women with age-appropriate breast and cervical cancer screening and diagnostic services; State appropriated funds are to be used to provide age-appropriate prostate, colorectal, breast, and cervical cancer screening and diagnostic services to program eligible women and men.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Approximately $1.6 million in federal CDC funding and approximately $9.2 million in state funds should be available in Fiscal Year 2015 (July 1, 2014–June 30, 2015) to fund at least twenty-one awards. Funding estimates may vary and are subject to the actual amount of funds received.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Currently funded NJCEED grantees who have demonstrated compliance with the Terms and Conditions of the 2013 - 2014 project period. Agencies must have 501(c)(3) status and must have experience delivering direct health care services to the target population.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Applicants must have experience in the provision of medical services to the target population and have access to specialized staff (clinical providers, health educators, case managers/patient navigators, etc.) to conduct grant activities; applicants must also have the ability to assure facilitation into treatment, if breast, cervical, prostate and/or colorectal cancer is diagnosed.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
New Jersey Department of Health
Marge Rojewski, Program Coordinator
NJCEED Program
50 East State Street, PO Box 364
Trenton, NJ 08625-0364

TELEPHONE: 609-292-8540
FAX: 609-292-3580
E-MAIL: Margaret.Rojewski@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
May 1, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Notification to occur approximately 4 weeks after completed applications are reviewed by department staff.
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
NJ Heart Disease and Stroke Prevention Program

STATUTORY AUTHORITY:
42 USC 241 42 CFR 52

GRANT PROGRAM NO.
15-56-HSP

TYPE OF AWARDS TO BE ISSUED:
Cost - Reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To improve the capacity of state level public health department to reduce the burden of heart disease and stroke (HD&S), impact the quality of care for HD&S through different health systems, and collaborate with various internal and external partners to accomplish system level change.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Contingent on availability of funds, the total amount of funding available will be approximately between $80,000 to $100,000 to fund one award (based on program planning and evaluation). This award will be for the Fiscal Year 2015 (July 1, 2014 through June 30, 2015). Applicants currently being funded by the DOH for any of the above activities and that have performed satisfactory, will be given additional consideration for continued funding.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Non-for profit and state agencies with previous rack record in the delivery of HD&S evidence-based interventions.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Agency must have a previous track record in the identification of high risk individuals within a health system and implementing programming to increase control of high blood pressure and high blood cholesterol primarily among adults.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
New Jersey Department of Health
Chronic Disease & Prevention, DFHS
LorieAnn Wilkerson-Leconte, Program Coordinator
50 East State St. PO Box 364
Trenton, NJ 08625-0364

TELEPHONE: (609) 984-8540
FAX: (609) 292-9288
E-MAIL:lorieann.wilkerson-leconte@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
April 1, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
June 30, 2014
**NOTICE OF GRANT AVAILABILITY**

**NAME OF GRANT PROGRAM:**
Pediatric Adult Asthma Coalition Program

**GRANT PROGRAM NO.** 15-80-SCH

**STATUTORY AUTHORITY:**
Public Health Services Act, Sections 301(A)311,317
- C-PHSACTi42 USC 241,243,247B

**TYPE OF AWARDS TO BE ISSUED:**
Cost-Reimbursement

**PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:**
To improve the health of people living and/or working in New Jersey by effective prevention efforts and identification and management of asthma, through a coordinated partnership (coalition) among public and private organizations. To establish and update a plan for control of asthma in New Jersey and implement and/or facilitate implementation of the State Asthma Strategic Plan.

**AMOUNT OF MONEY IN THE GRANT PROGRAM:**
Funds available for this program are contingent upon Federal appropriations. Approximately $100,000 in Federal Centers for Disease Control and Prevention (CDC) funding should be available to fund one award. It is expected that the award will begin on or about September 1, 2014 and end August 31, 2015.

**ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:**
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

**GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:**
American Lung Association of Mid-Atlantic or any non-profit community based organizations.

**QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:**
Non-profit community based agency that has the capability of administering State funds and that has experience in planning, development, and implementing asthma control activities on a statewide basis; conducting and supporting a pediatric/adult asthma coalition (PACNJ) with a broad base of support including professional and consumer representation; and conducting asthma education, communications, and media campaigns.

**APPLICATION PROCEDURES:**
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: [www.sage.nj.gov](http://www.sage.nj.gov). The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

**FOR INFORMATION CONTACT:**
New Jersey Department of Health
Lisa Jones, Coordinator
New Jersey Asthma Program
50 East State St., PO Box 364
Trenton, NJ 08625-0364

**TELEPHONE:** (609) 292-8540
**FAX:** (609) 292-9288
**E-MAIL:** lisa.jones@doh.state.nj.us

**DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:**
June 1, 2014

**DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:**
August 15, 2014
## NOTICE OF GRANT AVAILABILITY

<table>
<thead>
<tr>
<th><strong>NAME OF GRANT PROGRAM:</strong></th>
<th>Pharmaceutical Services for Adults with Cystic Fibrosis</th>
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<tr>
<td><strong>STATUTORY AUTHORITY:</strong></td>
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<tr>
<td><strong>GRANT PROGRAM NO.</strong></td>
<td>15-67-SCH</td>
</tr>
<tr>
<td><strong>TYPE OF AWARDS TO BE ISSUED:</strong></td>
<td>Cost-Reimbursement</td>
</tr>
</tbody>
</table>

### PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To provide grant funds to a non-profit agency to assist adults with Cystic Fibrosis to purchase supplemental nutritious food, prescription drugs and medical supplies/equipment. It is expected that between 60-100 persons will receive assistance under this program. A minimum of eighty percent (80%) of the funds will be used to provide direct client benefits. A maximum of twenty percent (20%) may be used for administrative costs.

### AMOUNT OF MONEY IN THE GRANT PROGRAM:
Funds available for this program are contingent upon State or Federal Appropriations. Approximately $370,000 should be available in the Fiscal Year 2015 (July 1, 2014 to June 30, 2015) for one grant award. Please be advised that all health service grant funding is based upon the availability of state appropriations and is subject to change at any time without notice.

### ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

### GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Organizations with experience in providing financial assistance and direct services to persons with Cystic Fibrosis and who have the capability of administering State funds. Continuation awards will be made based on satisfactory performance and availability of funds.

### QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Non-profit status. Applicants must demonstrate the capability of administering State funds and experience in providing financial assistance and direct services to persons with Cystic Fibrosis.

### APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: [www.sage.nj.gov](http://www.sage.nj.gov). The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

### FOR INFORMATION CONTACT:
New Jersey Department of Health
Division of Family Health Services
Janice Ibezim, CDPC
P.O.Box 364, 50 East State St.
Trenton, NJ 08625-0364

**TELEPHONE:** (609) 292-0840  
**FAX:** (609) 292-9288  
**E-MAIL:** janice.ibezim@doh.state.nj.us

### DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
April 1, 2014

### DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
June 30, 2014
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
NEW JERSEY COMMISSION ON BRAIN INJURY RESEARCH
INDIVIDUAL RESEARCH GRANT

STATUTORY AUTHORITY:
NJCBIR P.L. 2003, C:200,
N.J.S.A. 52:9EE-1

GRANT PROGRAM NO. 15-1-BIR
TYPE OF AWARDS TO BE ISSUED:
Cost Reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
The goals of this program are (1) to encourage investigators to undertake research on neural protection, repair and regeneration after traumatic brain injury; (2) to encourage individuals to undertake research on the effectiveness of clinical interventions for traumatic brain injury; and (3) to enable researchers with novel scientific and clinical ideas to test them and develop pilot data needed to develop a programmatic area of research that can be supported by additional funding from the National Institutes of Health, and other funding sources

AMOUNT OF MONEY IN THE GRANT PROGRAM:
The NJCBIR will fund Individual Research Grants with an emphasis on the objectives and priorities stated within the NJCBIR Guidelines. Applicants are encouraged to apply for a one-year, two-year or three-year award. Maximum funding is up to $150,000 per year for direct costs and 20% applicable indirect costs. Each funding award within the two/three-year period will be contingent upon the submission and successful review of an comprehensive Progress Report. All Progress Reports must be favorably reviewed by an independent scientific merit review panel and recommended to the NJCBIR for continued funding. Senior scientists and young investigators may serve as principal investigator. If the applicant is a fellow, s/he must submit a letter of support from the laboratory’s senior scientist, as well as two other appropriate letters of reference. Awards will begin on or about May 29, 2015. The NJCBIR reserves the right to distribute funds among the grants in the 15-BIR1 program, as well as among the NJCBIR's other grant programs: 15-BIR2, 15-BIR3, 15-BIR4. The NJCBIR reserves the right not to fund any grant in this program (15-BIR1) to the maximum amount, or not to fund any grant in this program at all. Up to $6,500,000 will be made available for all programs (15-BIR1, 15-BIR2, 15-BIR3, 15-BIR4).

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
All qualifying institutions in the State of New Jersey may apply for an Individual Research grant under this program. A qualifying institution is defined as any academic institution, research organization, public or private institution or other entity, located in the State of New Jersey, with demonstrated capability to conduct grant funded research, and specifically approved by the vote of the Commission, but in no case can an individual be a qualifying research institution.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Principal investigators must be affiliated with a New Jersey State academic institution, research organization, public or private agency or other entity with demonstrated capability to conduct research responsibly. Unaffiliated individuals will not be funded. Individuals of any nationality or citizenship status may apply, provided they are employed by or affiliated with a qualified New Jersey State organization/institution.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.
Applications and NJCBIR Research Guidelines governing grants are available for review and submission on the website at www.sage.nj.gov. A Letter of Intent must be filed with the NJCBIR office no later than August 1, 2014.
FOR INFORMATION CONTACT:
New Jersey Commission on Brain Injury Research
Department of Health
225 East State Street
2nd Floor West
Trenton, New Jersey 08625

TELEPHONE: 609-633-6465
FAX: 609-943-4213
E-MAIL: NJCBIR@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
A Letter of Intent must be filed with the NJCBIR office no later than August 1, 2014.
Deadline for Applications: 3 PM on October 3, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Notification - April 30, 2015

FS-12
NOV 10
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
NEW JERSEY COMMISSION ON BRAIN INJURY RESEARCH

PROGRAMMATIC MULTI-INVESTIGATOR GRANT

GRANT PROGRAM NO. 15-2-BIR

STATUTORY AUTHORITY:
NJCBIR P.L. 2003, C:200,
N.J.S.A. 52:9EE-1

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
The goals of this program are (1) to encourage investigators to undertake research on neural protection, repair and regeneration after traumatic brain injury; (2) to encourage individuals to undertake research on the effectiveness of clinical interventions for traumatic brain injury; and (3) to enable researchers with novel scientific and clinical ideas to test them and develop pilot data needed to develop a programmatic area of research that can be supported by additional funding from the National Institutes of Health, and other funding sources.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
The NJCBIR will fund Programmatic Multi-Investigator Project Grants that support collaborative research among at least 3 investigators from different laboratories with an emphasis on traumatic brain injury. Preference will be given to proposals that demonstrate complementary approaches to addressing a research question through multidisciplinary investigations (e.g., molecular, genetic, physiologic, behavioral and pharmacologic privileges). The goal of this mechanism is to enhance in-depth mechanistic analysis and promote translational research. During proposal review, if one sub-project does not receive a favorable recommendation for funding and is not considered necessary for effective implementation of the entire program, the remaining sub-projects, which must be a minimum of 3, may be considered for approval independent of the failed sub-project. Furthermore, if a Multi-Investigator Project grant does not receive an overall favorable recommendation, individual sub-project Principal Investigator(s) that were favorably reviewed may be asked to submit a revised Budget and Specific Aims for their project one time only within 30 days. The revised project(s) will then be considered for approval as an Individual Research Grant by the Independent Scientific Merit Review Panel.

