

The background of the slide features a large, faint, circular seal of the Georgia Department of Transportation. The seal contains the text "GEORGIA DEPARTMENT OF TRANSPORTATION" around the perimeter and a central emblem depicting a shield with a road, a bridge, and a ship.

# **REQUEST FOR PROPOSAL FFY2024**

**“EVERY LIFE COUNTS – STRIVE FOR ZERO DEATHS AND  
INJURIES ON GEORGIA ROADS.”**

# GOHS MISSION STATEMENT

The mission of the Georgia Governor's Office of Highway Safety is to educate the public on safe driving behaviors; to implement highway safety campaigns and programs that reduce crashes and eliminate injuries and fatalities on Georgia roadways.

## WE NEED YOU!

# RFP Information



# RFP WORKSHOP



- Request For Proposal (RFP) – READ IT SEVERAL TIMES
- Non-Profit Requirements, Agency Form
- New Problem ID Planning Worksheet (within the RFP)
- Grant Terms & Conditions – subject to change prior to award

# RFP WORKSHOP – GOHS WEBSITE

## [WWW.GAHIGHWAYSAFETY.ORG](http://WWW.GAHIGHWAYSAFETY.ORG)

- Recordings
- Step by step guides:
  - Getting Started In eGOHS Cheat Sheet
  - Grant Budget Forms Cheat Sheet
  - Forgot Username/  
Password Cheat Sheet
  - Adding Users Cheat Sheet
  - Signature Page Cheat Sheet
  - Revisions Cheat Sheet
  - Application Submission Cheat Sheet
  - Application Status Cheat Sheet

# BASIC GRANT APPLICATION INFORMATION

- Georgia Governor's Office of Highway Safety has been granted federal funds from the National Highway Traffic Safety Administration (NHTSA) to promote the development and implementation of innovative programs to address highway safety problems.
- Proposed programs must be data driven, based on proven countermeasures, and must align with Georgia's Highway Safety Plan Targets.

# WHAT IS NEEDED TO APPLY?

**READ all sections of the RFP**

There must be a need in the area or jurisdiction, and it must align with the state HSP Targets

Be prepared to clearly define the problem. The problem must be supported by data (local, state, and national).

SAM UEI – Unique Entity Identifier

FEIN - Federal Employer Identification Number (a.k.a.) Tax ID

Application must be filed electronically in eGOHS Plus

# GRANT PROPOSAL OPPORTUNITIES

- **2 available opportunities:**

- **General Application 2024** - Funding for general highway safety initiatives. This may include government agencies, public safety, non-profits, and organizations.
- **Young Adults 2024** - YA grants are utilized to assist in the implementation of highway safety programs. All colleges and universities in Georgia are eligible to apply.

SADD is available but not through the RFP. Please meet with GOHS staff after the presentation.

# PROGRAM AREAS

- Motorcycle Safety Education
- Occupant Protection
- Teen Traffic Safety
- Young Adult Traffic Safety
- Minority Highway Safety
- Older Drivers (55 plus)
- Law Enforcement
- Non-Motorized Safety (Pedestrian & Bicycle)
- Administrative Judges and DUI Courts
- Evaluation Program

# NOW WHAT?

- Have a clearly defined plan:
  - Who will be assigned (and a back up person) to manage this process?
  - What can be done to eliminate the problem?
  - How will the progress of the project be monitored?
  - Does the organization have a budget?
  - Is the organization/jurisdiction willing and able to accept and implement the project?
  - Can the organization adhere to all GOHS requirements?

# Application Form

## APPLICATION COMPONENTS

# APPLICATION COMPONENTS

APPLICATION SECTIONS	
Application Project Information	General Additional Information
Problem Identification	GOHS Attachments
Program Assessment	Program Assessment Chart
Project Goals and Objectives	Project Activities and Evaluations
Media Plan	Resource Requirements
Self-Sufficiency	Budget Forms
Certification and Signatures	

# PROJECT & GENERAL INFORMATION

- **Application Project Information**

- Project Title
- Project Summary

- **General Additional Information**

- Funds from other sources
- Federal funds from other sources
- Audit Period
- UEI Number

# PROJECT & GENERAL INFORMATION | EGOHS



## eGOHS *Plus*

GOHS - SHARDDEV

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### APPLICATION PROJECT INFORMATION

**Instructions:**

- All required fields are marked with an \*.
- Use the **SAVE** button to save information and calculate data on each page.
- Save at least every 30 minutes to avoid losing data.

