



**Federal Fiscal Year 2020
Highway Safety Behavioral Community Event Grant Application**

**Department of Transportation Highway Safety Office
Behavioral Grants Program
5300 Bishop Blvd Cheyenne, WY 82009**

GOAL

The Wyoming Department of Transportation's Highway Safety Behavioral Grants Program goal is to reduce traffic crashes, deaths, injuries and the associated economic losses in Wyoming through the coordinated efforts of traffic safety partners, state and local law enforcement agencies.

**PART 1
Applicant Contact Information**

***Agency/Organization: Highway Safety Behavioral Program**

***DUNS Number (<http://www.dnb.com/us>): 809916000**

***Program Title: Highway Safety Office Educational Outreach**

***Mailing Address: 5300 Bishop Blvd**

***City, State, Zip + 4: Cheyenne, WY 82009-3340**

*** Required Fields**

Information on completing this application and project resources are available on the Wyoming Department of Transportation website at:

http://www.dot.state.wy.us/home/dot_safety/safety_grant_info.html.

Submit grant application to HSOgrants@wyo.gov on or before March 18, 2019.

PART 3 Description of Event

1) Problem Identification - Describe the problem; use available local data relevant to the event to be held. Include the source of the data. **(No more than 1000 characters)**

According to the 2016 Wyoming Report on Traffic Crashes, Albany County had 215 crashes that involved drivers between the ages of 14-20. WASCOP Alcohol Factors reports there were 25 underage DUI offenses in 2016 with an average BAC of .117.

According to the 2016 Wyoming Report on Traffic Crashes, Laramie County had 447 crashes that involved drivers between the ages of 14-20. WASCOP Alcohol Factors reports there were 26 underage DUI offenses in 2016 in Laramie County with an average BAC of .095

2) Event Description- Describe the purpose of the event, where it will be held, the target audience, potential reach, and how it will help Wyoming meet the Core Performance Measures listed in the cover letter. **(No more than 1000 characters)**

The purpose of this event is to target teen high school drivers as guest speakers in health class and discuss the impact of driving impaired. Specific topics will include reviewing the long term consequences of an underage DUI and social norming as it relates to not riding with a driver that has been drinking. Two days will be spent at each Laramie High School, Cheyenne East High School, Cheyenne Central High School, and Cheyenne South High School with each school counting as a separate event. Estimated reach is 1200 teen drivers.

3) Objectives – Describe the objective of the event. **(No more than 4000 characters)**

The objective is to reach approximately 1200 teen drivers and educate them on impaired driving consequences.

4) Activity Evaluation – Comprehensive evaluation involves an analysis of whether a project has achieved its stated objectives: Describe how you will evaluate the event as it relates to your objective. Evaluation should answer the who, what, when, where, why and how of your objective. Use actual numbers to demonstrate safety improvement. **(NOTE: you must include an evaluation on each event)** **(No more than 3000 characters)**

A count of all students in attendance will be taken at each school. Notes will be taken on pre and post class discussions to evaluate and assess the attitudes and opinions of teens toward the topic of drinking and driving. Myths vs. facts will also be explored and then evaluated as part of the class discussion.

PART 4
Proposed Cost Schedule for Events

Name of Event:	High School Impaired Driving Education
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Personnel Costs:

Position One	Title:	Project Coordinator		Notes:
	Hours	Cost Per Hr	Total Cost	
Planning/ Meetings	3	\$20.00	\$60.00	Includes coordinating with schools, developing presentations, working in the schools, and reporting to direct supervisor
Recruitment			\$0.00	
Development of Content	8	\$20.00	\$160.00	
Travel	2	\$20.00	\$40.00	
Set Up	1	\$20.00	\$20.00	
Actual Event	16	\$20.00	\$320.00	
Debrief	1	\$20.00	\$20.00	
Reporting	1	\$20.00	\$20.00	
Total Position One			\$640.00	

