**Ohio Adult Allies**   
**Ready to Start Learning Opportunity**

**Learning Opportunity**  
Ohio University’s Voinovich School of Leadership and Public Service, with support from the Ohio Department of Mental Health and Addiction Services, are collaborating to offer the Ready to Start learning opportunity. This program is ideal for youth-serving organizations and schools who have the existing administrative support for youth-led programming, knowledge of the Strategic Prevention Framework (SPF), and infrastructure to implement a youth-led program.

**Background and Intent**  
The purpose of this learning opportunity is to seek organizations that are committed to implementing a youth-led program. Upon completion of the program, organizations will have a program grounded in the Youth Empowerment Conceptual Framework (YECF) and a roadmap for working with youth to create community change.

The Ready to Start opportunity is a hybrid training program that will highlight the YECF and SPF frameworks. Ready to Start participants will be responsible for actively engaging in all learning sessions and completing intersession assignments.

**Eligible Applicants**

* Organizations whose applying participants have a history of working with young people.
* Organizations whose applying participants have existing data focused on issues affecting young people in their community.
* Applicants who have organizational support to participate in sessions, complete deliverables and intersession assignments, and can provide proof of supervisor approval to participate.
* Organizations whose applying participants have prior knowledge of the Strategic Prevention Framework (SPF) and have proof of completing SPF training.
  + If you would like to complete a course prior to application, please review these options:
    - <https://www.addictioncounselorce.com/courses/103535/a-guide-to-samhsas-strategic-prevention-framework>
    - <https://externallinks.samhsa.gov/samhsas-strategic-prevention-framework-spf/#/>
    - Completion of SAPST training
  + If you do not have a certificate and are unable to secure one prior to application, please provide a narrative of your understanding of the SPF.

**Funding and Timeframe**  
Organizations may receive up to $5,000 in funding to cover staff time, substitute teacher contracts, and travel. This is an 8-month commitment beginning in November 2024 and ending June 30, 2025.  
\*\*\*\* This opportunity is limited to 15 youth-serving organizations.  
  
**Ready to Start Session Dates**  
Participants are expected to attend all 7 training sessions (two in-person, five virtual).

|  |  |
| --- | --- |
| **In-Person Sessions (9:30am-2:30pm)** | **Virtual Sessions (9:30am-10:30am)** |
| Friday, December 13, 2024 | Friday, November 1, 2024 |
| Friday, June 13, 2025 | Friday, February 7, 2025 |
|  | Friday, March 7, 2025 |
|  | Friday, April 11, 2025 |
|  | Friday, May 9, 2025 |

**Continuing Education Credit**  
A total of 13 Prevention and CHES CEs will be applied for.    
  
**Questions and Technical Assistance**  
For questions about this opportunity or for technical assistance with submissions, please contact Ohio Adult Allies ([ohioadultallies@ohio.edu](mailto:ohioadultallies@ohio.edu)) by **Monday, October 14, 2024.**  
  
**Application Submission**

Applications must be submitted no later than **Wednesday, October 23, 2024**.

**Proposal Evaluation**  
  
Proposals will be scored using the point values provided below.

|  |  |
| --- | --- |
| **Ready to Start Application Scoring Rubric** | |
| **Proposals will be scored on technical merit. Point values are provided.** | **Max Rating** |
| 1. **Cover Sheet** | **1** |
| Organization Information | 1 |
| 1. **Program-Specific Information** | **19** |
| Description of work with youth and the broader prevention field and prior knowledge of and experience working with the SPF. | 3 |
| Identification of data topics and sources. | 4 |
| Candidate description(s) and qualitfication(s) | 4 |
| Candidate interest in the opportunity | 4 |
| Proof of completion of SPF training. | 2 |
| Proof of supervisor approval for participant(s). | 2 |
| **Total Score** | **20** |

Thank you for your interest in engaging in the Ohio Adult Allies Ready to Start opportunity. After submitting your application, you will receive a confirmation email from Ohio Adult Allies ([ohioadultallies@ohio.edu](mailto:ohioadultallies@ohio.edu)).  
  
For more information about Ohio Adult Allies and our opportunities, please visit our [website](https://ohioadultallies.com/).

**Application Content**

Q1. Have you reviewed the information from the Ready to Start application template on the Ohio Adult Allies website and collected all necessary materials to begin your application?