Project Title:

Project Summary: 

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# PROJECT & GENERAL INFORMATION

## Project Summary Examples:

- Project will promote and advance bicycle safety by providing bicycle safety education to various groups of people.
- A Peer-to-Peer social norms campaign designed to increase prevention-oriented knowledge and positive behaviors amongst University students to prevent drinking and driving.
- This project promotes motorcycle safety by focusing efforts on motorists' awareness of motorcycles.
- This project will reduce traffic fatalities due to speed, impaired driving, and failure to wear seatbelts.

# PROJECT & GENERAL INFORMATION

## Additional Information

### GENERAL ADDITIONAL INFORMATION

#### Instructions:

- All required fields are marked with an \*.
- Use the **SAVE** button to save information and calculate data on each page.
- Save at least every 30 minutes to avoid losing data.

☐ Check here if you are a non-profit organization

Are funds being sought from other sources? \* ☐ Yes ☐ No

Does your jurisdiction receive any other federal funds from other sources? \* ☐ Yes ☐ No

When is your Audit Period?

From: \*

To: \*

SAM UEI

02-555-5555

# **PROJECT & GENERAL INFORMATION**

## Additional Information for Non-Profits

Non-profit agencies must provide the following in order to complete the application:

- Public Funds Documentation
- 501 (c) (3) form
- Secretary of State Certification
- Letter of Support
- 3 Reference Letters

# PROBLEM ID



# PROBLEM IDENTIFICATION

The statement should provide a detailed description for the defined geographic area or jurisdiction. Include 5 consecutive years of the most recent local, state, and national data, as well as local demographic information.

Use the Problem ID Worksheet within the RFP as well as the GOHS website for most recent data.

# PROBLEM IDENTIFICATION

**Who?** – Children, older adults, teenagers, etc.

**What?** – What is the problem?

**When?** – Is it day, night, weekends, etc.

**Where?** – In school districts, on rural roads, in crosswalks, etc.

**Why?** – Why do these things occur, during these hours, etc?

# DOCUMENTATION ATTACHMENT

Any documentation that helps to support the application such as:

- Charts and/or graphs that show fatalities
- Demographic information
- Agency's procurement policy
- Letters of Support
- Problem ID Support Data



# PROGRAM ASSESSMENT

# PROGRAM ASSESSMENT

- Describe the activities the community/jurisdiction is currently using to address the problem(s) identified.
- WHAT are you currently doing to fix the problem?
- In this section:
  - Note activities and results of past and current efforts, indicating what did or did not work.
  - Assess resources to determine what is needed to more effectively address the problem(s).
  - Identify local laws, policies, safety advocate groups and organizations that may support or inhibit the success of the project.

# PROGRAM ASSESSMENT CHART

**Colleges** - enter the current student population

**Law Enforcement Agencies** - must provide the current level of enforcement activity for the entire department for the three (3) previous calendar years (January 1 through December 31).

## PROGRAM ASSESSMENT CHART

### Instructions:

- All required fields are marked with an \*.
- Use the **SAVE** button to save information and calculate data on each page.
- Save at least every 30 minutes to avoid losing data.

For Young Adult Only

College Population: \*

# PROGRAM ASSESSMENT CHART

# PROGRAM ASSESSMENT CHART

## Instructions:

- All required fields are marked with an \*.
- Use the **SAVE** button to save information and calculate data on each page.
- Save at least every 30 minutes to avoid losing data.

**For Law Enforcement Agencies only (if not law enforcement, please enter zeros in the chart below)**

Please provide the current level of enforcement activity for the entire department for the three (3) previous calendar years (January 1 through December 31).

If data is not available for a particular activity/year combination, enter 0.

