

Eligibility Questions

Is the applicant a Massachusetts-registered 501(c)(3) organization or a Massachusetts Regional Planning Agency? *

Can the applicant commit to a minimum of 25% match for the portion of the funding requested for the Restoration Coordinator staff position, including salary and fringe? *

Is the proposed Partnership Region greater than 75 square miles and located within the jurisdictional boundaries of the Commonwealth of Massachusetts? *

SUBMIT FORM

Organization Information

Applicant Name *

Applicant is the organization applying to become a Lead Organization in the Partnerships Program.

Applicant Address *

Address Line 1

Address Line 2

City

State

ZIP Code



Primary Contact Information

Primary Contact Name *

First Name

Last Name

Primary Contact Title *

Primary contact's position within the applicant organization.

Primary Contact Phone Number *

Primary Contact Email *

Primary Contact Email Confirmation *



Partnership Information

Partnership Name *

If you are not associated with an existing named partnership, enter N/A.

Brief Description of Partnership Region *

Briefly describe the location of the proposed Partnership Region and the approximate area in square miles. Include a general description of boundaries and municipalities contained within the Partnership Region.

Attachments

Applicants must

submit the application form and all required application attachments. Please upload the required application attachments using the corresponding upload button below. Please note that the application form, the required application attachments, and the supporting documentation combined cannot exceed 20MB in total when uploaded via the Online Submission Portal. If you exceed this limit, you will receive an error message when you submit the application.

If your files exceed the online submission limit, check the box below that states "My supporting documents exceed the limit." To make arrangements to email and/or upload an application and/or additional supporting documents that exceed the file limit, or if you are experiencing any difficulties with submitting your application through the Online Submission Portal, please contact Ione Hughes at ione.s.hughes@mass.gov.

Partnerships Application Form *

Choose File Remove File No File Chosen

File uploads may not work on some mobile devices.

Budget Worksheet/Partnership Schedule *

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File uploads may not work on some mobile devices.

Letter(s) of Support *

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File uploads may not work on some mobile devices.

Multiple letters of support can be combined into one file and uploaded here. Additional letters of commitment can also be submitted in the Supporting Documents section (below) or emailed to ione.s.hughes@mass.gov.

Map of Partnership Region *

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File uploads may not work on some mobile devices.

Supporting Documents

How many supporting documents do you need to upload? (as applicable) (optional)

none

My supporting documents exceed the limit. (optional)

I will send an email with files to Ione Hughes at ione.s.hughes@mass.gov.

Electronic Signature Agreement

*

I hereby declare that the above information is true to the best of my knowledge and belief. By submitting this application, I acknowledge the terms and specifications contained within this RFR.



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