

MARYLAND STATE HIGHWAY ADMINISTRATION (SHA) SAFE ROUTES TO SCHOOL (SRTS) PROGRAM

GENERAL INSTRUCTIONS: Project Sponsors seeking Safe Routes to School Funding for eligible infrastructure and/or non-infrastructure projects must complete this application for consideration.

Sponsor Submission Date: _____

Section 1 - APPLICANT INFORMATION

In the space provided, include information about the project sponsor and co-sponsor.

Sponsor: _____

Address: _____

City: _____ **State:** Maryland **Zip Code:** _____

Contact Person: _____ **Title:** _____

Phone: _____ **Email:** _____

***Co-Sponsor (Government Entity):** _____

Address: _____

City: _____ **State:** Maryland **Zip Code:** _____

Contact Person: _____ **Title:** _____

Phone: _____ **Email:** _____

*Every project must have a sponsor or co-sponsor that is a Government Entity.

Section 2 - GENERAL PROJECT INFORMATION

Provide general information about the project. Some of the fields are formatted with drop down menus.

Project Type: _____ **Total Funding being Requested:** _____

Project Location: _____

County: _____ **City:** _____

School District: _____ **If Other, Please Specify:** _____

Does your agency receive more than \$500,000 in Federal funding?

If yes, provide DUNS number: _____

List Schools to be involved in Grant Funded Activities: Abbreviate elementary and middle schools as ES and MS

Name of School	Grades	# Students	Current Principal	Phone

Section 3 - CONTACT INFORMATION

List contact information for the following positions in the space provided. Explained below are the positions, each of which have specific responsibilities related to the project. Minimum of two contacts required.

The Project Coordinator (Day to day program activities)

Name: _____ **Title:** _____
Organization (If different from first page): _____
Address (If different from first page): _____
City: _____ **State:** Maryland **Zip Code:** _____
Phone: _____ **Fax:** _____ **Email:** _____

The Project Director (Oversight and Reporting)

Name: _____ **Title:** _____
Organization (If different from first page): _____
Address (If different from first page): _____
City: _____ **State:** Maryland **Zip Code:** _____
Phone: _____ **Fax:** _____ **Email:** _____

The Financial Official (Expenditure Oversight)

Name: _____ **Title:** _____
Organization (If different from first page): _____
Address (If different from first page): _____
City: _____ **State:** Maryland **Zip Code:** _____
Phone: _____ **Fax:** _____ **Email:** _____

Anticipated Program Partners. In the area below, list any other individuals who are helping with the application or whom you anticipate may be involved with achieving program goals and activities.

Other Program Partners:

Name	Title	Organization	Phone	Email

Section 4 - SAFE ROUTES TO SCHOOL PROJECT IDENTIFICATION

Explain the purpose and goal of the overall project. Please include information such as traffic data, crash/injury data, and surveys conducted, etc. if available. Space has been provided later in the application to include information mentioned here as attachments. Space has been provided later in the application to include information mentioned here as attachments.

Example: There are gaps on the sidewalks network surrounding State Elementary School located between Madison Ave and Monument Street causing safety concerns for students walking and biking to school. Our data further supports the need to re-construct sidewalk because there have been 7 vehicle related incidents, 13 injuries and 1 fatality in 2014.

Section 5 - DETAILED PROJECT DESCRIPTION

Describe the project scope and plan to address the problems identified in section 4.

Example: We would like to construct 1200 linear feet of ADA compliant Sidewalk, ramps, curb and gutter along with 4 crosswalks and 4 count down signals at the intersections of Madison and Calvert & Monument and Calvert. In addition, I would like to address the students behavior by providing educational activities and encouragement incentives. I plan to organize an event to inform, teach and practice safe habits for students traveling to State Elementary School. There will be an assembly where guest speakers, XXX, will talk to the students about walking and bicycling safety. At the assembly we would like to provide jacket reflectors and stickers as well as safety booklets and pencils to distribute. There will be two assemblies because State Elementary School has 10 classes of about 20 students each, so 5 classes will attend each assembly.

Section 6 - NON-INFRASTRUCTURE PROJECT COSTS (BUDGET)

Fill in the following charts with anticipated non-infrastructure expenses.

Salary and Benefits

Activity #	Position	Last Name (employee) Agency (law enforcement)	Salary	Benefits	Grant Hours per week	Requested Funds
Salary and Benefits Subtotal						

Staff Expenses - Travel, Training, etc.

Activity #	Position	Name	Explanation of Expenses	Event Date	Requested Funds
Staff Expenses Subtotal					

Equipment					
Activity #	Equipment Type	Anticipated Make and Model	Purpose of Equipment	Unit Cost	Requested Funds
Equipment Subtotal					

Educational/ Incentive Expenses					
Activity #	Anticipated Event Date	Product or Expense	Purpose of Expense	Unit Cost	Requested Funds
Educational/ Incentive Expenses Subtotal					

INFRASTRUCTURE PROJECT REQUIREMENTS

The following sections detail Infrastructure Project Requirements. All attachments and appendices should be added to the folder named 'External,' which can be found using the following website and login information.