Activity	Calendar Year		
	2018	2019	2020
DUI Arrests	<input type="text"/> *	<input type="text"/> *	<input type="text"/> *
Speeding (all cases)	<input type="text"/> *	<input type="text"/> *	<input type="text"/> *
Safety Belt Violations	<input type="text"/> *	<input type="text"/> *	<input type="text"/> *
All Other Traffic Violations	<input type="text"/> *	<input type="text"/> *	<input type="text"/> *
Traffic Crashes	<input type="text"/> *	<input type="text"/> *	<input type="text"/> *
Check Point Conducted	<input type="text"/> *	<input type="text"/> *	<input type="text"/> *

# Goals and Objectives

A scenic view of a winding concrete highway bridge over a forested mountain valley. The road curves through the landscape, flanked by dense evergreen and deciduous trees. In the background, misty mountain ranges are visible under a cloudy sky.

# PROJECT GOALS

**Goals** are broad, brief statements of intent that provide planning focus and vision.

- GOHS has a list of goals within eGOHS to select from when applying (dropdown box within eGOHS)
- Project focused
- Select one per objective

# PROJECT OBJECTIVES

**Objectives** are strategies or implementation steps to attain the identified goals. Objectives must be written in SMART format (Specific, Measureable, Achievable, Relevant, and Time sensitive).

- Precise steps that will lead to reaching the program goal
- Outline the objectives in measurable terms
- Objectives provide direction and must be clearly understood
- Based on proven countermeasures found at <https://www.ghsa.org/resources/countermeasures>

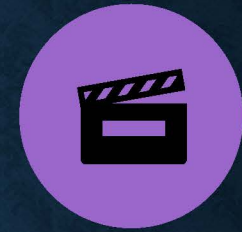
# S.M.A.R.T.



SPECIFIC



MEASURABLE



ACTION-  
ORIENTED



REALISTIC



TIME-  
SPECIFIC

# ACTIVITIES AND EVALUATIONS



# ACTIVITIES & EVALUATIONS

Activity - the specific actions taken each month to accomplish the objective

- Distribute 100 child safety seats to be used at fitting stations throughout the city during the FFY24 grant year.
- Agency will conduct 10 contacts each month during the grant year for vehicles failing to yield to pedestrians utilizing the crosswalks.
- Agency will participate in Click It Or Ticket, Operation Zero Tolerance, 100 Days of Summer HEAT, and other GOHS/NHTSA campaigns 8 times during the grant year.

# ACTIVITIES & EVALUATIONS

Each objective must be evaluated

Keep evaluation simple

- Child safety seat inspection forms will be completed for each child seat distributed or inspected. These forms are collected once a month to determine the number of people reached. These forms will be included with the monthly activity report.
- Agency will collect verbal warnings, written warnings and citations given. This information will be provided to GOHS on a tracking sheet. The tracking sheet will have the total number of citizen contacts broken down by unit, numbers of citations issued, and number of information pamphlets given out.
- Participation in GOHS/NHTSA campaigns will be documented in the GOHS monthly programmatic reports.

# ACTIVITIES & EVALUATIONS | SCREEN VIEW

## PROJECT ACTIVITIES EVALUATIONS

### Instructions:

- All required fields are marked with an \*.
- Use the **SAVE** button to save information and calculate data on each page.
- Save at least every 30 minutes to avoid losing data.
- To add an additional page, click the **ADD** button.
- To delete a page, click the **DELETE** button.
- Each of the project activities must directly support an objective. Make sure the evaluation is comprehensive and includes survey tools. Milestone chart should be filled out completely using numerical values.



Goal:

Objective:

Activity:

0 of 600

Evaluation:

0 of 600

OCT

NOV

DEC

JAN

FEB

MAR

APR

MAY

JUN

JUL

AUG

SEP

TOT



# Media Plan

# MEDIA PLAN



Explain how, when, and to whom the agency will announce the award of this grant to the community

A requirement of the grant, if awarded



Must outline how the agency plans to keep the public informed of grant activities throughout the entire project period.



Media sources must be listed.



# RESOURCE REQUIREMENTS

# RESOURCE REQUIREMENTS

- Provide a detailed justification of all budget items.
- All resources must support the problem identification, activities, and objectives needed to accomplish the overall grant goal.
- Questions to consider:
  - What personnel are needed? What hours will they work? Include job descriptions.
  - What are the types and quantity of needed equipment?
  - How will equipment be used and by whom?
  - Describe the training required by personnel.



Self sufficiency

## **SELF- SUFFICIENCY**

Explain in detail how the agency will continue the program when federal dollars are no longer available.