Collaborations are encouraged among independent laboratories within the same institution, or among laboratories from different institutions. Applicants are encouraged to apply for a one-year, two-year or three-year award. Maximum funding is up to $600,000 per year for direct costs and 20% applicable indirect costs. Awards will begin on or about May 29, 2015. The NJCBIR reserves the right to distribute funds among the grants in the 15-BIR2 program, as well as among the NJCBIR's other grant programs: 15-BIR1, 15-BIR3, 15-BIR4. The NJCBIR reserves the right not to fund any grant in the 15-BIR2 program to the maximum amount, or not to fund any grant in this program at all. Up to $6,500,000 will be made available for all programs (15-BIR1, 15-BIR2, 15-BIR3, 15-BIR4).

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
All qualifying institutions in the State of New Jersey may apply for a Programmatic Multi-Investigator grant under this program. A qualifying institution is defined as any academic institution, research organization, public or private institution or other entity, located in the State of New Jersey, with demonstrated capability to conduct grant funded research, and specifically approved by the vote of the Commission, but in no case can an individual be a qualifying research institution.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Principal investigators must be affiliated with a New Jersey State academic institution, research organization, public or private agency or other entity with demonstrated capability to conduct research responsibly. Unaffiliated individuals will not be funded. Individuals of any nationality or citizenship status may apply, provided they are employed by or affiliated with a qualified New Jersey State organization/institution. The principal investigator must be located within a qualifying institution in the State of New Jersey. Proposals must identify a principal investigator within each research site as well as an overall Principal Investigator (Program Director) who is responsible for ensuring collaboration among all investigators. Additionally, the Program Director will write the Overall Program
Rationale section that justifies the need for a multi-investigator project. There must be compelling reasons for applying as a program, not simply reflecting matters of geography, relatedness or use of common equipment.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

Applications and NJCBIR Research Guidelines governing grants are available for review and submission on the website at www.sage.nj.gov. A Letter of Intent must be filed with the NJCBIR office no later than August 1, 2014.

FOR INFORMATION CONTACT:
New Jersey Commission on Brain Injury Research
Department of Health
225 East State Street
2nd Floor West
Trenton, New Jersey 08625

TELEPHONE: 609-633-6465
FAX: 609-943-4213
E-MAIL: NJCBIR@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
A Letter of Intent must be filed with the NJCBIR office no later than August 1, 2014.
Deadline for Applications: 3 PM on October 3, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Notification - April 30, 2015

FS-12
NOV 10
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
NEW JERSEY COMMISSION ON BRAIN INJURY RESEARCH
PILOT RESEARCH GRANT

STATUTORY AUTHORITY:
NJCBIR P.L. 2003, C:200,
N.J.S.A. 52:9EE-1

GRANT PROGRAM NO. 15-4-BIR

TYPE OF AWARDS TO BE ISSUED:
Cost Reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
The goals of this program are (1) to encourage investigators to undertake research on neural protection, repair and regeneration after traumatic brain injury; (2) to encourage individuals to undertake research on the effectiveness of clinical interventions for traumatic brain injury; and (3) to enable researchers with novel scientific and clinical ideas to test them and develop pilot data needed to develop a programmatic area of research that can be supported by additional funding from the National Institutes of Health, and other funding sources

AMOUNT OF MONEY IN THE GRANT PROGRAM:
The NJCBIR will fund Pilot Research Grants with an emphasis on encouraging (1) experienced investigators to pursue a new direction in brain injury research, or (2) new investigators who want to gather preliminary data for larger research projects.

Suitable projects include feasibility studies; secondary analysis of existing data; self contained research projects; development of research methodology; development of new research technologies; and investigation of novel scientific ideas, model systems, tools, agents, targets and technologies that have the potential to substantially advance brain cell regeneration and repair.

Applicants are encouraged to apply for a one-year or two-year award. Maximum funding is up to $75,000 per year for direct costs and 20% applicable indirect costs. Awards will begin on or about May 29, 2014. The NJCBIR reserves the right to distribute funds among the grants in this program (15-BIR4) as well as among the NJCBIR's other grant programs: 15-BIR1, 15-BIR2, 15-BIR3. The NJCBIR reserves the right not to fund any grant in 15-BIR4 to the maximum amount, or not to fund any grant in this program at all. Up to $6,500,000 will be made available for all programs (15-BIR1, 15-BIR2, 15-BIR3, 15-BIR4).

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
All qualifying institutions in the State of New Jersey may apply for Pilot Project grants under this program. A qualifying institution is defined as any academic institution, research organization, public or private institution or other entity, located in the State of New Jersey, with demonstrated capability to conduct grant funded research, and specifically approved by the vote of the Commission, but in no case can an individual be a qualifying research institution.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Principal investigators must be affiliated with a New Jersey State academic institution, research organization, public or private agency or other entity with demonstrated capability to conduct research responsibly. Unaffiliated individuals will not be funded. Individuals of any nationality or citizenship status may apply, provided they are employed by or affiliated with a qualified New Jersey State organization/institution.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.
Applications and NJCBIR Research Guidelines governing grants are available for review and submission on the website at www.sage.nj.gov. A Letter of Intent must be filed with the NJCBIR office no later than August 1, 2014.

FOR INFORMATION CONTACT:
New Jersey Commission on Brain Injury Research
Department of Health
225 East State Street
2nd Floor West
Trenton, New Jersey 08625

TELEPHONE: 609-633-6465
FAX: 609-943-4213
E-MAIL: NJCBIR@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
A Letter of Intent must be filed with the NJCBIR office no later than August 1, 2014.
Deadline for Applications: 3 PM on October 3, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Notification - April 30, 2015

FS-12
NOV 10
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
NEW JERSEY COMMISSION ON BRAIN INJURY RESEARCH
POSTDOCTORAL AND GRADUATE STUDENT FELLOWSHIP

STATUTORY AUTHORITY:
NJCBIR P.L. 2003, C:200,
N.J.S.A. 52:9EE-1

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
The goals of this program are (1) to encourage investigators to undertake research on neural protection, repair and regeneration after traumatic brain injury; (2) to encourage individuals to undertake research on the effectiveness of clinical interventions for traumatic brain injury; and (3) to enable researchers with novel scientific and clinical ideas to test them and develop pilot data needed to develop a programmatic area of research that can be supported by additional funding from the National Institutes of Health, and other funding sources.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Postdoctoral Fellowships are generous three-year salary awards that may be active up to and including the 8th postgraduate year. The beginning stipend levels are based on years of relevant research experience since obtaining the doctoral degree, starting at $40,000 for 0 years experience, then $42,000 for 1 year experience, etc. For each experience level, salaries for the next 2 years increase each year by $2,000 (for example: 0 years experience; Year 1 = $40,000, Year 2 = $42,000, Year 3 = $44,000). Applicants may apply by no later than their 6th year after their degree award. In addition to the stipend, there will be an annual research allowance of $7,500 and an annual travel budget of $1,500. Additional support includes a fringe benefit supplement at 12% of each annual stipend amount and indirect costs for the institution at 20% of each annual total amount. Institutions may supplement stipends, but not with other full-time fellowship awards, or other NJCBIR monies. A candidate may not apply for a NJCBIR Postdoctoral Fellowship and a NJCBIR Individual Research grant in the same grant cycle. If a first-year Fellow applies for and is awarded a NJCBIR Individual Research Grant, funding will be contingent upon cancellation of the second or third year of the fellowship. Non-research activities, such as teaching or clinical care, may not occupy more than 10% of the fellow's time. All Postdoctoral Fellows must submit a yearly Progress Report accompanied by a letter of support from the fellow's mentor. Second or third year fellowship funding is contingent upon the successful review of the progress report and a recommendation from the mentor. An Evaluation Form must be submitted to the NJCBIR office each year for two years following termination of the Fellowship grant.

Graduate Student Fellowships are three-year awards of $27,500 per annum. They provide an annual stipend of $24,000, and consistent with institution policy, an annual research allowance of $2,000 and an annual travel budget of $1,500. Up to $6,000 of additional funds will be provided for tuition. No part of this award may be used for institutional overhead. Institutions may supplement stipends, but not with other full-time fellowship awards or other NJCBIR monies. Applicants may not serve as teaching assistants while holding a NJCBIR Graduate Student Fellowship. Second-year and third-year fellowship funding is contingent upon the successful review of a comprehensive progress report and a recommendation from the mentor. An Evaluation Form must be submitted to the NJCBIR office each year for two years following termination of the Fellowship grant.

Successful fellowship applicants are offered the opportunity to participate in an approved brain injury techniques course. The NJCBIR will make available up to $4,000 for a grantee to attend a brain injury techniques course at an approved University that has the necessary experience and database on the use of standard brain injury models and devices. Grantees are responsible for making all necessary travel and course participation arrangements and payments. Reimbursements will be made to those who provide proof of course completion and expense receipts. Awards will begin on or about May 29, 2015. The NJCBIR reserves the right to distribute funds among the grants in this program (15-BIR3) as well as among the NJCBIR's other grant programs: 15-BIR1, 15-BIR2, 15-BIR4. The NJCBIR reserves the right not to fund any grant in 15-BIR3 to the maximum amount, or not to fund any grant in this program at all. Up to $6,500,000 will be made available for all programs (15-BIR1, 15-BIR2, 15-BIR3, 15-BIR4).

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant
GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:

All qualifying institutions in the State of New Jersey may apply for Fellowship grants under this program. A qualifying institution is defined as any academic institution, research organization, public or private institution or other entity, located in the State of New Jersey, with demonstrated capability to conduct grant funded research, and specifically approved by the vote of the Commission, but in no case can an individual be a qualifying research institution.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:

Postdoctoral Fellowships - Candidates of outstanding quality must hold a Ph.D., and/or M.D., or equivalent graduate degree. Appropriate degrees must be awarded prior to activation of award. Candidates must be accepted for postdoctoral training under the supervision of an appropriate mentor at a qualifying academic research institution in New Jersey.

Graduate Student Fellowships - Applicants must be full-time graduate students in residence in a proposed course of study directly related to regeneration and repair of the damaged brain. Students must begin study in the semester following activation unless special permission is received prior to activation date. The NJCBIR prefers to support graduate student candidates who have completed the first year of graduate study and are concentrating on research projects at least 80% of their time.

APPLICATION PROCEDURES:

An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

Applications and NJCBIR Research Guidelines governing grants are available for review and submission on the website at www.sage.nj.gov A Letter of Intent must be filed with the NJCBIR office no later than August 1, 2014.

FOR INFORMATION CONTACT:

New Jersey Commission on Brain Injury Research
Department of Health
225 East State Street 2nd Floor West
Trenton, New Jersey 08625

TELEPHONE: 609-633-6465
FAX: 609-943-4213
E-MAIL: NJCBIR@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:

A Letter of Intent must be filed with the NJCBIR office no later than August 1, 2014.
Deadline for Applications: 3 PM on October 3, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:

Notification - April 30, 2015

FS-12
NOV 10
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
NEW JERSEY COMMISSION ON SPINAL CORD RESEARCH
Exploratory Research Grant

GRANT PROGRAM NO. 15-6-SCR

STATUTORY AUTHORITY:
NJCSCR Fund Chapter 201 P.L. 1999 NJSA 52:9E-1

TYPE OF AWARDS TO BE ISSUED:
Cost Reimbursement Grant

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
The purpose of the Exploratory Research Grant award is to enable independent investigators to apply their specific expertise to spinal cord research. The award is designed to provide the resources necessary to acquire preliminary data that will allow the successful applicant to obtain continued support from the NJCSCR, NIH, and/or other funding agencies. It is specifically intended to facilitate the application of innovative ideas from other areas of science to the challenges of spinal cord injury and repair.

In addition to scientific merit and relevance, consideration will be given to collaborative proposals that are inter-institutional and/or inter-state in nature. Priority will also be given to investigators outside the field who bring their expertise into spinal cord injury research. Successful applicants will have familiarized themselves with state-of-the-art knowledge necessary to put the proposed study into the appropriate spinal cord context.

