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**NOTIFICATION OF RECEIPT OF APPLICATION**

**U.S. Department of Health and Human Services  
Health Resources and Services Administration**

Application Received Date: 08/02/2004

Ms. Peggy Belknap  
Post Office Box 610  
Holbrook, AZ 86025-0610

This is to notify you that the Health Resources and Services Administration received your application in response to the announcement in the *Federal Register* or *HRSA Preview* referenced on the form below. The form also indicates the tracking number assigned to your application. Please reference this number when making any type of inquiry regarding your application.

Applicant Organization	Northland Pioneer College Post Office Box 610 Holbrook, AZ 86025-0610
Application Number	00017294
Grant Number	
Online Submission	No
Online Submission Date	N/A
Postmark Date	07/31/2004
Program Announcement Number	HRSA-04-090
Program Announcement Code	REMSTEP
CFDA Number	93.912
Title of Project	Rural Emergency Medical Service Training and Equipment Assistance Program
Amount Requested	\$134,340.00

The dollar amount referenced above (amount requested) is calculated by taking the sum of the budget summary (SF 424A) or the detail budget direct costs only (HRSA 6025-2, PHS 398, PHS 2590). If this amount differs from the requested amount on the face page of your application there is a calculation error within your budget. Please do not send a revised application. If you are recommended for funding, a revised budget will be requested.

If you submitted an application for more than one program or priority area to the Health Resources and Services Administration, you will receive a notification of receipt for each application submitted.

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**APPLICATION FOR  
FEDERAL ASSISTANCE**

Version 7/03

<b>1. TYPE OF SUBMISSION:</b> Application		<b>2. DATE SUBMITTED</b> July 30, 2004	<b>Applicant Identifier</b>
<input type="checkbox"/> Construction	<input type="checkbox"/> Pre-application	<b>3. DATE RECEIVED BY STATE</b>	<b>State Application Identifier</b>
<input checked="" type="checkbox"/> Non-Construction	<input type="checkbox"/> Construction	<b>4. DATE RECEIVED BY FEDERAL AGENCY</b>	<b>Federal Identifier</b>
<input type="checkbox"/> Non-Construction			

<b>5. APPLICANT INFORMATION</b>	
<b>Legal Name:</b> Northland Pioneer College/Navajo County Community College District	<b>Organizational Unit:</b> Department
<b>Organizational DUNS:</b> 068421850	<b>Division:</b>
<b>Address:</b> Street: P.O. Box 610 103 N. 1st Avenue at Hopi Drive	<b>Name and telephone number of person to be contacted on matters involving this application (give area code)</b>
<b>City:</b> Holbrook	<b>Prefix:</b> Ms.
<b>County:</b> Navajo	<b>First Name:</b> Peggy
<b>State:</b> Arizona	<b>Middle Name</b> L.
<b>Zip Code</b> 86025	<b>Last Name</b> Belknap
<b>Country:</b> United States of America	<b>Suffix:</b>
	<b>Email:</b> pbelknap@npc.edu

<b>6. EMPLOYER IDENTIFICATION NUMBER (EIN):</b> 8 8 - 0 2 7 7 5 2 6	<b>Phone Number (give area code)</b> (928)524-7455	<b>Fax Number (give area code)</b> (928)524-9055
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<b>8. TYPE OF APPLICATION:</b> <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es) (See back of form for description of letters.) Other (specify) <input type="checkbox"/> <input type="checkbox"/>	<b>7. TYPE OF APPLICANT: (See back of form for Application Types)</b> I. State Controlled Institution of Higher Learning Other (specify)
	<b>9. NAME OF FEDERAL AGENCY:</b> REMSTEP

<b>10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER:</b> 9 3 - 2 5 9 <b>TITLE (Name of Program):</b> Rural Emergency Medical Services Training & Equipment Assistance Program	<b>11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:</b> Rural Outreach for Paramedical Education
<b>12. AREAS AFFECTED BY PROJECT (Cities, Counties, States, etc.):</b> Navajo, Apache, Coconino and Yavapai Counties, Arizona	