Must identify potential sources of non-federal funds such as local government funds, public and private donations, etc.

# **ENFORCEMENT/ ACTIVITY HOURS**



# WHAT ARE ENFORCEMENT/ ACTIVITY HOURS?

- Law Enforcement/ Prosecutors ONLY
  - Enforcement/activity hours are reimbursed based on actual pay rate
  - Enforcement/activity hours can be used for any qualified officers/deputies associated with the grant
  - Does not apply to TSRP or Training Staff (PAC, GPSTC, etc)

## WHAT IS ALLOWED?

- Only project related hours can be claimed.  
EX: 4 hours worked directly on the project; 4 hours allowable for reimbursement
- Training directly related to the project can be claimed (DRE, SFST, CPST, etc.) if it is documented in the application.

## WHAT IS NOT ALLOWED?

- Court time
- Overtime
- General P.O.S.T. Training (SWAT, Firearms certification, etc.)
- In-service (Annual Updates)

A silhouette of a person standing on a large rock, with their arms raised in a 'V' shape. The person is positioned in the center of the frame. The background is a soft, colorful sky transitioning from a pale blue at the top to a warm orange and pink near the horizon. The rock the person is standing on is dark and jagged, with another rock formation visible to the right. The overall mood is one of triumph and achievement.

**BREAK**



# Personnel Service Details – Position

Must identify:


Position/ Title

Pay Code (hourly, bi-  
weekly, etc)

Annual Salary

Percent of time of  
project activities

Project Salary



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## PERSONNEL SERVICE DETAILS - POSITION

Instructions:

- All required fields are marked with an \*.
- Use the SAVE button to save information and calculate data on each page.
- Save at least every 30 minutes to avoid losing data.

Please qualify common positions/titles with initials and last name of personnel filling the position (e.g. Officer J Smith, Officer B Jones, etc.)

Position/Title	Pay Code	Hours Per Week	Pay Rate	Annual Salary	Percent of Time	Project Salary
					%	
	Pay Code				%	
	Hourly				%	
	Weekly					
	Biweekly					
	Semi-Monthly					
	Monthly					
Total						

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# Personnel Service Details – Benefits

The applicants finance  
department should  
provide the information  
for fringe benefits.

FICA is 7.65% OR social  
security is 6.2% and  
Medicare is 1.45%

The screenshot shows the eGOHS Plus web application interface. At the top is the logo for the Governor's Office of Highway Safety and the text "eGOHS Plus" and "GOHS - SHARDDEV". Below this is a navigation bar with links: Home, Applications/Grants, Progress Reports, Claims, Final Reports, Travel Requests, Training Materials, Organization(s), Profile, and Logout. There are also buttons for SAVE, SAVE/NEXT, NEXT, and CHECK GLOBAL ERRORS. Below the navigation bar is a menu with links: Menu, Forms Menu, Status Changes, Management Tools, and Related Documents and Messages. A "Back" button is also present. The document information is "GA-2021-GOHS Testi-00002" and the details link is "Details". The breadcrumb trail is "You are here: > General Application 2021 Menu > Forms Menu". The main heading is "PERSONNEL SERVICE DETAILS - BENEFITS". Below this are instructions: "All required fields are marked with an \*", "Use the SAVE button to save information and calculate data on each page.", and "Save at least every 30 minutes to avoid losing data." The form consists of two tables. The first table is for Project Salaries, with columns for Project Salaries, Percent of Time, and Project Salary. The second table is for Fringe Benefits, with columns for Fringe Benefits, Percentage, and Amount. The Fringe Benefits table includes rows for F.I.C.A., Retirement, Health Insurance, Worker's Comp., Unemployment Insurance, and Other. The form also includes a Total row for Project Salaries and a Total row for Fringe Benefits. At the bottom, there are rows for Total Personnel Service (Total salaries + fringe benefits) and Total Personnel Services.

**GOVERNOR'S OFFICE OF HIGHWAY SAFETY** **eGOHS Plus** **GOHS - SHARDDEV**  
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### PERSONNEL SERVICE DETAILS - BENEFITS

Instructions:

- All required fields are marked with an \*.
- Use the **SAVE** button to save information and calculate data on each page.
- Save at least every 30 minutes to avoid losing data.