In the field of spinal cord injury research, as elsewhere in the biomedical sciences, a constant infusion of new ideas, techniques, and points of view is essential to maintain its vitality, foster discovery and stimulate innovation. Inherent in the concept of innovation is the departure from current thinking or practice. Innovative projects are unlikely to be supported by substantial preliminary data, and for that and other reasons will necessarily be more speculative than conventional projects. These are high-risk, high reward projects that may lead to breakthroughs, the development of novel techniques, agents, methodologies, models or applications, or other insights that could have major impact on the field of spinal cord injury research.

The Exploratory Research Grant Program is intended to provide support for the early and conceptual stages of such investigations. Through the use of the Exploratory Research Grant Program, the NJCSCR will encourage the pursuit of novel scientific ideas, model systems, tools, agents, targets and technologies that have the potential to substantially advance spinal cord injury research and open new areas of inquiry.

Applications for Exploratory Research Grant awards should describe projects that are exploratory and novel, and are clearly distinct from projects typically supported through more traditional mechanisms. These studies should break new ground or extend previous discoveries toward new directions or applications. Appropriate justification for the proposed work can be provided through literature citations, data from other sources, or, when available, from investigator-generated data.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Two-year non-renewable awards are offered to applicants at a maximum funding level of up to $100,000 per year including direct and indirect costs, (10% maximum for the latter). All awards are made through one-year contracts. Each funding award within the two-year period will be contingent upon the availability of funds. Second year support for all Exploratory Research Grants is contingent upon the submission and successful review of a Continuation Application. The Continuation Application must be favorably reviewed by an independent scientific merit review panel and recommended to the NJCSCR for continued funding. An Evaluation Form must be submitted to the NJCSCR office after the second and fifth years following termination of an Exploratory Research grant. Awards will begin on or about June 15, 2015. The NJCSCR reserves the right to distribute funds among the grants in this program (15-SCR6) as well as among the NJCSCR’s other grant programs: 15-SCR1, 15-SCR3 and 15-SCR7. The NJCSCR reserves the right not to fund any grant in program 15-SCR6 to the maximum amount, or not to fund any grant in this program at all. Up to $6,500,000 will be made available for all programs (15-SCR1, 15-SCR3, 15-SCR6, 15-SCR7).

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
All qualifying institutions in the State of New Jersey may apply for an Exploratory Research grant under this program. A qualifying research institution is defined as any academic institution, research organization, public or private institution or other entity, located in the State of New Jersey, with a demonstrated capability to conduct grant funded research, and specifically approved by the vote of the Commission, but in no case can an individual be a qualifying research institution.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Principal investigators must be affiliated with a New Jersey State academic institution, research organization, public or private agency or other entity with demonstrated capability to conduct research responsibly. Unaffiliated individuals will not be funded. Individuals of any nationality or citizenship status may apply, provided they are employed by or affiliated with a qualified New Jersey State organization/institution.

APPLICATION PROCEDURES:
Applications and NJCSCR Research Guidelines governing grants are available for review and submission on the website at www.sage.nj.gov

FOR INFORMATION CONTACT:
New Jersey Commission on Spinal Cord Research
Department of Health
225 East State Street
2nd Floor West
Trenton, New Jersey 08625
TELEPHONE: 609-292-4055
FAX: 609-943-4213
E-MAIL: NJCSCR@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Applications - 3 PM on December 10, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Notification - May 29, 2015

FS-12
MAY 03
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
NEW JERSEY COMMISSION ON SPINAL CORD RESEARCH
Postdoctoral & Graduate Student Fellowship Grant

GRANT PROGRAM NO. 15-3-SCR

STATUTORY AUTHORITY:
NJCSCR Fund Chapter 201 P.L. 1999 NJSA 52:9E-1

TYPE OF AWARDS TO BE ISSUED:
Cost Reimbursement Grant

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
The NJCSCR will fund Postdoctoral and Graduate Student Fellowship grants to attract and retain in New Jersey's qualifying academic research institutions talented young scientists who wish to pursue a career in spinal cord regeneration and repair research. All awards will be made to the research institution in the name of the fellow. All proposals are reviewed by a panel of independent scientific experts who are appointed by the NJCSCR. The panel will evaluate candidates on academic qualifications, the scientific merit of the proposed research project and its relevance to the research priorities of the NJCSCR, the qualifications of the candidate's mentor, the adequacy of facilities, and institutional support.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Postdoctoral Fellowships are three-year awards of $50,000 per annum. They provide an annual stipend of $36,000, a research allowance of $13,000, and a travel budget of $1,000. No part of the award may be used for institutional overhead or indirect costs. Institutions may supplement stipends, but not with other full-time fellowship awards, or other NJCSCR monies. A candidate may not apply for a NJCSCR Postdoctoral Fellowship and a NJCSCR Individual Research grant in the same grant cycle. If a first-year fellow applies for and is awarded a NJCSCR Individual Research grant, funding will be contingent upon cancellation of the fellowship. Non-research activities, such as teaching, may not occupy more than 10% of the fellow's time. All Postdoctoral Fellows must submit a yearly Progress Report accompanied by a letter of support from the fellow's mentor. Second or third year fellowship funding is contingent upon the successful review of the progress report and a recommendation from the mentor.

Graduate Student Fellowships are two-year awards of $30,000 per annum. They provide an annual stipend of $25,000, a research allowance of $4,000, and a travel budget of $1,000. No part of this award may be used for institutional overhead, or for tuition. Institutions may supplement stipends, but not with other full-time fellowship awards or other NJCSCR monies. Applicants may serve as teaching assistants while holding a NJCSCR Graduate Student Fellowship without special permission. Second year Graduate Student Fellowship funding is contingent upon the successful review of the Progress Report and a recommendation from the mentor.

Successful applicants are offered the opportunity to participate in an approved spinal cord injury techniques course. The NJCSCR will make available up to $4,000 for a grantee to attend a spinal cord injury techniques course. The institution is responsible for making all necessary travel and course participation arrangements and payments. Reimbursements will be made to those who provide proof of course completion and expense receipts. Awards will begin on or about June 15, 2015. The NJCSCR reserves the right to distribute funds among the grants in this program (15-SCR3) as well as among the NJCSCR's other grant programs: 15-SCR1, 15-SCR6 and 15-SCR7. The NJCSCR reserves the right not to fund any grants in program 15-SCR3 to the maximum amount, or not to fund any grant in these programs at all. Up to $6,500,000 will be made available for all the grant programs (15-SCR1, 15-SCR3, 15-SCR6, 15-SCR7). Funding estimates may vary, and are subject to annual appropriations. Each yearly funding award will be contingent upon the availability of funds. All Postdoctoral and Graduate Student Fellows must submit a yearly Progress Report accompanied by a letter of support from the fellow's mentor. Any change in relationship between the fellow and the mentor, or between the fellow and the host institution will require the submission of a new, competing application by the fellow as opposed to a Progress Report. An Evaluation Form must be submitted to the NJCSCR office for each year for two years following termination of the Fellowship grant.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant
GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
All qualifying institutions in the State of New Jersey may apply for Fellowship grants under this program. A qualifying institution is defined as any academic institution, research organization, public or private institution or other entity, located in the State of New Jersey, with demonstrated capability to conduct grant funded research, and specifically approved by the vote of the Commission, but in no case can an individual be a qualifying research institution.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Postdoctoral Fellowship Specifications - Candidates of outstanding quality must hold a Ph.D., and/or M.D., or equivalent graduate degree. Appropriate degrees must be awarded prior to activation of award. Candidates must be accepted for postdoctoral training under the supervision of an appropriate mentor at a qualifying academic research institution in New Jersey. The NJCSCR reserves the right to limit the number of fellowships awarded under the supervision of an individual mentor.

Graduate Student Fellowship Specifications - Candidates must be full-time graduate students in residence in a proposed course of study directly related to regeneration and repair of the damaged spinal cord. Students must begin study in the semester following activation unless special permission is received prior to activation date. The NJCSCR prefers to support graduate student candidates who have completed the first year of graduate study and are concentrating on research projects at least 80% of their time.

APPLICATION PROCEDURES:
Applications and NJCSCR Research Guidelines governing grants are available for review and submission on the website at www.sage.nj.gov

FOR INFORMATION CONTACT:
New Jersey Commission on Spinal Cord Research
Department of Health
225 East State Street
2nd Floor West
Trenton, New Jersey 08625
TELEPHONE: 609-292-4055
FAX: 609-943-4213
E-MAIL: NJCSCR@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Applications - December 10, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Notification - May 29, 2015
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
NEW JERSEY COMMISSION ON SPINAL CORD RESEARCH
Individual Research Grant

GRANT PROGRAM NO. 15-1-SCR

STATUTORY AUTHORITY:
NJCSCR Fund Chapter 201 P.L. 1999 NJSA 52:9E-1

TYPE OF AWARDS TO BE ISSUED:
Cost-Reimbursement Grants

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
The NJCSCR will fund research activities that hold the promise of developing effective interventions and cures for paralysis and other consequences of spinal cord injury and disease. All qualifying institutions in the State of New Jersey may apply. Individual Research Grant awards will be awarded to independent investigators with a record of productivity, a demonstrated commitment to spinal cord research, and only for projects that will address significant questions that will advance knowledge in the field. The goals of this program are (1) to encourage independent investigators to undertake research on spinal cord regeneration, recovery and rehabilitation; (2) to encourage scientists who are well-established in other areas to transfer their efforts to spinal cord research; and (3) enable researchers with novel scientific and clinical ideas to test them and develop pilot data needed to seek larger awards from the National Institutes of Health, and other funding sources.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Applicants are encouraged to apply for a one - three year award. Maximum funding is up to $200,000 per year including direct and indirect costs, (10% maximum for the latter). Successful applicants are offered the opportunity to participate in an approved spinal cord injury techniques course. The NJCSCR will make available up to $4,000 for a grantee to attend a spinal cord injury techniques course. Grantees are responsible for making all necessary travel and course participation arrangements and payments. All awards are made through one-year contracts. Each funding award within the three-year period will be contingent upon the availability of funds. Second and third year support for all Individual Research grants is contingent upon submission of a Grant Continuation Application (SCR2). The Grant Continuation Application must be favorably reviewed by an independent scientific merit review panel and recommended to the NJCSCR for continued funding. An Evaluation Form must be submitted to the NJCSCR office each year for two years following termination of an Individual Research grant. Awards will begin on or about June 15, 2015. The NJCSCR reserves the right to distribute funds among the grants in this program (15-SCR1) as well as among the NJCSCR's other grant programs: 15-SCR3, 15-SCR6 and 15-SCR7. The NJCSCR reserves the right not to fund any grants in program 15-SCR1 to the maximum amount, or not to fund any grant in these programs at all. Up to $6,000,000 will be made available for all programs (15-SCR1, 15-SCR3, 15-SCR6, 15-SCR7).