<b>13. PROPOSED PROJECT</b> <b>Start Date:</b> September 30, 2004	<b>Ending Date:</b> September 29, 2007	<b>14. CONGRESSIONAL DISTRICTS OF:</b> a. Applicant AZ-01	b. Project AZ-01
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<b>15. ESTIMATED FUNDING:</b>	<b>16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?</b>
a. Federal \$ 134,340 <sup>00</sup>	a. Yes. <input type="checkbox"/> THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON DATE:
b. Applicant \$ 37,995 <sup>00</sup>	b. No. <input checked="" type="checkbox"/> PROGRAM IS NOT COVERED BY E. O. 12372
c. State \$ <sup>00</sup>	<input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW
d. Local \$ <sup>00</sup>	<b>17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?</b>
e. Other \$ <sup>00</sup>	<input type="checkbox"/> Yes if "Yes" attach an explanation. <input checked="" type="checkbox"/> No
f. Program Income \$ 33,940 <sup>00</sup>	
g. TOTAL \$ 172,335 <sup>00</sup>	

**18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.**

<b>a. Authorized Representative</b>		
<b>Prefix</b> Dr.	<b>First Name</b> Richard	<b>Middle Name</b>
<b>Last Name</b> Fleming		<b>Suffix</b> Ph.D
<b>b. Title</b> President, Northland Pioneer College		<b>c. Telephone Number (give area code)</b> (928) 524-7610
<b>d. Signature of Authorized Representative</b> <i>Richard Fleming</i>		<b>e. Date Signed</b> 7-27-04

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OMB Approval No. 0920-0428  
Expiration Date: April 30, 2000

**CHECKLIST**

**Public Burden Statement:** Public reporting burden of this collection of information is estimated to average 4 - 50 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC,

Clearance Officer, 1600 Clifton Road, MS D-24, Atlanta, GA 30333, ATTN: PRA (0920-0428). Do not send the completed form to this address.

**NOTE TO APPLICANT:** This form must be completed and submitted with the original of your application. Be sure to complete both sides of this form. Check the appropriate boxes and provide the information requested. This form should be attached as the last page of the signed original of the application. This page is reserved for PHS staff use only.

Type of Application:  NEW  Noncompeting Continuation  Competing Continuation  Supplemental

**PART A: The following checklist is provided to assure that proper signatures, assurances, and certifications have been submitted.**

- |  | Included                            | NOT<br>Applicable                   |
|--|-------------------------------------|-------------------------------------|
| 1. Proper Signature and Date for Item 18 on SF 424 (FACE PAGE) .....   | <input checked="" type="checkbox"/> |                                     |
| 2. Proper Signature and Date on PHS-5161-1 "Certifications" page .....   | <input checked="" type="checkbox"/> |                                     |
| 3. Proper Signature and Date on appropriate "Assurances" page, i.e., SF-424B (Non-Construction Programs) or SF-424D (Construction Programs) .....  | <input checked="" type="checkbox"/> |                                     |
| 4. If your organization currently has on file with DHHS the following assurances, please identify which have been filed by indicating the date of such filing on the line provided. (All four have been consolidated into a single form, HHS Form 690) |                                     |                                     |
| <input type="checkbox"/> Civil Rights Assurance (45 CFR 80) .....  |                                     | _____                               |
| <input type="checkbox"/> Assurance Concerning the Handicapped (45 CFR 84) .....  |                                     | _____                               |
| <input type="checkbox"/> Assurance Concerning Sex Discrimination (45 CFR 86) .....   |                                     | _____                               |
| <input type="checkbox"/> Assurance Concerning Age Discrimination (45 CFR 90 & 45 CFR 91) .....   |                                     | _____                               |
| 5. Human Subjects Certification, when applicable (45 CFR 46) .....   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

**PART B: This part is provided to assure that pertinent information has been addressed and included in the application.**