Project Salaries	Percent of Time	Project Salary
Total	%	

Fringe Benefits	Percentage	Amount
F.I.C.A.	%*	
Retirement	%*	
Health Insurance:	%*	
Worker's Comp.:	%*	
Unemployment Insurance:	%*	
Other:	%	
Other:	%	
Other:	%	
Total		
Total Personnel Service: (Total salaries + fringe benefits)		
Total Personnel Services:		

# PERSONNEL SERVICE DETAILS

## PERSONNEL SERVICE DETAILS - BENEFITS

### Instructions:

- All required fields are marked with an \*.
- Use the **SAVE** button to save information and calculate data on each page.
- Save at least every 30 minutes to avoid losing data.

Project Salaries		Percent of Time	Project Salary
Total		100%	\$20,800.00
Fringe Benefits		Percentage	Amount
F.I.C.A		7.65%*	\$1,591.20
Retirement		9%*	\$1,872.00
Health Insurance:		20.9%*	\$4,347.20
Worker's Comp.:		5.2%*	\$1,081.60
Unemployment Insurance:		0.17%*	\$35.36
Other:		0%	\$0
Other:		0%	\$0
Other:		0%	\$0
Total			\$8,927.36
Total Personnel Service: (Total salaries + fringe benefits)			\$29,727.36
Total Personnel Services:			\$29,727.36

# Pay Schedule for Project Employees

**This should reflect the current pay schedule - i.e. weekly, biweekly, monthly, etc.**

## PAY SCHEDULE FOR PROJECT EMPLOYEES

### Instructions:

- All required fields are marked with an \*.
- Use the **SAVE** button to save information and calculate data on each page.
- Save at least every 30 minutes to avoid losing data.

PAY PERIOD				DATES PAID
Pay Code	Month	Beginning Date	Ending Date	Actual Pay Date
<div><div></div><div></div></div>	<div></div>	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>	<div></div>
Hourly	<div></div>	<div></div>	<div></div>	<div></div>
Weekly	<div></div>	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>	<div></div>
Biweekly	<div></div>	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>	<div></div>
Semi-Monthly	<div></div>	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>	<div></div>
Monthly	<div></div>	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>	<div></div>

# PAY SCHEDULE FOR PROJECT EMPLOYEES

## PAY SCHEDULE FOR PROJECT EMPLOYEES

### Instructions:

- All required fields are marked with an \*.
- Use the **SAVE** button to save information and calculate data on each page.
- Save at least every 30 minutes to avoid losing data.

PAY PERIOD				DATES PAID
Pay Code	Month	Beginning Date	Ending Date	Actual Pay Date
Hourly ▼	October ▼	09/29/2019	10/05/2019	10/11/2019
Hourly ▼	October ▼	10/06/2019	10/12/2019	10/18/2019
Hourly ▼	October ▼	10/13/2019	10/19/2019	10/25/2019
Hourly ▼	October ▼	10/20/2019	10/26/2019	11/01/2019
Hourly ▼	November ▼	10/27/2019	11/02/2019	11/08/2019
▼	▼			
▼	▼			
▼	▼			
▼	▼			
▼	▼			
▼	▼			
▼	▼			
▼	▼			



# ENFORCEMENT/ACTIVITY HOURS

## ENFORCEMENT/ACTIVITY HOURS

### Instructions:

- All required fields are marked with an <sup>\*</sup>.
- Use the **SAVE** button to save information and calculate data on each page.
- Save at least every 30 minutes to avoid losing data.

Resource	Pay Rate	Total Hours	Funds Needed
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		0	\$0.00

# Regular Operating Expenses

**This includes budget  
items that individually  
cost less than \$1000**

**Include shipping/  
handling and taxes in  
unit price**

## REGULAR OPERATING EXPENSES

### Instructions:

- All required fields are marked with an \*
- Use the **SAVE** button to save information and calculate data on each page.
- Save at least every 30 minutes to avoid losing data.