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
All qualifying institutions in the State of New Jersey may apply for an Individual Research grant under this program. A qualifying institution is defined as any academic institution, research organization, public or private institution or other entity, located in the State of New Jersey, with demonstrated capability to conduct grant funded research, and specifically approved by the vote of the Commission, but in no case can an individual be a qualifying research institution.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Principal investigators must be affiliated with a New Jersey State academic institution, research organization, public or private agency or other entity with demonstrated capability to conduct research responsibly. Senior scientists, young investigators, and postdoctoral fellows may serve as principal investigator. If the applicant is a fellow, s/he must submit a letter of support from the laboratory's senior scientist, as well as two other appropriate letters of reference. Unaffiliated individuals will not be funded. Individuals of any nationality or citizenship status may apply, provided they are employed by or affiliated with a qualified New Jersey State organization/institution.
APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.
Applications and NJCSCR Research Guidelines governing grants are available for review and submission on-the website at www.sage.nj.gov

FOR INFORMATION CONTACT:
New Jersey Commission on Spinal Cord Research
Department of Health
225 East State Street
2nd Floor West
Trenton, New Jersey 08625

TELEPHONE: 609-292-4055
FAX: 609-943-4213
E-MAIL: NJCSCR@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Applications - by 3 PM on December 10, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Notification - May 29, 2015
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
NEW JERSEY COMMISSION ON SPINAL CORD RESEARCH
SCI Techniques Training Travel Grant

GRANT PROGRAM NO.  15-7-SCR

STATUTORY AUTHORITY:
NJCSCR Fund Chapter 201 P.L. 1999 NJSA 52:9E-1

TYPE OF AWARDS TO BE ISSUED:
Cost Reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
The purpose of the Spinal Cord Injury Techniques Training Travel Grant award is to offer applicants the ability to participate in a spinal cord injury techniques training course. In order to encourage more spinal cord research in the State of New Jersey and facilitate the most rigorous science possible, the NJCSCR is offering a one-time per applicant non-renewable award of up to $4,000. Successful applicants are offered the opportunity to participate in an approved spinal cord injury techniques course. The NJCSCR will make available up to $4,000 for a grantee to attend a spinal cord injury techniques course of their choosing, at an approved university/institution that has the necessary experience and expertise to offer instruction and training in spinal cord injury techniques.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Applicant’s institution is responsible to find a course, to make all necessary travel and course participation arrangements and payments. Reimbursements will be made to those who provide proof of course completion and expense receipts.

All applicants to this grant program must first apply to the NJCSCR by December 10, 2014 for consideration of funding to attend a training program. The NJCSCR will make a decision to award funding by February 27, 2015. The NJCSCR will issue a letter of commitment to the successful applicant’s institution to provide an award of up to $4,000 in support of his or her attendance at a training program. The NJCSCR reserves the right to distribute funds among the grants in this program 15-SCR7 as well as among the NJCSCR’s other grant programs 15-SCR1, 15-SCR3 and 15-SCR6. The NJCSCR reserves the right not to fund any grant in this program 15-SCR7 to the maximum amount, or not to fund any grant in this program at all. Up to $6,500,000 will be made available for all programs (15-SCR1, 15-SCR3, 15-SCR6, 15-SCR7).

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
All qualifying institutions in the State of New Jersey may apply for a Spinal Cord Injury Training Travel grant under this program. A qualifying institution is defined as any academic institution, research organization, public or private institution or other entity, located in the State of New Jersey, with demonstrated capability to conduct grant funded research, and specifically approved by the vote of the Commission, but in no case can an individual be a qualifying research institution.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Applicant must be affiliated with a New Jersey State academic institution, research organization, public or private agency or other entity with demonstrated capability to conduct research responsibly. Unaffiliated individuals will not be funded. Individuals of any nationality or citizenship status may apply, provided they are employed by or affiliated with a qualified New Jersey State organization/institution.

APPLICATION PROCEDURES:
Applications and NJCSCR Research Guidelines governing grants are available for review and submission on-the-website at www.sage.nj.gov
FOR INFORMATION CONTACT:
New Jersey Commission on Spinal Cord Research
Department of Health
225 East State Street
2nd Floor West
Trenton, New Jersey 08625
TELEPHONE: 609-292-4055
FAX: 609-943-4213
E-MAIL: NJCSCR@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Application Submission Deadline - by 3 PM on December 10, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Notification - February 27, 2015
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Health Programs for Refugees

GRANT PROGRAM NO. 15-89-RHP

STATUTORY AUTHORITY: PL96-212

TYPE OF AWARDS TO BE ISSUED: Cost-reimbursement Grants

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To ensure that refugee arrivals receive a domestic health exam within 30 days of arrival to identify and treat infectious diseases of public health concern, to identify and provide referral for treatment of chronic health conditions, and to introduce arrivals into the US healthcare system. Funding also supports a health literacy program.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Approximately $200,000 may be available for State Fiscal Year 2015 to fund approximately four awards to Federally Qualified Health Centers or equivalents. Awards begin on October 1, 2014 and will fund a twelve month budget period. The funding estimate and award dates may vary and is subject to state and federal appropriations. Applicants currently receiving health service grant money for the activity will be given first priority to receive funding.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Non profit entities with licensed medical practitioners capable of third party billing to New Jersey Medicaid.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Federally Qualified Health Centers or equivalents, capable of providing culturally sensitive and linguistically appropriate health services to the newly arrived refugee populations resettled in New Jersey. Entities should be strategically located in counties with the highest percentages of refugees.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
Program Manager, Infectious and Zoonotic Disease Program
New Jersey Department of Health
PO Box 369
Trenton, NJ 08625-0369
TELEPHONE: (609) 826-5964
FAX: 609-292-5821
E-MAIL: Anne.Fox@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
August 31, 2014 or as directed.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Usually one month prior to funding period.

FS-12
NOV 10
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Indoor Tanning Safety

STATUTORY AUTHORITY:
N.J.S.A.26: 2D-81
N.J.S.A.26: 2D-88

GRANT PROGRAM NO. 15-31-ITS

TYPE OF AWARDS TO BE ISSUED:
Cost-reimbursement Grants

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To provide for the cost reimbursement to Local Health Departments for each registered indoor Tanning Facility inspected annually in their jurisdiction, in order to ensure compliance with established minimum safety standards for the operation of Tanning Facilities that use ultraviolet sunlamp products, per N.J.A.C. 8:28. Funds are disbursed from the Non-ionizing Radiation Fund established by statute and implemented by Department of Health rules.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Approximately $150,000. Funding estimates may vary based on generated revenue.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Must be a Local Health Department with Indoor Tanning Facilities in their respective jurisdictions.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Complete and submit a New Jersey Department of Health Grants Agreement.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
Public Health Sanitation & Safety Program
New Jersey Department of Health
PO Box 369
Trenton, NJ 08625-0369

TELEPHONE: 609-826-4941
FAX: 609-826-4992
E-MAIL: timothy.smith@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
July 1, 2014 or as directed.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
 Usually one month prior to funding period.

FS-12
NOV 10
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Special Program to Increase Immunization Levels

STATUTORY AUTHORITY:
Public Health Service Act as Amended
PHS 317, 42, USC, SEC, 247B

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To continue support to selected local and state initiatives to substantially increase immunization levels. The majority of funds are intended to be allocated for increasing vaccine service delivery and ensuring a strong follow-up component both in traditional and non-traditional medical settings in normal and epidemic times; some funds may be used for related immunization assessment, outreach, and information/education activities.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Approximately $3,000,000 may be available in Federal Fiscal Year 2014 to fund 10-15 awards. Awards will begin on January 1, 2015 and will be for a 12 month budget period. Funding estimates may vary and are subject to state and federal appropriations. Applicants currently receiving grants for these activities and who have performed satisfactorily will be given first priority for continued funding.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Local governmental entities, State agencies, non-profit corporations, licensed ambulatory care facilities and hospitals, and primary care centers in New Jersey which provide services in urban settings or depressed rural areas.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Experience with community health and pediatric preventive care issues in mostly highly urbanized areas of New Jersey. Ability to provide immunization services at a variety of sites and also in non-traditional medical settings in targeted areas of need. Must be a professionally licensed organization which can provide these services in accordance with state and federal guidelines. Demonstrated ability in working with other state and local programs operating within a geographical area and within the local health jurisdiction.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
Program Manager, Vaccine Preventable Disease Program
New Jersey Department of Health
PO Box 369
Trenton, NJ 08625-0369

TELEPHONE: (609) 826-4861
FAX: 609-826-4866
E-MAIL: Steven.Bors@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
November 30, 2014 or as directed.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Applicant will be notified 30 days prior to start date of grant.
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
GOVERNOR'S AUTISM COUNCIL-CLINICAL RESEARCH AND TRANSLATIONAL RESEARCH PILOT PROJECTS

STATUTORY AUTHORITY:

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
The purpose of this grant program is to support clinical research and translational research pilot projects capable of advancing the mission of the New Jersey Autism Center of Excellence (NJ ACE). The mission of the NJ ACE is to research, apply and advance best practices in the understanding, prevention, evaluation and treatment of autism spectrum disorders (ASDs), enhancing the lives of individuals across their lifespans. Presently the NJ ACE consists of (1) a Coordinating Center, (2) three Clinical Research Program Sites and (3) six Clinical Research Pilot Projects. This grant program offers the availability of Clinical Translational Research Pilot Projects as well as Clinical Research Pilot Projects. The NJ ACE Coordinating Center provides common management and support functions to unify the Clinical Research Program Sites and Pilot Project grantees, increase efficiency, and reduce costs. The five year Coordinating Center grant was awarded to Montclair State University. NJ ACE grantees are listed at http://www.state.nj.us/health/autism/grant_ini.shtml. The NJ ACE Pilot Project grantees will develop and conduct clinical and translational research projects with the potential to improve the physical and/or behavioral health and well-being of individuals with ASDs. The Council is particularly interested in projects with potential direct clinical impact. The projects will address one of the short- or long-term objectives, listed in the Grant Program Guidelines, which constitute a subset of the Interagency Autism Coordinating Committee (IACC) Strategic Plan-2012 Update (http://iacc.hhs.gov/strategic-plan/2012/index.shtml). If applicable, the applicant should also reference the Healthy People 2020 objective (see MICH-29 in (http://healthypeople.gov/2020/topicsobjectives2020/pdfs/HP2020objectives.pdf) addressed by the research project.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
A total of up to $4,000,000 will be made available for the grant program for the two years of the program. Awards will begin on or about June 23, 2014. Eligibility requirements are stated in the eligibility section of the Grant Guidelines. Successful applicants must abide by all programmatic and fiscal requirements of the NJ Department of Health. Applicants are encouraged to apply for a one-year or two-year award. Maximum funding is up to $200,000 per year including direct and indirect costs, (15% maximum for the latter). The anticipated start date is June 23, 2014. The Governor's Council for Medical Research and the Treatment of Autism reserves the right to distribute funds among the grants in this program or not to fund any grant in this program at all.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
For the purpose of all NJ Governor's Council for Autism (NIGCA) grants, a qualifying institution is defined as any academic institution, research organization, public or private nonprofit organization or other entity, located in the State of New Jersey, with a demonstrated capability to conduct grant funded research, but in no event can an individual be a qualifying institution. All applicants, organizations/institutions must be located within the State of New Jersey.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Principal investigators must be affiliated with a New Jersey State academic institution, research organization, public or private agency or other entity with demonstrated capability to conduct research responsibly. Unaffiliated individuals will not be funded. Individuals of any nationality or citizenship status may apply, provided they are employed by or affiliated with a qualified New Jersey State organization/institution.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

Grant Program Guidelines (i.e. RFA) governing grants are available for review at http://www.state.nj.us/health/autism/index.shtml. A Letter of Intent must be filed with the NJGCA no later than February 11, 2014.

