ATTACHMENT A
SUBMISSION FORM

Please return all submission documents to: dcbs.opportunity@oregon.gov

Prooser Organization Information

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<th>Organization Name:</th>
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<td>DBA:</td>
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<td>Street Address:</td>
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<td>Mailing Address:</td>
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<td>Executive Director:</td>
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<td>Phone #:</td>
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<td>Website:</td>
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<td>Mission Statement:</td>
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Prooser Contact Information:

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<th>Name:</th>
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<td>Title:</td>
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Grant Request

Please answer the following questions.

We value brevity, so unless indicated, answers should be short and to the point. Each answer must be 300 words or less. Answers that go over that limit, will result in a point deduction of 5 points per occurrence.

Financial Empowerment Work  40 Points

2. Briefly describe your organization’s financial empowerment work. What kind of activities are undertaken? (25 Points)

Insert Text Here
a) If insurance or financial education classes are part of your financial empowerment work, please submit one lesson plan as an example of your curriculum. If you have a lesson on insurance, please send that as your example. (5 points)

3. Describe how your organization evaluates the effectiveness of your financial empowerment work? (10 points)

   *Insert Text here*

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**Who do you serve**

50 Points

4. Describe your organization’s geographic service area. Include population size and the demographics of the area

   *Insert Text here*

5. How many people did your financial empowerment program serve per year in 2018, 2019, 2020, and 2021? (20 Points)

   *Insert Text here*

6. Describe the demographics of the people your financial empowerment program serves (10 Points)
   - If your organization’s program has an emphasis on women, please describe. (5 points)

   *Insert Text here*

7. Describe your organization’s approach to diversity, equity and inclusion in your financial empowerment work. (15 Points)

   *Insert Text here*
**Program Description**

Please note the word limit of 300 words does not apply to your Program Description.

| 8. | Describe the specific financial empowerment activities and events that will be funded by the Program. **(70 points)** |

The description should include:
- Quantifiable indicators of activities, such as number of classes, number of participants or number of events
- Time period for the activities, for example by X month or by end of year.

The description should include how the Agency can sponsor the activity or event. Below is a list of examples. Please note there can be no political advocacy, candidate endorsements or politicking allowed at any event Agency sponsors.

**Examples:**
- Facilitating financial education classes, especially on the topics of insurance
- Presenting DFR's insurance information and resources at financial empowerment events and resource fairs
- Tabling at events to promote insurance information, and other topics related to the financial services the division regulates.
- Serving as a panelist or guest speaker to discussion insurance, and other topics related to the financial services the division regulates.
- Amplifying DFR’s messages, including linking your website to DFR website, share DFR social media posts and stream DFR classes and events

**Example of how an activity could be listed in the description:**

a) Organize and provide (insert number) insurance and financial education classes in person or virtual per year:
   i) Include DFR materials in insurance curriculum or financial services curriculum in the classes
   ii) Coordinate with DFR outreach staff so they can serve as guest speakers or co-facilitators for at least (insert number) insurance classes per year.
   iii) Promote DFR as sponsor of the insurance classes

*Insert Text here*
9. If provided virtually, or at no cost, is your staff able to i. attend annual training of trainers by Agency staff to expand your staff’s capacities to train on topics of insurance, financial services and Agency’s role in consumer protection and ii. participate in consumer roundtable discussions on finance and insurance on an annual basis? (5 points)

*Insert Text here*

Note, the packet you submit should include the following:

10. **Eligibility Confirmation**

   a) If you are a nonprofit, provide your 501(c)(3) determination letter and your most recent CT-12 filing with the Oregon Department of Justice.
   b) If you are a public school, provide the name of your school district and affirm that you are in good standing with the Oregon Department of Education.
   c) If you are a public chartered school, affirm that you have a current contract with your local board of education that will not expire during the sponsorship period.
   d) If you are a tribal entity, affirm that you are part of one of the nine Federally recognized tribes based in Oregon.

11. Lesson plan as attachment:
   a) One insurance curriculum lesson plan, if applicable, or
   b) One financial education lesson plan, if applicable

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Proposer Signature __________________________ Date __________________________