Description	Unit Price	Quantity	Total Costs
Cannon 700 Digital Camera	\$300.00	1	\$300.00
Tint Meters	\$89.00	3	\$267.00
Paper	\$115.00	3	\$345.00
Alco Sensor FST	\$450.00	3	\$1,350.00
Vehicle Light Installation	\$3.00	50	\$150.00
Vehicle Maintenance	\$4,000.00	3	\$12,000.00
Total			\$14,412.00

# TRAVEL

**Conferences or training expenses - i.e. mileage, hotel, Per Diem – only grantee employees.**

## TRAVEL

### Instructions:

- All required fields are marked with an \*.
- Use the SAVE button to save information and calculate data on each page.
- Save at least every 30 minutes to avoid losing data.

Description			Unit Price	Quantity	Total Costs
+					
					Total

# BUDGET FORMS

- **Equipment Purchases:** This includes Items needed that are individually \$1,000 or more. Anything \$5,000 or more will need NHTSA's approval prior to purchase.
- **Contractual Services:** Speakers, instructors, consultants, room rentals, etc. Contracts must be approved by GOHS before being executed. Approval of the grant does NOT “approve” the contract.
- **Per Diem & Fees:** Applies to travel for non-employees of the grantee.

# BUDGET FORMS

- **Computer Charges and Computer Equipment:**  
Includes any computer equipment and/or recurring charges.
- **Telecommunication:** Could include cell phones, internet access
- **Motor Vehicle Purchase:** Motor Vehicles only
- **Rent/Real Estates:** Office space

# COST CATEGORY SUMMARY

This will show the entire budget.

Enter Matching Funds – agency must enter a number in order to save this page.

Cost of a single item includes shipping and taxes

## COST CATEGORY SUMMARY

### Instructions:

- All required fields are marked with an \*
- Use the **SAVE** button to save information and calculate data on each page.
- Save at least every 30 minutes to avoid losing data.

COST CATEGORY	TOTAL	AWARD AMT.
1. Personnel Services (salaries & fringes)		
2. Regular Operating Expenses		
3. Travel		
4. Equipment Purchases		
5. Contractual Services		
6. Per Diem and Fees		
7. Computer Charges and Computer Equipment		
8. Telecommunication		
9. Motor Vehicle Purchase		
10. Rent Real Estates		
11. Total		
MATCHING FUNDS		
Local Cash Match (You must enter at least a 0 before saving to force the page to calculate the category totals).	<input type="text"/> %*	
Federal Participation (percentage of total in Item 11)		%



# CONTRACT FORMS



# CONTRACT FORMS

- Include the following:
  - Grant Terms & Conditions
  - Certifications and Signatures Page
  - Grant Disclosure Form

# CONTRACT FORMS

## Grant Terms and Conditions Certification and Signatures

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1. Personnel		
2. Regular Operating Expenses	\$550.00	
3. Travel		
4. Equipment Purchases		
5. Contractual Services		
6. Per Diem and Fees		
7. Computer Charges and Computer Equipment		
8. Telecommunication		
9. Motor Vehicle Purchase		
10. Rent Real Estates		
11. Total		
<b>MATCHING FUNDS</b>		
Local Cash Match (You must enter at least a 0 before saving to force the page to calculate the category totals).	<input type="text"/> %*	
Federal Participation (percentage of total in Item 11)	%	

# CERTIFICATION AND SIGNATURES

Authorized Official, Agency Administrator, and Agency Staff (financial contact) **MUST** be listed on the certification page.

**MUST** be signed by all parties listed, in **BLUE INK** and mailed to GOHS.

GOHS must receive the certification page **no later than March 31, 2023.**

# SIGNATORS

- Authorized Official
  - The highest elected official
- Agency Administrator
  - Main contact
- Agency Staff
  - Financial Contact

# CERTIFICATION AND SIGNATURES

Mail signed form to:  
Governor's Office of  
Highway Safety

Attn: Candice Hamilton-  
Lawless

7 Martin Luther King Jr. Dr. SW  
Suite 643  
Atlanta, GA 30334

**DUE to GOHS by:**  
**March 31, 2023**

General Application 2021  
Organization: GOHS Testing Inc  
GA-2021-GOHS Testi-00002  
Certification and Signatures