FOR INFORMATION CONTACT:
Governor's Council for Medical Research and Treatment of Autism
Department of Health
PO Box 360
Trenton, New Jersey 08625-0360

TELEPHONE: 609-633-8740
FAX: 609-943-4213
E-MAIL: NJGCA@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Deadline for Applications: 3 PM on March 24, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Notification - June 9, 2014
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Abstinence Education Program (AEP)

GRANT PROGRAM NO. 15-32-AEP

STATUTORY AUTHORITY: Patient Protection & Affordable Care Act of 2010

TYPE OF AWARDS TO BE ISSUED: Cost reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
The New Jersey Abstinence Education Program (NJ-AEP) funds will provide services to youth populations that are at high-risk for teen pregnancy, STDs/STIs, out-of-wedlock births and in the greatest need for abstinence interventions. The purpose of NJ-AEP will be to promote abstinence from sexual activity and, where appropriate, provide options that may include mentoring, counseling and/or adult supervision.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
The availability of funds for this program is contingent on Federal appropriations of funds to the Department. Funding is estimated to be approximately $848,924 in State Fiscal Year (SFY) 2015. Grant awards will begin on or about 7/1/14 for a 12 month budget period with a project period of up to three years. Current grantees will be given priority for continuation grants based on the availability of funds, satisfactory performance and timely reporting.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
New Jersey-based public agencies or private non-profit health, social service or educational organizations or other entities with a history of working with children (10 - 13 years old) and having the capacity to conduct the project.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Public agency or private non-profit organization with capacity and ability to meet required administrative, programmatic and fiscal processes necessary to develop the infrastructure and related health education and program services for the implementation of the project.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
New Jersey Department of Health
Maternal and Child Health Services
50 E. State Street, P.O. Box 364
Trenton, New Jersey 08625-0364

TELEPHONE: 609-292-5666
FAX: 609-292-9288
E-MAIL: Gilo.Thomas@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Continuation applications are due no later than April 30, 2014 for grants starting July 1, 2014. A Competitive Request for Application (RFA) is not anticipated for SFY 2015 (July 1, 2014 - June 30, 2015).

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Applicant will be notified approximately 30 days prior to start of the grant, on or about June 1, 2014.

FS-12
NOV 10
### NOTICE OF GRANT AVAILABILITY

**NAME OF GRANT PROGRAM:**
Adolescent Health

**STATUTORY AUTHORITY:**
Maternal and Child Health
Block Grant

**GRANT PROGRAM NO.** 15-42-CHS
**TYPE OF AWARDS TO BE ISSUED:**
Cost-reimbursement

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<tr>
<th>PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:</th>
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<td>Support school and community partnerships to improve the health, safety and well-being of middle- and high-school students using the Centers for Disease Control and Prevention's Coordinated School Health (CSH) model. This model uses a school health team and an assessment process, to develop an action plan to address gaps and develop needed programs and/or services to prevent, identify and treat health conditions or injuries.</td>
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<th>AMOUNT OF MONEY IN THE GRANT PROGRAM:</th>
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<tr>
<td>The availability of funds for these grants is contingent on federal block grant allocations to the Adolescent Health unit. Funding is estimated to be approximately $1,100,000 in SFY 2015. Grant awards will begin on or about July 1, 2014 for a 12 month budget period with a project period of up to five years. Applicants currently receiving grants for this project will be recipients of continuation grants based on the availability of funds, satisfactory performance and timely reporting. No new grants are anticipated for SFY 2015.</td>
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<td>1. Terms and Conditions for the Administration of Grants</td>
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<td>2. General and specific Grant Compliance requirements issued by the Granting Agency.</td>
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<td>3. Applicable Federal Cost Principles relating to the Applicant</td>
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<th>GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:</th>
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<tr>
<td>New Jersey-based public agencies or private non-profit health, social service or educational organizations or other entities with a history of working with schools and having the capacity to conduct the project.</td>
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<th>QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:</th>
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<tr>
<td>Eligible entities with capacity, infrastructure and ability to meet required administrative, programmatic and fiscal processes necessary to develop school health program activities using the framework of CDCs CSH model.</td>
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<tr>
<th>APPLICATION PROCEDURES:</th>
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<td>An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: <a href="http://www.sage.nj.gov">www.sage.nj.gov</a>. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.</td>
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<tr>
<th>FOR INFORMATION CONTACT:</th>
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<tbody>
<tr>
<td>New Jersey Department of Health</td>
</tr>
<tr>
<td>Marsha Fields, Program Management Office</td>
</tr>
<tr>
<td>Maternal and Child Health Services</td>
</tr>
<tr>
<td>50 East State Street, P.O. Box 364</td>
</tr>
<tr>
<td>Trenton, NJ 08625-0364</td>
</tr>
<tr>
<td><strong>TELEPHONE:</strong> 609-292-5666</td>
</tr>
<tr>
<td><strong>FAX:</strong> 609-292-9288</td>
</tr>
<tr>
<td><strong>E-MAIL:</strong> <a href="mailto:marsha.fields@doh.state.nj.us">marsha.fields@doh.state.nj.us</a></td>
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<tr>
<th>DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:</th>
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<tr>
<td>Continuation applications are due no later than April 30, 2014 for grants starting July 1, 2014. A competitive Request for Applications (RFA) is not anticipated for SFY 2015.</td>
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<th>DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:</th>
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<td>Applicant will be notified approximately 30 days prior to start of the grant.</td>
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FS-12
NOV 10
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Child Health

STATUTORY AUTHORITY:
Social Security Act Title V and N.J.S.A. 26:2-132

GRANT PROGRAM NO.
15-43-CHS

TYPE OF AWARDS TO BE ISSUED:
Cost-reimbursement Grants

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
Educate the general public and health, housing and social services professionals about childhood lead poisoning prevention and the principles of healthy homes. Collaborate with Medicaid and/or health care providers to promote and/or provide age-appropriate screenings and a medical home for children. Provide nurse case management and environmental investigation services for lead poisoned children.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Funds available for this program are contingent upon State/Federal appropriations. About $3,000,000 should be available in SFY 2015 to support lead poisoning prevention/healthy homes, promotion of medical homes, and age-appropriate screenings. Continuation awards for the approved project period (July 1, 2014 - June 30, 2015) will be based on satisfactory progress in meeting agreed upon objectives and may affect the amount of funds available.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Local/county/regional health departments, nursing services agencies, community-based providers of housing and maternal/child health services, and health care professional associations.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Demonstrate ability to work with the public and resource agencies to address a broad range of housing deficiencies (including lead-based paint) and associated health hazards. Demonstrate ability to collaborate with health care providers to promote age-appropriate screenings. Demonstrate ability to provide blood lead screening, nurse case management and environmental investigation services in compliance with N.J.A.C. 8:51 (childhood lead poisoning).

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
New Jersey Department of Health
Maternal and Child Health Services
50 East State Street, P.O. Box 364
Trenton, NJ 08625-0364

TELEPHONE: (609) 984-5921
FAX: (609) 777-3572
E-MAIL: Crystal.Owensby@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Competitive applications due to funding program in accordance with the Request for Proposals. Continuation grant applications are due by May 1, 2014 for grants starting July 1, 2014.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Applicants will be notified 30 days prior to start of the grant.

FS-12
NOV 10
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Children's Oral Health Program

STATUTORY AUTHORITY:
Title V of the Social Security Act
No State Authority

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
Grant program funds support the Statewide Children's Oral Health Program which provides age appropriate oral health education to school age children in grades pre-K through 12 in high need/high risk areas in order to reduce the incidence of future oral disease.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
The availability of funds for this program is contingent on State and federal appropriations to the Department. Approximately $450,000 may be available in SFY 2015 (July 1, 2014 - June 30, 2015) to support oral health education programs for school age children. Additional funds for new grantees are not anticipated. Current grantees will be given priority for continuation of funding based upon availability of funds, satisfactory performance and compliance with grant goals and objectives.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Governmental and non-profit agencies providing oral health outreach, education and services to school-age children, including local health departments, community-based agencies, hospitals and federally qualified health centers.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
The applicant should have an established history and proven capability to provide oral health education programs to high need/risk children in underserved areas of the State. Applicants must have on site dental clinic services. Applicants will be required to provide school based education programs to a specific defined regional area covering multiple counties.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
New Jersey Department of Health
Children's Oral Health Program
50 East State Street, P.O. Box
Trenton, NJ 08625-0364

TELEPHONE: (609) 943-5749
FAX: (609) 292-9288
E-MAIL: Beverly.Kupiec@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Letter of Intent due to funding program by February 15, 2014 for grants starting on July 1, 2014. Competitive applications if applicable are due to the funding program in accordance with the Request for Proposals.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Applicant will be notified approximately 30 days prior to start of the grant (June 1, 2014 for grants starting 7/1/2014.)
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM: Family Planning

STATUTORY AUTHORITY: Title X of the Social Security Act (Public Law 97-35)

GRANT PROGRAM NO. 15-44-FP

TYPE OF AWARDS TO BE ISSUED: Cost-Reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To provide funds to support clinical family planning and related services throughout the 21 counties of the state with a focus to provide family planning services to low income residents of New Jersey. This includes the provision of health and related services to adolescents.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
The availability of funds for this program is contingent on Federal appropriations of funds to the Department. Approximately $2.4 million should be available for grants for Calendar Year (CY) 2015.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
The New Jersey Family Planning League as the Title X agency is the applicant.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Ability to coordinate the family planning delivery system in all 21 counties.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.
1. Contact Office of Director (see below)
2. Based on funding availability for new projects, a formal Request for Applications will be published by the program.
3. Prepare Grant application in accordance with formal Request for Application requirements.

FOR INFORMATION CONTACT:
New Jersey Department of Health
Office of the Director
Maternal and Child Health Services
50 E. State Street, PO Box 364
Trenton, New Jersey 08625-0364

TELEPHONE: (609) 984-1384
FAX: (609) 292-9288
E-MAIL: Lori.Garg@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Letter of Intent due to funded programs by 7/1/2014, application to be received by 9/1/2014 for 1/1/2015 grants.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
November 30, 2014

FS-12
NOV 10
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:  
Fetal Alcohol Syndrome Prevention  

STATUTORY AUTHORITY:  
N.J.S.A 26:2B-32, Alcohol, Education, Rehabilitation and Enforcement Fund  

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:  
Development of regional projects which prevent alcohol and other drug use pre-pregnancy, during pregnancy and post-partum. This will be done through training of perinatal professionals and general public education, substance abuse risk screenings in prenatal settings, intervention counseling of pregnant women and referral to addiction treatment programs. To increase the number of pregnant and preconceptual women screened for risk of substance use and abuse. Development of local component to target specific communities for prevention activities.

AMOUNT OF MONEY IN THE GRANT PROGRAM:  
The availability of funds for this program is contingent on appropriation of State and Federal funds to the department. Approximately $900,000 will be available to fund coordination of risk reduction services and targeted initiatives.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:  
1. Terms and Conditions for the Administration of Grants  
2. General and specific Grant Compliance requirements issued by the Granting Agency.  
3. Applicable Federal Cost Principles relating to the Applicant  

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:  
Licensed Maternal and Child Health Consortia; perinatal centers, ambulatory care facilities, health departments.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:  
Must be able to comply with Program specifications. Must demonstrate ability to provide coordination as specified by the Reproductive and Perinatal Health Services Program.