Website: <https://sftp1.mdot.state.md.us/>

Folder Name: External
(the folder name appears when you log into the account)

Username: TAPExternal

Password: tapuser1

Section 7 - ATTACHMENTS

ATTACH PROJECT LOCATION MAP (Required)

Infrastructure projects must provide an 8½ x 11 map of the project location. Map must clearly identify the proposed project site with beginning and ending points. The location map can be created using a Google map www.google.com/maps, Google earth or other base mapping sites or programs. Preferable inclusions on the map are a north arrow, scale, title of project and legend, property lines, state roads, and any other relevant information.

Section 8- APPENDICIES

Provide any necessary supplemental information in separate appendices. The following are acceptable attachments.

- Concept drawing(s)
- Conducted right-of-way survey report
- Crash/injury data
- Engineer's Estimate
- Environmental evaluations and/ or reports
- Historical documentation, evaluations, and/or reports
- Project Plan sheets
- Property ownership information
- Public/Community involvement notifications
- Photographs

Section 9 - INFRASTRUCTURE PROJECT COSTS (BUDGET)

Space has been provided for the identification of projects based on location and relationship to school. After describing all infrastructure improvements for that particular location and school, complete the remaining section with an amount of each item selected from the drop down list along with estimated cost.

School Principal approval received:

Project Location:	<input type="text"/>
School Involved:	<input type="text"/>

Describe the specific location(s) of the work, including side of street or intersection, and the type of work being done:

Quantity or Length	Type of Work	Estimated Cost
<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"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
All Infrastructure Sub Total		<input type="text"/>

Section 10 - DESIGN SERVICES INFORMATION

A drop down list was provided for the first two questions. Space was also provided for the final question.

Will the project require a professional consultant, contractor services or consultant procurement?	<input type="text"/>
Have you already procured design services?	<input type="text"/>

If yes, and these services have been acquired, include the name the agency providing the service below.

Section 11 - SCHEDULE FOR INFRASTRUCTURE

The included list is the process for infrastructure projects. Provide dates for the listed activities.

Activity #	Anticipated		List the primary and specific activities to be completed in order to accomplish the Project included on this page.
	Start Date	End Date	
1.1	<input type="text"/>	<input type="text"/>	Planning and Design
1.2	<input type="text"/>	<input type="text"/>	ROW Acquisition
1.3	<input type="text"/>	<input type="text"/>	95% Plan Submittal
1.4	<input type="text"/>	<input type="text"/>	Advertisement Process (about 3 months)
1.5	<input type="text"/>	<input type="text"/>	Construction Duration
1.6	<input type="text"/>	<input type="text"/>	Construction Inspection

ADDITIONAL LOCATION - (If there are no additional locations proceed to Section 12)

Space has been provided for the identification of projects based on location and relationship to school. After describing all infrastructure improvements for that particular location and school, complete the remaining section with an amount of each item selected from the drop down list along with estimated cost.

School Principal approval received:

Project Location:	
School Involved:	

Describe the specific location(s) of the work, including side of street or intersection, and the type of work being done:

Quantity or Length	Type of Work	Estimated Cost
All Infrastructure Sub Total		

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Have you already procured design services?	

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Describe the specific location(s) of the work, including side of street or intersection, and the type of work being done:

Quantity or Length	Type of Work	Estimated Cost
<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"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>
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1.3	<input type="text"/>	<input type="text"/>	95% Plan Submittal
1.4	<input type="text"/>	<input type="text"/>	Advertisement Process (about 3 months)
1.5	<input type="text"/>	<input type="text"/>	Construction Duration
1.6	<input type="text"/>	<input type="text"/>	Construction Inspection

Section 12 - OVERALL PROJECT TOTAL

Insert the totals for the budget categories in the budget chart below.
This information should correspond with the related sections throughout the application.

Budget Categories	Amount
Salaries & Benefits	
Travel, Training & Conference Fees	
Contractual Services	
Equipment	
Educational/ Incentive Expenses	
Subtotal:	

Sponsor Cash Match Source(s)	Amount
Subtotal:	

Total Project Costs:	
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(Budget Subtotal + Sponsors Match Subtotal)

Section 13 - APPLICATION CHECKLIST

Use the checklist below to ensure that your application package is complete:

YES	NO	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The project is sponsored or co-sponsored by a government entity.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The project is eligible for Safe Routes to School funding.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is a school within a 2-mile radius of the proposed project location(s).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Project location mapping and/or photographs are included.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All project elements are represented in the project cost list.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cost estimates are complete and accurate for all project elements.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Principals of the associated elementary or middle schools are on board.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Potential project problems were taken into account i.e., right-of-way acquisition issues, community involvement/ interest, environmental resources, etc.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A 20% match of funding has been acquired from a Non-Federal entity.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approval was received from the current school Principal for infrastructure and non-infrastructure activities.

Section 14 - APPLICATION SUBMISSION

Safe Routes to School Program application packages should be submitted between April 15th and May 15th.

Submit one electronic version of a complete application package and one copy of the complete application package to:

Ms. Jessica Shearer
Transportation Alternatives Program Manager
Regional and Intermodal Planning Division
Maryland State Highway Administration
707 N. Calvert Street
Mail Stop C-502
Baltimore, MD 21202
410.545.5653 (phone)
JShearer@sha.state.md.us