



Opioid Settlement Funds

Application - 2024

Responsible Party: _____ Date: ___/___/___

Contact Name: _____ Contact Email: _____

Contact Phone: (____) ____-____ Organization Address: _____

Time Frame: _____

Questions to be answered by the applicant, along with the criteria reviewers will use to evaluate the responses, are below. Unless otherwise specified, applicant responses are limited to 5,000 characters.

Evidence Based Strategy – 20 Points

Describe how the proposal uses an Evidence Based Strategy.

Feasibility – 25 Points

Demonstrate that the organization has the ability to deliver on the proposal.

Evaluation – 15 Points

Submit a work plan listing outcomes to be measured.

Suitability – 25 Points

Indicate how the proposal fits Montcalm County’s needs. How will the proposal be sustainable? Will the proposal involve a person or persons with lived experiences?

Equity – 5 Points

Describe how the project addresses community needs in a fair and equitable manner.

Reach – 5 Points

Describe how the project reaches/targets those most impacted by the opioid epidemic in Montcalm County.

Additional Items – 5 Points

Indicate how the budget is comprehensive and meets the criteria for indirect costs not exceeding 15% of awarded funds.

Applicant Signature: _____

Date: ___ / ___ / _____