APPLICATION PROCEDURES:  
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.  
1. Contact Office of Director (see below)  
2. Submit Letter of Intent to program  
3. Prepare grant application

FOR INFORMATION CONTACT:  
New Jersey Department of Health  
Office of the Director  
Maternal and Child Health Services  
50 East State Street, P.O. Box 364  
Trenton, NJ 08625  

TELEPHONE:  (609) 984-1384  
FAX:  (609) 292-9288  
E-MAIL:  Lori.Garg@doh.state.nj.us

DATE BY WHICH APPLICATIONS MUST BE SUBMITTED:  
April 1, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:  
May 30, 2014

FS-12  
NOV 10
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Outreach and Education

STATUTORY AUTHORITY:
Health Care Subsidy Fund, est. pursuant to (PL 1992, c.160 c. 26:2H-18.58

GRANT PROGRAM NO. 15-49-CHS

TYPE OF AWARDS TO BE ISSUED:
Cost-Reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To inform the community through outreach services and educational programs about the issue of Infant Mortality.
To improve and provide quality access to prenatal care, preconception and interconception care.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Approximately $8 million should be available to New Jersey based public agencies or private non-profit organizations, as evidenced by a 501 (c) (3) status tax determination letter or other proof of non-profit status; including Healthy Start of East Orange, Orange and Montclair and Sudden Infant Death Syndrome Resource Center, Post Partum Mood Disorder, and Improved Pregnancy Outcomes. Funding is contingent on appropriation to the Department. Grant awards will range from $200,000 to $500,000.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Hospitals, local health departments, ambulatory care facilities, Maternal Child Health Consortia and other facilities that provide dedicated maternal and child health services.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Must be able to demonstrate need for and ability to provide acceptable services to the target population, as determined by the Reproductive and Perinatal Health Services Program. For SIDS: Must be a State medical school and be able to demonstrate the ability to identify, treat and track infants who are potential victims or victims of SIDS and SIDS families, offer diagnostic procedures, medical treatment, counseling, referral and community and professional education regarding SIDS, maintain the SIDS database, serve as an advisory group on SIDS.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.
1. Contact Office of Director (see below)
2. Submit Letter of Intent to program
3. Prepare grant application

FOR INFORMATION CONTACT:
New Jersey Department of Health
Maternal and Child Health Services
50 East State Street, P.O. Box 364
Trenton, NJ 08625

TELEPHONE: (609) 984-1384
FAX: (609) 292-9288
E-MAIL: Lori.Garg@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
April 1, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
May 30, 2014

FS-12
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Personal Responsibility Education Program (PREP)

STATUTORY AUTHORITY:
Patient Protection and Affordable Care Act of 2010

GRANT PROGRAM NO. 15-52-PRP

TYPE OF AWARDS TO BE ISSUED:
Cost-reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
The Personal Responsibility Education Program (PREP) grant was funded by DHHS/ACF to provide services to youth populations that are the most high-risk for pregnancies. NJ PREP funds will be used to replicate evidence-based program models which educate adolescents on both abstinence and contraception to prevent pregnancy and sexually transmitted infections (STIs), including HIV/AIDS, and at least three adulthood preparation subjects.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
The availability of funds for this program is contingent on Federal appropriations of funds to the Department. Funding is estimated to be approximately $1,316,840 in State Fiscal Year (SFY) 2015. Grant awards will begin on or about 10/1/14 for a 12 month budget period with a project period of up to four years. Current grantees for this activity will be given priority for continuation grants based on the availability of funds, satisfactory performance and timely reporting.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
New Jersey-based public agencies or private non-profit health, social service or educational organizations or other entities with a history of working with adolescents (10-19 years old) and having the capacity to conduct the project.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Public agency or private non-profit organization with capacity and ability to meet required administrative, programmatic and fiscal processes necessary to develop the infrastructure and related health education and program services for the implementation of the project.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
New Jersey Department of Health
Maternal and Child Health Services
50 E. State Street, PO Box 364
Trenton, NJ 08625-0364

TELEPHONE: 609-292-5666
FAX: 609-292-9288
E-MAIL: gilo.thomas@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Continuation applications are due no later than August 31, 2014 for grants starting Oct 1, 2014. A competitive Request for Application (RFA) is not anticipated for SFY 2014.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Applicant will be notified approximately 30 days prior to start of the grant, on or about September 1, 2014.

FS-12
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Tourette Syndrome

STATUTORY AUTHORITY:  
N.J.S.A. 26:1A-1S

GRANT PROGRAM NO.  
15-76-FS

TYPE OF AWARDS TO BE ISSUED:  
Cost-reimbursement Grant

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To operate an effective tourette patient and child care, support and education program throughout New Jersey.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
The availability of funds for this program is contingent on the appropriation of funds to the department. Approximately $400,000 is expected to be available for one grant from this program.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Non-profit organizations that have 501 c 3 status and are registered as a charitable organization with the NJ Division of Consumer Affairs.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Applicants must have a history and/or the ability to 1) support families dealing with Tourette Syndrome, 2) advocate for individuals with Tourette Syndrome, 3) educate the public, educators and medical professionals about Tourette Syndrome 4) train doctoral students, 4) maintain a genetic record for tourette syndrome research.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
William Jaeger
Financial Services, Department of Health
PO 360, Trenton, NJ 08625-0360

TELEPHONE: 609 633-6307
FAX: 609 633-1705
E-MAIL: william.jaeger@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
April 1, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
June 1, 2014

FS-12
NOV 10
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
OMMH – Community Health Disparity Prevention 2015

GRANT PROGRAM NO. 15-78-OMH

TYPE OF AWARDS TO BE ISSUED:
Cost-reimbursement Grant

STATUTORY AUTHORITY:
P.L. 1991, C. 401, s.8

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To implement prevention programs that includes educational, awareness/prevention, self- management, and outreach activities for the targeted at-risk racial/ethnic minority populations.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Approximately $800,000 annually will be available for two year awards.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants.
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant.

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Federally qualified health centers (FQHC), local health departments and/or minority serving community/ faith- based organizations may apply.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Non-profit status [501 (c)3], incorporated as NJ Charitable organization and DUNS number (The Data Universal Numbering System, abbreviated as DUNS or D-U-N-S, is a system developed and regulated by Dun & Bradstreet (D&B), that assigns a unique numeric identifier, referred to as a "DUNS number" to a single business entity). Applicants may be required to staff programs with a certified health educator, health educator, nurse, evaluator, etc. per the staffing specificity outlined for the prevention programs.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.
Request for Application information will be mailed to targeted agencies six to eight weeks prior to due date and grant funding will be awarded based upon availability of funds.

FOR INFORMATION CONTACT:
NJDOH- Policy and Strategic Planning
Office of Minority and Multicultural Health
M. Carolyn Daniels, DHSc

PHONE: 609-292-6962
FAX: 609-292-8713
email: carolyn.daniels@doh.state.nj.us

PO Box 360
Trenton, New Jersey 08625-0360

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
May, 2014.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
June, 2014.
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:  
PASP – Chronic Disease Self-Management Mini 2015

GRANT PROGRAM NO. 15-70-OMH  
TYPE OF AWARDS TO BE ISSUED:  
Cost-reimbursement

STATUTORY AUTHORITY:  
P.L. 1991, C. 401, s.8

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:  
To promote, strengthen and deliver the CDSMP, community workshops designed to help people with chronic conditions (obesity, diabetes, etc.) and/or their care givers to overcome daily challenges, and maintain an active, fulfilling life for at-risk racial/ethnic minority populations.

AMOUNT OF MONEY IN THE GRANT PROGRAM:  
Approximately $90,000 annually will be available for two year awards.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:  
1. Terms and Conditions for the Administration of Grants.  
2. General and specific Grant Compliance requirements issued by the Granting Agency.  
3. Applicable Federal Cost Principles relating to the Applicant.

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:  
Community and/or faith-based minority serving organizations (CBO/FBOs) with the capability of administering State funds and adherence to the specifications of the CDSMP are eligible to apply for the mini-grants.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:  
Non-profit status [501 (c) 3], incorporated as NJ Charitable organization with a DUNS number (The Data Universal Numbering System, abbreviated as DUNS or D-U-N-S, is a system developed and regulated by Dun & Bradstreet, that assigns a unique numeric identifier, referred to as a "DUNS number" to a single business entity). Applicants are required to staff program with CDSMP Master Trainers and/or Peer Leaders as outlined in the CDSMP Scope of Services.

APPLICATION PROCEDURES:  
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below. Request for Application information will be disseminated to targeted agencies four to six weeks prior to the due date.

FOR INFORMATION CONTACT:  
NJDOH- Policy and Strategic Planning  
Office of Minority and Multicultural Health  
M. Carolyn Daniels, DHSC  
PHONE: 609-292-6962  
PO Box 360  
FAX: 609-292-8713  
Trenton, New Jersey 08625-0360  
email: carolyn.daniels@doh.state.nj.us

DATE BY WHICH APPLICATIONS MUST BE SUBMITTED:  
May, 2014.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:  
June, 2014.
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM: Federally Qualified Health Center Expansion

STATUTORY AUTHORITY: Health Care Reform Act 1992, Chapter 160

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To provide funding to Federally Qualified Health Centers (FQHC) supported under Sections 330 of the "Public Health Service Act", and other Centers designated as FQHC Look Alikes to enable expanded hours of operation to evenings and weekends, and to promote community-based primary health care as an alternative to hospital emergency departments and enhance quality of care delivered. For 330s Community Health Centers, funds will be used to provide reimbursement for uninsured preventive and primary care visits.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
The availability of funds for this program is contingent on appropriation of funds to the Department. Approximately $50 million should be available in State Fiscal Year 2015 to support FQHCs participating in the program through a letter of agreement from July 1, 2014 to June 30, 2015.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
FQHCs participating, through a Letter of Agreement, in the FQHC Expansion Program.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Federal designation as a 330s FQHC or federal designation as a FQHC "look alike", and current or prior participation in the program.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
Department of Health
Office of Primary Care
Division of Family Health Services
50 E. State Street, P.O. Box 364, Trenton, NJ 08625

TELEPHONE: (609) 292-1495
FAX: (609) 292-3580
E-MAIL: linda.anderson@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Completed applications and/or signed agreements are due in the program office on the date specified in the RFA or Letter of Agreement.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Notification will be approximately 4-6 weeks after receipt of the completed Grant Application in SAGE.
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Primary Care Cooperative Agreement

STATUTORY AUTHORITY:
Public Health Service Act, Section 333D,
N.J.S.A. 26:1A-1S

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To assist members of the Primary Care Association in preparation of health professional shortage area applications, conduct primary care needs assessments, which are regional specific to Primary Care Association members’ needs and also target areas of interest identified by the Department of Health. To assist in recruitment and retention of National Health Service Corps providers specific to target member and Department areas of interest. Continuous award is based on satisfactory progress.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
The amount of award: Approximately $54,000. The availability of funds for this grant, April 1, 2014 to March 31, 2014, is contingent on sufficient Federal appropriation from the Bureau of Health Professions for Community Development.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
New Jersey Primary Care Association

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Ability to coordinate the development and expansion of primary health care delivery system capacity with members and Department areas of interest. Knowledge of Shortage Designation Branch regulations and guidance.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
Department of Health
Office of Primary Care
Division of Family Health Services
50 E. State Street, P.O. Box 364
Trenton, NJ 08625

TELEPHONE: (609) 292-1495
FAX: (609) 292-3580
E-MAIL: linda.anderson@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Application to be received by February 1, 2014.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Applicant notified by March 1, 2014 for grants starting April 1, 2014.
NOTICE OF GRANT AVAILABILITY

<table>
<thead>
<tr>
<th>NAME OF GRANT PROGRAM:</th>
<th>Rural Health Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>STATUTORY AUTHORITY:</td>
<td>Public Health Services Act P.L. 101-597 SEC 338J No State Authority</td>
</tr>
<tr>
<td>TYPE OF AWARDS TO BE ISSUED:</td>
<td>Cost-reimbursement</td>
</tr>
</tbody>
</table>

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To improve the health of people living and/or working in New Jersey rural areas and communities through a coordinated partnership of initiatives focused on health disparities; risk reduction; cultural competency; and provide technical assistance to public and nonprofit entities; and to promote the recruitment and retention of health professionals to work in rural areas.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Approximately $59,147 in Federal Health Resources and Services Administration (HRSA) funding should be available to fund one award. The awards will begin on or about July 1, 2014 and end June 30, 2015. Funds available for this program are contingent upon a Federal appropriations and is subject to change at any time without notice.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Nonprofit agencies incorporated within New Jersey with the ability to provide representation to constituents in federal and/or state defined rural areas.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Demonstrated history and understanding of health needs in rural areas of New Jersey. These issues include access to care, addressing health disparities and actual service delivery. See criteria outlined in the Request for Application (RFA) for additional qualifications.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
Department of Health
Office of Rural Health
Division of Family Health Services
50 E. State Street, P.O. Box 364, Trenton, NJ 08625

TELEPHONE: (609) 292-8540
FAX: (609) 292-3580
E-MAIL: lisa.jones@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Application to be received by May 1, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Applicant notified by June 15, 2014

FS-12
**NOTICE OF GRANT AVAILABILITY**

**NAME OF GRANT PROGRAM:**
Office of Emergency Medical Services - NJEMSTF

**STATUTORY AUTHORITY:**
Section 319C-2, as amended by P.L. 109-417
Funded by DoD & Appropriation Act (P.L. 112-10)

**GRANT PROGRAM NO.** 15-115-EMS

**TYPE OF AWARDS TO BE ISSUED:**
Cost Reimbursement

**PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:**
To enhance emergency preparedness planning and response activities for emergency medical services agencies throughout New Jersey.