I certify that I understand and agree to comply with the general and fiscal year terms and conditions of this application including special conditions; to comply with provisions of the Act governing these funds and all other federal laws; that all information presented is correct; that there has been appropriate coordination with affected agencies; that I am duly authorized by the applicant to perform the tasks as they relate to the terms and conditions of this grant application; that costs incurred prior to grant approval may result in the expenses being absorbed by the grantee; and, that the receipt of grantor funds through the Governor's Office of Highway Safety will not supplant state or local funds. **Monthly reimbursement claim submissions filed electronically are in effect, "electronically signed".**

**Agency Administrator \***

Name:	AgencyAdministrator GOHSUser	Title:	
Agency:	GOHS Testing Inc	Address:	555 Atlanta, GA, 55555
Phone Number:	(555) 555-5555	Email Address:	demotest@agatesoftware.com
Fax Number:			
Signature:	_____	Date:	12/3/2019

**Agency Staff \***

Name:	Ms. Anne Taylor	Title:	Program Manager
Agency:	GOHS Testing Inc	Address:	555 Test Testing, GA, 55555
Phone Number:	(555) 555-5555	Email Address:	rhayes@gohs.ga.gov
Fax Number:			
Signature:	_____	Date:	12/3/2019
FEI Number:	98-7654321		

**Authorized Official \***

Name:	AgencyAuthorizedOfficial GOHSUser	Title:	
Agency:	GOHS Testing Inc	Address:	555 Atlanta, GA, 55555
Phone Number:	(555) 555-5555	Email Address:	demotest@agatesoftware.com
Fax Number:			
Signature:	_____	Date:	12/3/2019

**\* NOTE: AGENCY ADMIN, AGENCY STAFF AND AUTHORIZED OFFICIAL CANNOT BE THE SAME PERSON WITHOUT GOHS APPROVAL. STAFF BEING FUNDED UNDER THIS GRANT MAY NOT BE ANY OF THE ABOVE OFFICIALS WITHOUT GOHS APPROVAL.**

Important



# THE REVIEW PROCESS

- **NEW Applications are due Tuesday, February 28, 2023 by 11:59pm**
- Applications will be assigned to a review team
- If revisions are required, an email will be sent
- Please make corrections and resubmit within 3 business days.
- Approved applications are generally awarded prior to October 1, 2023

# IMPORTANT NOTES

- **DO NOT** incur any grant related expenses prior to receiving an award letter **AND** prior to October 1, 2023 - funds will not be available to reimburse those purchases.
- ALL GOHS grants are reimbursable. The items must be bought and paid for **BEFORE** GOHS will reimburse.
- Attach agency procurement policy, for equipment requests that are \$5,000 or more.
- Unit price of a single item includes shipping/ handling, and taxes, if applicable.

**DUE DATE**

**February 28, 2023**

**11:59 pm**

**WARNING**

**DUE DATES ARE CLOSER  
THAN THEY APPEAR**



**Questions**

# CONTACT US

Jimmy Sumner

Deputy Director

Governor's Office of Highway Safety

[Jimmy.sumner@gohs.ga.gov](mailto:Jimmy.sumner@gohs.ga.gov)



**GEORGIA GOVERNOR'S OFFICE OF HIGHWAY SAFETY**

7 Martin Luther King Jr. Drive | Suite 643

Atlanta, Georgia 30334

**[WWW.GAHIGHWAYSAFETY.ORG](http://WWW.GAHIGHWAYSAFETY.ORG)**

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APPLICATION TRAINING

[FY 2024 RFP](#)

[Preliminary 2021 Georgia Data](#)

[Grant Manual Volume 1](#)

[Grant Manual Volume 2](#)

APPLICATION TRAINING RECORDINGS

[RFP Training Packet](#)

[Problem Identification](#)

[Program Assessment, Goals & Objectives, Activities & Evaluations](#)

[Media, Resource Requirements, Self-Sufficiency](#)

[Budget Forms](#)

[Contract Forms, Grants Terms & Conditions, Attendee Questions](#)

Only those agencies, groups and organizations who had a representative attend training are eligible to apply for a FY2024 highway safety grant. Applicants who have questions or need assistance are asked to contact GOHS Deputy Director Jimmy Sumner at 404-656-6996.

GRANT MANAGEMENT CENTER HELP

- [Getting Started In eGOHS](#)
- [GOHS Goals](#)
- [Adding Users](#)
- [Application Status](#)
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