**Representative Suzan K. DelBene (WA-01)**

**FY 2022 Community Project Funding Requests**

**Health and Human Services—Substance Abuse and Mental Health Services Administration—Health Surveillance and Program Support Account**

Submit this form to Shanta Katipamula (shanta.katipamula@mail.house.gov) no later than **April 5, 2021.**

**Submission Guidelines:**

Please read the eligibility criteria and selection guidance carefully before submitting a request. Submission of this information does not create a binding commitment on any party nor a guarantee that any organization or program will be awarded funding from any federal agency. Once submitted, this request may be made publicly available.

For-profit entities are not eligible to apply for Community Project Funding. Only the following entities may apply:

* State, local and tribal governments
* Publicly owned entities (e.g. ports, universities, PUDs, etc.)
* Certain non-profit entities with a quasi-government purpose (e.g. Special Districts)
* Non-profit organizations

Please note that each Appropriations Subcommittee has account specific questions that must accompany each request. The first section of this form is information required by our office for all requests. The second section of this form includes questions that are required by each subcommittee for each account. Please be sure to fill out all of the questions that correspond to the account your request falls under.

**Department of Health and Human Services—Substance Abuse and Mental Health Services Administration—Health Surveillance and Program Support:**

Community project funding within SAMHSA should be submitted through the Health Surveillance and Program Support account. Community project funding must fall under one of the following categories:

* + Mental Health—grants to support programs that promote the prevention or treatment of mental health disorders, including rehabilitation, outreach, and other support services.
	+ Substance Abuse Treatment—grants to support programs that improve access, reduce barriers, and promote high quality, effective treatment and recovery services.
	+ Substance Abuse Prevention—grants to support programs to prevent the onset of illegal drug use, prescription drug misuse and abuse, alcohol misuse and abuse, and underage alcohol and tobacco use.

Community project funding cannot be used for construction (other than a limited amount of renovation necessary to carry out a funded project).

Additional guidance with specific information about these accounts is [attached](https://appropriations.house.gov/sites/democrats.appropriations.house.gov/files/LHHS%20Request%20Guidance.pdf)

Staff Contact: Kyle Hill (Kyle.Hill@mail.house.gov)

**Questionnaire:**

Requesting Organization:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- |
| **D.C. Contact** | **Local Contact** |
| NameMailing Address City, State ZipPhone NumberFax NumberE-Mail Address  | NameMailing Address City, State ZipPhone NumberFax NumberE-Mail Address  |

**All Requests**

|  |  |  |
| --- | --- | --- |
|  | **Agency** | **Account** |

1. This is request **x of x** submitted to this office.
2. Are you making this request to other offices?
3. If yes, please list other offices receiving this request:
4. Briefly but specifically, how does this project or program impact the 1st Congressional District of WA?
5. Eligibility of requesting entity or organization (please highlight the one applicable to your organization)
	1. State, local, or tribal government
	2. Publicly owned entity (e.g. port, university, PUD, etc.)
	3. Non-profit entity with a quasi-governmental purpose (e.g. Special District)
	4. Non-profit organization
6. Name of the project or program to be funded
7. Physical location of the project or program (including street name, city, and zip code)
8. Amount requested
9. Detailed breakdown of the total cost of the project or program that includes all prior sources (both public and private) and any amounts that remain unfunded
10. Have you previously applied for federal funds for this project or program? If yes, to which programs have you applied and what and what has been the outcomes of those applications.
11. If this project or program has previously been awarded federal funds, please list the total amount of federal funds previously awarded
12. Detailed breakdown of how the requested funds would be spent
13. Once completed, will the project or program require continued funding to maintain operation? If so, where will that funding come from?
14. Provide a detailed description of the project or program to be funded including data and/or evidence that demonstrates the public benefit.
15. Justification for why this project represents a good use of taxpayer dollars.
16. Describe any long-term job creation that will result from this project.
17. Will this project have a revenue-generating component that would have community and state economic benefit? If so, please describe and quantify.
18. Detailed timeline and anticipated start date and completion date for the project or program.
19. Federal agency that would administer this funding.
20. List any public or private entities that have been identified as project sponsors in prior funding requests and/or that will help determine how the requested funds will be spent.
21. List any stakeholders that support this request.
22. Please provide any letters of support from local stakeholders, press articles and editorials, project listed on state use or planning documents, local resolutions passed in support, or other documents that demonstrate community support and commitment to this request.
23. Are there any known or anticipated community concerns associated with this project or program (e.g. conflict with land use, neighborhood concerns, etc.) that could prevent it from moving forward?

**Subcommittee/Account Specific Questions:**

1. Please provide a budget breakdown.

2. One-Year Funding? (Yes/No)

3. Please provide an explanation of the request, including an explanation of why this is a good use of taxpayer funds

4. Sources of Federal and Non-Federal Funds

5. Please provide a history of federal funding for the project, if any. Include both formula funds and any discretionary grants and fiscal years

6. If the request does not fully fund the project, describe where the remaining funding comes from to complete the project

7. Please indicate if you are aware of another Member making a request for this same project (Yes/No)