* Yes
* No- *If “No”, please visit the Ohio Adult Allies website to view details and expectations provided in the Ready to Start Application Template before proceeding with the application.*

**Organization Information:**

Q1. Organization Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q2. Organization Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q3. Organization Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q4. Organization Mission and Vision \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q5. In what year was the organization established? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q6. Organization Website \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q7. Organization Social Media Page(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q8. Organization Federal Tax ID # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q9. Organization Contacts (name and email address)

CEO/Executive Director \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

President, Board of Directors \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fiscal Officer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program Contact #1 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Program and Candidate Specific Information:**

Q1. Please describe your organization’s work with youth and the broader prevention field as well as knowledge of and experience working with the SPF. (500 words max.)

Q2. Please identify the topic areas of current data you have around youth and the data source(s).

Q3. Who will participate in this learning opportunity, what are their qualifications, and area(s) of interest?

**Participant #1**

* Name
* Email address
* Qualifications (specify work with youth & prevention-related experience & strategic planning using the SPF) \*\*500 word max per participant

Q4. Please select the type(s) of CEs you will seek for participation and add your license number in the space provided.

**Participant #1**

* RA \_\_\_\_\_\_\_\_\_\_\_
* OCPSA \_\_\_\_\_\_\_\_\_\_\_
* OCPS\_\_\_\_\_\_\_\_\_\_\_
* OCPC \_\_\_\_\_\_\_\_\_\_\_
* CHES \_\_\_\_\_\_\_\_\_\_\_
* MCHES \_\_\_\_\_\_\_\_\_\_\_

Q5. Who will participate in this learning opportunity, what are their qualifications, and area(s) of interest?

**Participant #2**

* Name
* Email address
* Qualifications (specify work with youth & prevention-related experience & strategic planning using the SPF) \*\*500 word max per participant

Q6. Please select the type(s) of CEs you will seek for participation and add your license number in the space provided.

**Participant #2**

* RA \_\_\_\_\_\_\_\_\_\_\_
* OCPSA \_\_\_\_\_\_\_\_\_\_\_
* OCPS \_\_\_\_\_\_\_\_\_\_\_
* OCPC \_\_\_\_\_\_\_\_\_\_\_
* CHES\_\_\_\_\_\_\_\_\_\_\_
* MCHES\_\_\_\_\_\_\_\_\_\_\_

Q7. Do you have more than two staff interested in this opportunity? Ohio University will reach out if space is available.

Q8.. Why are you interested in engaging in this learning opportunity? (500 words max.)

**Attendance and Participation:**   
Q1. Attendance and active participation (for virtual meetings this means camera on) in this learning opportunity is essential. This is a hybrid structure with the sessions taking place on Fridays at the following dates and times:  
  
November 1, 2024- Virtual (9:30am-10:30am)  
December 13, 2024- In-Person in Dublin, Ohio (9:30am-2:30pm)  
February 7, 2025- Virtual (9:30am-10:30am)  
March, 7, 2025- Virtual (9:30am-10:30am)  
April 11, 2025- Virtual (9:30am-10:30am)  
May 9, 2025- Virtual (9:30am-10:30am)  
June 13, 2025- In-Person in Dublin, Ohio (9:30am-2:30pm)  
  
***\*Please hold these dates and times on your calendar and meeting details will be confirmed should your application be accepted.***  
  
Do you have any scheduling conflicts with the schedule?

* No
* Yes- If yes, please specify which dates you are unable to attend.

Q2. Do the applying participants have full support and commitment from your organization’s leadership to engage in this learning opportunity, including attending all sessions, office hours with the Ohio Adult Allies’ facilitation team (if applicable), and completing work outside of sessions?

**Supporting Materials:**

Q1. Please upload proof of completion of SPF training for each participant in one file.

Q2. If you do not have a certificate for a training on the Strategic Prevention Framework and are unable to secure one prior to application, please provide a narrative of your understanding of the SPF.

Q3. Please complete the Supervisor Approval Form for each applying participant and upload the signed documents in one file. You may download the document here: [Supervisor Approval Form](Supervisor%20Approval%20Forms/OAA%20Ready%20to%20Start-%20Supervisor%20Approval%20Form.pdf)

Q4. Awardees will need to complete a Supplier Payee Information Form (SPIF) and a W9 in order to contract with Ohio University’s Voinovich School of Leadership and Public Service for this learning opportunity. Applicants have the option to download and complete the [Supplier Payee Information Form (SPIF)](https://ohio.qualtrics.com/CP/File.php?F=F_e98gMZLoyyrALfU) and a [W9](https://ohio.qualtrics.com/CP/File.php?F=F_ddwEYJsToQk310W) at the time of application or upon program acceptance.  
  
For resources on how to complete the SPIF, please visit: [Ohio University's website](https://www.ohio.edu/finance/payee-information-form).