

There are no live links in this PDF. Once the funding period begins and the link to the application goes live, the links in the electronic application will be live. All applications must be submitted through the online application link provided on the OERSSIRF page once the application process goes live.



The following demographic information is being asked for data collection and contact information purposes only. The answers provided on this page will not be scored. A link to the scoring rubric, also known as a scoring tool, will be provided on the next page at the point where the scorable application begins.

Agency or entity name:

Agency or entity address:

Main point of contact (POC) name:

Main POC email address:

Main POC phone number:

Project title:

List of cities and/or counties which would directly benefit from the proposed project:





The scoring rubric can be accessed by clicking [here](#). If helpful, you may keep the rubric open in a separate tab as a reference while you complete your application. The rubric and other OERSSIRF information can also be found on the EMS OERSSIRF page of the health department website, which can be accessed by clicking [here](#).

Please note, preference will be given to projects with a main focus of the priority for this funding cycle as determined by EMS providers across the state. Capital and equipment needs were identified as the top priority by providers through the electronic survey process in November 2022. Results from the priority survey can be found on the State Department of Health website OERSSIRF page, referenced above.

It is permissible to submit more than one application. However, if you submit multiple applications, you will be asked to rank them in order of priority. The highest priority application for each applicant be scored and funded as funds are available when minimum scoring thresholds are met before additional applications are processed. Additional applications will only be scored if funds remain after applicant self-identified, top priority applications are scored.

Will you be submitting multiple applications this funding cycle?

☐ Yes

☐ No

If yes, how many applications will you be submitting this funding cycle? If no, write "NA" in this box.

If you will be submitting multiple applications, where does this application rank in terms of priority of the applications you are submitting? Example: If you are submitting three applications and this is the most important of those three (3), you would rank this application "one (1) of three (3)." Please note, you may not submit more than one application ranked as your highest priority. Each application should have a different rank.

Select one of the following options to indicate the main statutory purpose of the proposed project. It is possible for a project to address more than one statutory purpose. However, you must select the main purpose of the project so applications can be scored in order of priority established for this funding cycle.

- ☐ Activities identified by agency needs assessment
- ☐ Stabilization and/or reorganization of at-risk emergency medical services
- ☐ Development of regional emergency medical services
- ☐ Training for emergency medical directors
- ☐ Access to training front line emergency medical services personnel
- ☐ Capital and equipment needs

Briefly describe the proposed project for which you are requesting funding.

Would this project be possible without OERSSIRF funding?

- ☐ Yes
- ☐ No

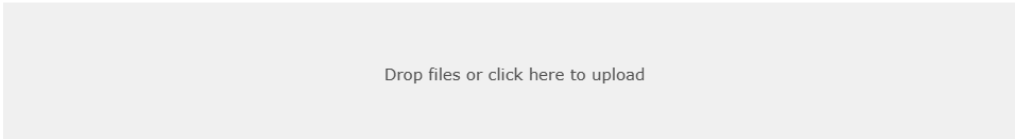
Describe the financial need for OERSSIRF funding to support this project. The answer to this question should be a written explanation. No supporting budget documents are required.

A large, empty rectangular text box with a thin black border, intended for a written explanation of the financial need for OERSSIRF funding.

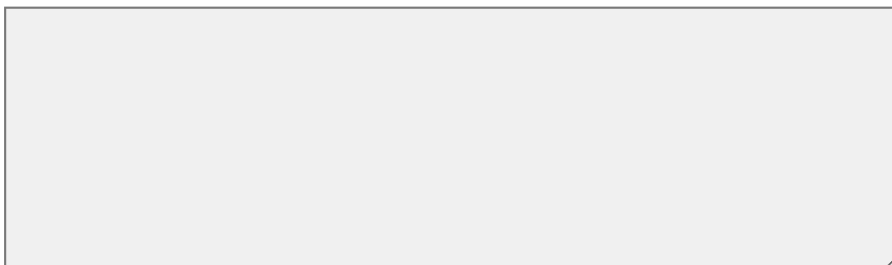
Describe how existing infrastructure will support this project to promote stabilization and/or improvement of Emergency Response Systems.

A large, empty rectangular text box with a thin black border, intended for a description of how existing infrastructure will support the project.

Upload a copy of your most recent needs assessment with the date it was completed.

A light gray rectangular area containing the text "Drop files or click here to upload" in the center, serving as a file upload interface.

Describe how your most recent needs assessment highlights one or more areas of risk this project will address in order to promote stabilization and/or improvement of Emergency Response Systems. In your response, include specific details on the location of information relevant to the proposed project within your needs assessment (i.e. page, section numbers, etc.) and the correlation of those items to the proposed project.

A large, empty rectangular text box with a thin black border, intended for a detailed description of how the needs assessment highlights areas of risk and their correlation to the project.

Provide the measurable objectives you will use to gauge the successfulness of the proposed project. List objectives in order of importance (beginning with the most important).

What is the total anticipated cost for the proposed project?

What amount of OERSSIRF funding are you requesting for the project?

Would your agency or entity be able to complete the proposed project with partial funding of the amount being requested?

☐ Yes

☐ No

If yes, what is the minimum amount of OERSSIRF funds required to implement the proposed project as described? If no, please write "NA" in the box.

Thank you for applying to receive OERSSIRF funds. Once project applications are scored, you will be notified of the status of your application. Please click the arrow button below to submit your application for review.





We thank you for your time spent taking this survey.
Your response has been recorded.