Position Two	Title:			Notes:
	Hours	Cost Per Hr	Total Cost	
Planning/ Meetings			\$0.00	
Recruitment			\$0.00	
Development of Content			\$0.00	
Travel			\$0.00	
Set Up			\$0.00	
Actual Event			\$0.00	
Debrief			\$0.00	
Reporting			\$0.00	
Total Position Two			\$0.00	

Position Three	Title:			Notes:
	Hours	Cost Per Hr	Total Cost	
Planning/ Meetings			\$0.00	
Recruitment			\$0.00	
Development of Content			\$0.00	
Travel			\$0.00	
Set Up			\$0.00	
Actual Event			\$0.00	
Debrief			\$0.00	
Reporting			\$0.00	
Total Position Three			\$0.00	

Total Personnel Costs		\$640.00
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Proposed Cost Schedule for Events Continued

Cost of Venue:		\$0.00
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Travel Costs:

	Cost Per	# of Miles	Total
Mileage	\$0.55	20.00	\$11.00

	Cost Per	# of Days	Total M&IE
Per Diem/ Meals (M&IE)			\$0.00

	Cost Per	# of Days	Total Hotel
Hotel			\$0.00

Total Travel Cost		\$11.00
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Materials (Please List):

Notes:

Myth vs Fact Worksheets	\$20.00	
Total Materials	\$20.00	

Media (Please List):

Notes:

Total Media	\$0.00	

Other/Misc (Be Specific):

Notes:

Total Other/Misc	\$0.00	

Total Cost for Event	\$671.00
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**** PLEASE VERIFY YOUR TOTALS AND DOUBLE CHECK YOUR NUMBERS.**

**PART 5
FEDERAL GRANT MONIES**

These questions relate to any Federal grant monies received for transit or safety activities. (CFDA #20.600, 20.601, 20.607, etc.)

		Yes	No
1.	Have there been any key (essential) personnel changes in the direct implementation and administration of the grant during the previous year. (Key personnel include the Grant Administrator, Accounting, Budget or Controller personnel) (2 CFR 200.331 (a)(6)(3)).	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.	Has the organization as a whole remained unchanged during the previous year?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.	Has the accounting/financial system remained the same as last year? (There weren't any upgrades or modifications to the system.) (2 CFR 200.331(a)(6)(3))	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	3a. If there were changes, please explain.		
4.	Does your entity receive Federal grant money directly from any Federal awarding agencies? FTA, NHTSA, etc. (These monies do not have any WYDOT involvement for applications, payments, etc.) (2 CFR 200.331(a)(6)(4)).	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.	Has a Federal agency monitored or inquired or been directly involved in the grant (2 CFR 200.331(a)(6)(4))	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	5a. Has the Federal agency ever performed a review or audit of the grant?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	5b. If yes, did the Federal agency determine that there were no financial or compliance issues? If no, please provide a description of the financial and/or compliance issues written up by the Federal agency.		
6.	Does your entity have written procedures for procurement transactions? (2 CFR 200.318-323)	<input checked="" type="checkbox"/>	<input type="checkbox"/>

PART 6
Authorizing Official Information

I attest that the information presented in this application is true.

The agency personnel contact information below must be completed

Project Administrator
Printed Name: Meghan Connor
Title: Grants Manager
Telephone: 307-777-4199
e-mail: meghan.connor1@wyo.gov
Authorizing Official for Agency/Organization
Printed Name: Matt Carlson, P.E.
Title: State Highway Safety Engineer
Telephone: 307-777-4257
e-mail: matt.carlson@wyo.gov

By the submittal of this application for funding, I certify under penalty of law, based on information and belief formed after reasonable inquiry, the statements and information contained in this application are true, accurate and complete.

Once completed please email the application to HSOgrants@wyo.gov

If you are having trouble emailing, please contact Stephanie Lucero @ 307-777-4198, Karson James @ 307-777-4200.