**AMOUNT OF MONEY IN THE GRANT PROGRAM:**
Grants within this program may be competitive or non-competitive and amounts will vary based on the award amount to the State from the Federal government.

**ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:**
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

**GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:**
Approved Medical Coordination Centers that have been sanctioned as a New Jersey Emergency Medical Services Task Force (NJEMSTF) Host Agency for regions in the north, central and south parts of New Jersey.

**QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:**
Established Medical Coordination Centers (MCCs) that have been sanctioned as NJEMSTF Host Agencies.

**APPLICATION PROCEDURES:**
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: [www.sage.nj.gov](http://www.sage.nj.gov). The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

**FOR INFORMATION CONTACT:**
Ken Christensen
New Jersey Department of Health
Office of Emergency Medical Services
PO Box 360
Trenton, NJ 08625

**TELEPHONE:** (609)-633-7777
**FAX:** (609)-633-7954
**E-MAIL:** kenneth.christensen@doh.state.nj.us

**DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:**
This information will be included in the Request for Application (RFA).

**DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:**
On or about July 1, 2014
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
New Jersey Poison Information and Education System

STATUTORY AUTHORITY:
Poison Control/Drug Information Act
P.L. 1982, c. 177

GRANT PROGRAM NO. 15-40-EMS
TYPE OF AWARDS TO BE ISSUED:
Cost Reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To operate and maintain a statewide poison information and education system according to P.L.1982, c.177 (NJSA 26:2-119) including: a. provide service 24 hours a day, 7 days a week with qualified poison information specialists, including toll-free telephone access; b. serve as an answering point for other NJ Department of Health toll-free telephone numbers, as requested; c. provide associated education and information programs for health professionals and the public; and d. develop and distribute educational materials pertinent to environmental and storm-related hazards and exposures.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Approximately $787,000 may be available in State Fiscal Year 2015 to fund one award. Award will begin on or about July 1, 2014 and will be made for a 12-month budget period with a 12-month project period. Funding estimate may vary and is subject to the Annual Appropriation Act. Continued funding within the approved project period will be based on satisfactory progress and availability of funds for this purpose. Any applicant currently receiving Grants for this activity who has performed satisfactorily will be given priority for continued funding.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Any acute care hospital or American Association of Poison Control Centers (AAPCC) accredited poison center capable of operating a 24-hour, 7-days-a-week statewide poison information and education service in and/or for New Jersey may apply. Preference will be given to any continuation application or applicants currently meeting all criteria for "Certification of Poison Centers and Poison Center Systems" as specified by the AAPCC.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Applicants must have a toxicologist as this poison center medical director, as well as qualified poison information specialists to answer the telephone lines around the clock, and to handle approximately 70,000 calls annually. Applicants must meet all criteria for "Certification of Poison Centers and Poison Center Systems" as specified by the AAPCC.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

It is requested that this letter of intent or inquiry be submitted prior to April 4, 2014. Additional information about the grant submission process and deadlines will be included in the FRA which will be sent to each interested applicant upon receipt of the letter of intent. The grant year will be from July 1, 2014 to June 30, 2015.

FOR INFORMATION CONTACT:
William Duffy
New Jersey Department of Health
Office of Emergency Medical Services
PO Box 360
Trenton NJ 08625-0360

TELEPHONE: (609) 633-7777
FAX: (609) 633-7954
E-MAIL: william.duffy@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Applications must be submitted no later than 11:59 PM E.D.T. April 30, 2014 for a grant award beginning July 1, 2014.

**DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:**
Applicants will be notified on or about May 31, 2014 as to whether the application has been accepted and will be processed.

FS-12
NOV 10
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Healthcare Emergency Preparedness Program
MCC

STATUTORY AUTHORITY:
Section 319C-2 of the PHS Act
Section 2802(b) of the PHS Act

GRANT PROGRAM NO. 15-27-HBT

TYPE OF AWARDS TO BE ISSUED:
Cost - Reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To enhance emergency preparedness activities throughout the healthcare continuum. Projects will be based on Federal guidance, anticipated to be released April/May 2014.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Grants within this program may be competitive or non competitive; amounts will vary based on the award amount from the Federal Government.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
This will be dictated by the Federal guidance but it is anticipated that it will include established HPP funded emergency preparedness coalitions, established Medical Coordination Centers (MCCs); and not for profit healthcare Trade Associations and healthcare entities (including but not limited to; acute care general hospitals, long term care facilities, Federally Qualified Health Centers (FQHCs), Home Health Agencies).

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Entities listed above and healthcare entities licensed by NJAC Title 8 - Chapter 39,42,43A,43G,43H.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.
NJ DOH
PHILEP Division

FOR INFORMATION CONTACT:
New Jersey Department of Health
Rebecca McMillen
PO Box 360
Trenton, NJ 08048

TELEPHONE: 609-633-8350
FAX: 609-633-7954
E-MAIL: rebecca.mcmillen@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
This information will be included in the Request for Application (RFA).

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
On or about July 2014

FS-12
NOV 10
## Notice of Grant Availability

**Name of Grant Program:**
Public Health Emergency Preparedness-LHD

**Grant Program No.:** 15-29-BT

**Statutory Authority:**
L2001 Ch246 C.APPA.A:9-64-77
PHS 301(A), 317(K) (1)(2) 319 42USC241 (A)

**Type of Awards to Be Issued:**
Cost - Reimbursement

**Purpose for Which the Grant Program Funds Will Be Used:**
To upgrade local health departments' capacity, preparedness for and response and recovery for all-hazard incidents including: bioterrorism, pandemic influenza, outbreaks of infectious disease, and all other public health threats and emergencies. All activities will be focused on enhancing CDC's 15 Public Health Preparedness Capabilities.

**Amount of Money in the Grant Program:**
Up to $1 million dollars may become available in State Fiscal Year 2015. Individual awards will vary and could begin anytime after 07-01-2014. This funding estimate may vary and is subject to federal and/or state appropriations.

**Eligible Applicants Must Comply with the Following Requirements:**
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

**Group or Entities Which May Apply for the Grant Program:**
Eligibility is limited to local health departments in New Jersey, The New Jersey Association of County & City Health Officials (NJACCHO) that represent New Jersey's local health departments, and as applicable additional health preparedness coalition partners.

**Qualifications Needed by Applicant to Be Considered for a Grant:**
Must be a local health department under the direction of a full-time licensed health officer employed by the health agency and/or the NJACCHO whose membership is comprised of licensed health officers. Must have a record of satisfactory performance in prior grant activities as determined by NJDOH.

**Application Procedures:**
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: [www.sage.nj.gov](http://www.sage.nj.gov). The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

**For Information Contact:**
Carl Michaels  
New Jersey Department of Health  
Public Health Infrastructure, Laboratories and Emergency Preparedness  
P.O. Box 360  
Trenton, NJ 08625-0369  
TELEPHONE: 609-292-0290  
FAX: 609-943-5116  
E-MAIL: carl.michaels@doh.state.nj.us

**Deadline by Which Applications Must Be Submitted:**
This information will be included in the formal request for application and letter of intent.

**Date by Which Applicant Shall Be Notified Whether They Will Receive Funds:**
This information will be included in the formal request for application and letter of intent.

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FS-12  
NOV 10
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Public Health Emergency Preparedness-LINCS

STATUTORY AUTHORITY:
L2001 Ch246 C.APPA.A:9-64-77
PHS 301(A), 317(K) (1)(2) 319 42USC241 (A)

GRANT PROGRAM NO. 15-30-BT
TYPE OF AWARDS TO BE ISSUED: Cost Reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To upgrade regional public health preparedness planning, response, and recovery for all-hazard incidents including: bioterrorism, pandemic influenza, outbreaks of infectious disease, and all other public health threats and emergencies. All activities will be focused on enhancing CDC’s 15 Public Health Preparedness Capabilities.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Up to $8 million dollars is anticipated in State Fiscal Year 2015. Awards will begin on or about 07-01-2014 and will cover a twelve month period. This funding estimate may vary and is subject to federal and/or state appropriations.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Eligibility is limited to local health departments or county environmental health agencies designated by the New Jersey Department of Health as LINCS agencies and/or regionally designated public health preparedness entities.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Must be a local health department or county environmental health agency designated as a LINCS agency, and under the direction of a full-time licensed health officer employed by the health agency or a public health entity endorsed by the licensed health officers within the public health region. Must have a record of satisfactory performance in program activities as determined by NJDOH.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
Carl Michaels
New Jersey Department of Health
Public Health Infrastructure, Laboratories and Emergency Preparedness
P.O. Box 360
Trenton, NJ 08625-0369
TELEPHONE: 609-292-0290
FAX: 609-943-5116
E-MAIL: carl.michaels@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
This information will be included in the formal request for application and letter of intent.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
This information will be included in the formal request for application and letter of intent.

FS-12
NOV 10
**NOTICE OF GRANT AVAILABILITY**

**NAME OF GRANT PROGRAM:**
Special Child Health & Early Intervention Services  
Case Management

**GRANT PROGRAM NO.** 15-57-SCH

**STATUTORY AUTHORITY:**
N.J.S.A. 26:1A-37; Title 26:2H-1 Hlth. Care Facil.  
Planning Act N.J.S.A. 26:2-60 N.J.S.A. 9:13 et

**TYPE OF AWARDS TO BE ISSUED:**
Cost-Reimbursement

**PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:**
To provide partial support to twenty-one (21) existing Special Child Health Services Case Management Units. To assure that children with special health needs will have their care coordinated, and that parents receive assistance in addressing the needs of their children. In addition, funding is used to provide family support.

**AMOUNT OF MONEY IN THE GRANT PROGRAM:**
Funds available for this program are contingent upon State and Federal appropriations. It is expected that 21 county grants will be supported in SFY 2015. Approximately $5,775,925 million is awarded annually.

**ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:**
1. Terms and Conditions for the Administration of Grants  
2. General and specific Grant Compliance requirements issued by the Granting Agency.  
3. Applicable Federal Cost Principles relating to the Applicant

**GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:**
Funding is limited to one case management unit in each county selected jointly by the County Board of Chosen Freeholders and Special Child Health Services, and one family support network.

**QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:**
Must be a private non-profit or government agency with proven experience serving the special health needs of physically handicapped or chronically ill children. Must be able to provide services on a county-wide basis. Preference will be given to continuation of existing applicants who have performed satisfactorily.

**APPLICATION PROCEDURES:**
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: [www.sage.nj.gov](http://www.sage.nj.gov). The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

Applicant must be capable of meeting certain criteria established by program, which is available upon request from the address listed below.

**FOR INFORMATION CONTACT:**
New Jersey Department of Health  
Bonnie Teman  
Special Child Health and Early Intervention Services  
PO Box 364  
Trenton, NJ 08625-0364

**TELEPHONE:** (609) 777-7778  
**FAX:** (609) 292-3580  
**E-MAIL:** bonnie.teman@doh.state.nj.us

**DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:**
Application deadline is April 1, 2014.

**DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:**
Notification of award will be made on/or about May 15, 2014.
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Special Child Health & Early Intervention Services
Child Evaluation Centers

GRANT PROGRAM NO. 15-58-SCH

STATUTORY AUTHORITY:
N.J.S.A. 26:2-60; N.J.S.A 26:5B-1, Title V of the
Social Security Act, MCH Block Grant

TYPE OF AWARDS TO BE ISSUED:
Cost-reimbursement Grants

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
Child Evaluation Centers are funded to provide a variety of evaluative services to assess the needs of children with
congenital or acquired neurodevelopmental disorders including communication, learning and behavioral
disorders.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Funds available for this program are contingent on State and Federal appropriations as well as some Casino funds.
Approximately $2.3 million is expected to be available to support 10 centers.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Public and private non-profit medical facilities which are licensed in New Jersey, and accredited by the Joint
Commission on Accreditation of Healthcare Organizations.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Applicant must meet the criteria for funding available from the program. Preference will be given to continuation of
existing applicants who have performed satisfactorily.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept
paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s
System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet
website address: www.sage.nj.gov The Request for Applications (RFA) can be obtained by writing or calling the
office listed below.

Applicant must be capable of meeting certain criteria established by program, which is available upon request from the
address below.

FOR INFORMATION CONTACT:
Jo-Ann Ayres
Special Child Health and Early Intervention Services
PO Box 364
Trenton, NJ 08625-0364

TELEPHONE: (609) 777-7778
FAX: (609) 292-3580
E-MAIL: JoAnn.Ayres@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Application deadline is April 18, 2014.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Notification of award will be made on/or about May 21, 2014.
### NOTICE OF GRANT AVAILABILITY

#### NAME OF GRANT PROGRAM:
New Jersey Early Intervention System (NJEIS)

#### STATUTORY AUTHORITY:
- P.L. 108-446 (Part C, IDEA)
- P.L. 1993, Chapter 309

#### GRANT PROGRAM NO. 15-61-SCH

#### TYPE OF AWARDS TO BE ISSUED:
- Cost - Reimbursement

#### PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To provide support for a statewide network of early intervention services for developmentally delayed/disabled children, birth to three, and their families.

#### AMOUNT OF MONEY IN THE GRANT PROGRAM:
Approximately $140,000,000 should be available in SFY 2015 to fund four Regional Early Intervention Collaboratives (REICs), 13 Service Coordination Units (SCUs), and approximately 70 Early Intervention Program Provider agencies (EIPs), and ranging from $100,000 to $3,000,000. Grant awards will begin on or about July 1, 2014 and will be made for a 12 month budget period. Funding estimates may vary and are subject to the Annual Appropriation Act. Continuation awards are based on satisfactory progress and availability of funds.

#### ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

#### GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
For-profit (LOA only) or not-for-profit corporation, government agency, hospital, school, college, or university.

#### QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Demonstrated ability and capacity to meet the programmatic requirements; certified financial audit for the most recent completed fiscal year, by an independent auditor; demonstrated successful experience providing services to infants/toddlers, birth to age three, with developmental delay and their families.

#### APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: [www.sage.nj.gov](http://www.sage.nj.gov). The Request for Applications (RFA) can be obtained by writing or calling the office listed below. Through open-ended LOAs, EIPs are paid fee-for-service. Announcements for potential new provider agencies will be posted at http://nj.gov/health/fhs/eis/index.shtml. Formal Request for Application (RFA) will be published by the NJEIS based on an identified need for agencies or special projects. Submit grant applications according to RFA.

#### FOR INFORMATION CONTACT:
- New Jersey Department of Health
- Terry Harrison, Part C Coordinator
- New Jersey Early Intervention System
- P.O. Box 364
- Trenton, NJ 08625-0364

**TELEPHONE:** 609-777-7734  
**FAX:** 609-777-7739  
**E-MAIL:** terry.harrison@doh.state.nj.us

#### DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
The schedule can vary by type of grant. Schedules will be included in the RFAs. Typically, RFAs are released prior to March and application deadline is 30 days after release of RFA.

#### DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
In general, Notification of Awards is prior to July 1, 2014 unless otherwise specified in an RFA.
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Special Child Health & Early Intervention Services
Hemophilia Services

GRANT PROGRAM NO.  15-62-SCH

STATUTORY AUTHORITY:  N.J.S.A. 26:2:90

TYPE OF AWARDS TO BE ISSUED:  Cost-Reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To provide partial support to currently funded regional hemophilia treatment services for patients residing in New Jersey and to provide partial support for the purchase of insurance policies for individuals with hemophilia on home care/infusion treatment.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Funds available for this program are contingent upon state appropriations. It is expected that approximately $1.2 million will be available in SFY 2015 to fund four health services grants and one insurance grant. The grant period is from July 1, 2014 to June 30, 2015.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
A portion of these funds are granted to the Hemophilia Association of NJ as a sole source grant for the purchase of insurance policies. New Jersey medical schools and public and private non-profit hospitals with experience in caring for those with hemophilia in New Jersey may apply for the direct services funds. Priority will be given to continuation applications from regional treatment programs.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Applicant must meet "Approval Criteria Guidelines for Hemophilia Services" which are available on request from the address listed below. Preference will be given for continuation to existing grantees with satisfactory performance.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
New Jersey Department of Health
Barbara L. Hall, MSN
Special Child Health and Early Intervention Services
PO Box 364
Trenton, New Jersey 08625-0364

TELEPHONE: (609) 292-1582
FAX: (609) 943-5752
E-MAIL: barbara.hall@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Applications must be received by April 16, 2014 for funding to begin July 1, 2014.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Notice of recommendation of award will be made on or about May 15, 2014.
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
N.J. Statewide Family Centered HIV Care Network

STATUTORY AUTHORITY:
Public Health Service Act, Sec. 2671 142USC300
P.L. 101-381 Ryan White Part D

GRANT PROGRAM NO. 15-65-SCH
TYPE OF AWARDS TO BE ISSUED: Cost-Reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To provide comprehensive, culturally sensitive, coordinated medical care for infants, children, youth, women and families with HIV infection. Referrals are made to appropriate ancillary medical and community-based social service support care organizations. This assures access to medical and social services for families without adequate resources.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Funds available for this program are contingent upon State or Federal Appropriations. It is expected that 7 grants will be supported. Approximately $2,000,000 is awarded annually. The grant period is from August 1, 2014 to July 31, 2015.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Public and private non-profit hospitals, health care agencies with experience in providing the medical care for HIV infected infants, children, women and families in New Jersey. Priority will be given to existing regional/affiliate Network agencies.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Applicants must meet criteria for funding available from the program. Preference will be given to continuation of existing applicants who have performed satisfactorily. If additional/supplemental funds become available, agencies meeting program criteria will be solicited for participation through the RFP process.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.
Applicant must be capable of meeting certain criteria established by program, which is available upon request from the address listed below.

FOR INFORMATION CONTACT:
New Jersey Department of Health
Special Child Health and Early Intervention Services
Ellen Dufficy
PO Box 364
Trenton, NJ 08625-0364
TELEPHONE: (609) 777-7795
FAX: (609) 292-9288
E-MAIL: Ellen.Dufficy@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Application deadline is May 2, 2014.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Notification of award will be made on or about August 1, 2014.

FS-12
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Newborn Screening and Genetic Services

STATUTORY AUTHORITY:

GRANT PROGRAM NO.
15-64-SCH

TYPE OF AWARDS TO BE ISSUED:
Cost-Reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To provide partial support to the regional agencies providing pediatric specialty care for infants and children identified through newborn biochemical screening to ensure access to confirmatory testing, comprehensive treatment and counseling services and professional, patient and community education/information.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
It is expected that approximately $2.5 million will be available in SFY 2015 to support the Special Child Health and Early Intervention Services (SCHEIS) statewide network of pediatric specialty centers that serve children with low incidence conditions such as cystic fibrosis, sickle cell disease, metabolic, endocrine and other disorders and that provide genetic services to New Jersey residents of all ages. The grant period is from July 1, 2014 to June 30, 2015.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
New Jersey medical schools and public and private non-profit hospitals with experience in caring for those with inherited disorders identified through the newborn biochemical screening program. Preference will be given to continuation applications from regional programs.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Applicant must be capable of meeting minimum criteria guidelines which are available on request from the address listed below. Preference will be given for continuation to existing grantees with satisfactory performance.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
New Jersey Department of Health
Special Child Health and Early Intervention Services
Barbara L. Hall, MSN
TELEPHONE: (609) 292-1582
PO Box 364
FAX: (609) 943-5752
Trenton, New Jersey 08625-0364
E-MAIL: barbara.hall@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Applications must be received by April 16, 2014 for funding to begin July 1, 2014

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Notice of recommendation of award will be made on or about May 15, 2014

FS-12
NOV 10
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Pediatric Tertiary Services

GRANT PROGRAM NO. 15-66-SCH

STATUTORY AUTHORITY:
N.J.S.A. 26:2-60; N.J.S.A 26:5B-1, Title V of the Social Security Act, MCH Block Grant

TYPE OF AWARDS TO BE ISSUED:
Cost-Reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To provide partial support to regional agencies providing pediatric subspecialty care for infants and children with chronic illness or severe disabilities, to assure access for children with special needs, especially those without adequate resources.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
It is expected that approximately $1.8 million will be available in SFY 2015 to support the Special Child Health and Early Intervention Services (SCHEIS) statewide network of pediatric subspecialty centers and centers to provide comprehensive care for children with cleft lip/palate and craniofacial anomalies.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Public and private non-profit medical facilities which are licensed in New Jersey, and accredited by the Joint Commission on Accreditation of Healthcare Organizations.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
Applicant must meet the criteria for funding available from the program. Preference will be given to continuation of existing applicants who have performed satisfactorily.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
New Jersey Department of Health
Special Child Health and Early Intervention Services
Jo-Ann Ayers
PO Box 364
Trenton, NJ 08625-0364

TELEPHONE: (609) 777-7778
FAX: (609) 292-3580
E-MAIL: JoAnn.Ayres@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Application deadline is April 18, 2014.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Notification of award will be made on/or about May 21, 2014.

FS-12
NOV 10
NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:
Special Supplemental Nutrition Program for Women, Infants and Children (WIC)

GRANT PROGRAM NO. 15-68-WIC

STATUTORY AUTHORITY:
Childhood Nutrition Act of 1966, as amended and WIC Federal Regulations 7 CFR Part 246

TYPE OF AWARDS TO BE ISSUED:
Cost-Reimbursement

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:
To improve the nutrition and health status of eligible pregnant and lactating women and eligible children; encourage the utilization by each WIC participant of available health and social services; promote breastfeeding among all eligible lactating women; and provide fresh fruits and vegetables to eligible WIC women and children.

AMOUNT OF MONEY IN THE GRANT PROGRAM:
Approximately $26,700,000 should be available in Federal fiscal year 2015 to fund 19 awards. It is expected that the average award will be $1,405,015, ranging from $160,999 to $3,064,153. Awards will begin October 1, 2014 and will be made for a 12-month budget period. Funding estimates may vary and are subject to annual appropriation by the US Department of Agriculture (USDA). Applicants currently receiving grants for these activities, who have performed satisfactorily, will be given first priority for continued funding.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:
1. Terms and Conditions for the Administration of Grants
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:
Public or private non-profit health agencies, county and municipal health departments, hospitals, county welfare organizations, social services organizations that can provide clinical services, and non-profit community action programs that can provide or contract for clinical services.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:
2. The ability to perform program services as stated above, and
3. Meet state policies and federal program specifications.

APPLICATION PROCEDURES:
An application for a Grant is to be submitted electronically and upon receipt of a letter of intent, inquiry or concept paper sent to the address listed below. Eligible agencies are to submit grant applications through the Department’s System for Administering Grants Electronically (SAGE). Eligible agencies must register at the following internet website address: www.sage.nj.gov. The Request for Applications (RFA) can be obtained by writing or calling the office listed below.

FOR INFORMATION CONTACT:
New Jersey Department
WIC Services
Mary Mickles, Director
50 E. State St., PO Box 364
Trenton, NJ 08625-0364

TELEPHONE: (609) 292-9560
FAX: (609) 292-3580
E-MAIL: Mary.Mickles@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:
Applications must be received by August 1, 2014.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:
Grant awards will be made on or before October 1, 2014.