- |   | YES                                 | NOT<br>Applicable                   |
|---|-------------------------------------|-------------------------------------|
| 1. Has a Public Health System Impact Statement for the proposed program/project been completed and distributed as required? .....                             | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 2. Has the appropriate box been checked for item # 16 on the SF-424 (FACE PAGE) regarding intergovernmental review under E.O. 12372 ? (45 CFR Part 100) ..... | <input checked="" type="checkbox"/> |                                     |
| 3. Has the entire proposed project period been identified in item # 13 of the FACE PAGE? .....  | <input checked="" type="checkbox"/> |                                     |
| 4. Have biographical sketch(es) with job description(s) been attached, when required? .....   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 5. Has the "Budget Information" page, SF-424A (Non-Construction Programs) or SF-424C (Construction Programs), been completed and included? .....              | <input checked="" type="checkbox"/> |                                     |
| 6. Has the 12 month detailed budget been provided? .....  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 7. Has the budget for the entire proposed project period with sufficient detail been provided? .....  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 8. For a Supplemental application, does the detailed budget address only the additional funds requested? .....  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 9. For Competing Continuation and Supplemental applications, has a progress report been included? .....   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

**PART C: In the spaces provided below, please provide the requested information.**

Business Official to be notified if an award is to be made.

Program Director/Project Director/Principal Investigator designated to direct the proposed project or program.

Name V. Blaine Hatch

Name Peggy L. Belknap - NPC ID#6599

Title Vice President for Administrative Services

Title Director of Business and Community Services

Organization Northland Pioneer College

Organization Northland Pioneer College

Address P.O. Box 610

Address P.O. Box 610

E-mail Address bhatch@npc.edu

E-mail Address pbelknap@npc.edu

Telephone Number (928) 524-7640

Telephone Number (928) 524-7455

Fax Number (928) 524-9055

Fax Number (928) 524-9055

APPLICANT ORGANIZATION'S 12-DIGIT DHHS EIN (If already assigned)

SOCIAL SECURITY NUMBER

HIGHEST DEGREE EARNED

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M.Ed.
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(OVER)

**PART D: A private, nonprofit organization must include evidence of its nonprofit status with the application. Any of the following is acceptable evidence. Check the appropriate box or complete the "Previously Filed" section, whichever is applicable.**

- (a) A reference to the organization's listing in the Internal Revenue Service's (IRS) most recent list of tax-exempt organizations described in section 501(c)(3) of the IRS Code.
- (b) A copy of a currently valid Internal Revenue Service Tax exemption certificate.
- (c) A statement from a State taxing body, State Attorney General, or other appropriate State official certifying that the applicant organization has a nonprofit status and that none of the net earnings accrue to any private shareholders or individuals.
- (d) A certified copy of the organization's certificate of incorporation or similar document if it clearly establishes the nonprofit status of the organization.
- (e) Any of the above proof for a State or national parent organization, and a statement signed by the parent organization that the applicant organization is a local nonprofit affiliate.

If an applicant has evidence of current nonprofit status on file with an agency of PHS, it will not be necessary to file similar papers again, but the place and date of filing must be indicated.

Previously Filed with: (Agency)

on (Date)

[Empty rectangular box for Agency name]

[Empty rectangular box for Date]

**INVENTIONS**

If this is an application for continued support, include: (1) the report of inventions conceived or reduced to practice required by the terms and conditions of the grant; or (2) a list of inventions already reported, or (3) a negative certification.

**EXECUTIVE ORDER 12372**

Effective September 30, 1983, Executive Order 12372 (Intergovernmental Review of Federal Programs) directed OMB to abolish OMB Circular A-95 and establish a new process for consulting with State and local elected officials on proposed Federal financial assistance. The Department of Health and Human Services implemented the Executive Order through regulations at 45 CFR Part 100 (Inter-governmental Review of Department of Health and Human Services Programs and Activities). The objectives of the Executive Order are to (1) increase State flexibility to design a consultation process and select the programs it wishes to review, (2) increase the ability of State and local elected officials to influence Federal decisions and (3) compel Federal officials to be responsive to State concerns, or explain the reasons.

The regulations at 45 CFR Part 100 were published in the *Federal Register* on June 24, 1983, along with a notice identifying the

Department's programs that are subject to the provisions of Executive Order 12372. Information regarding PHS programs subject to Executive Order 12372 is also available from the appropriate awarding office.

States participating in this program establish State Single Points of Contact (SPOCs) to coordinate and manage the review and comment on proposed Federal financial assistance. Applicants should contact the Governor's office for information regarding the SPOC, programs selected for review, and the consultation (review) process designed by their State.

Applicants are to certify on the face page of the SF-424 (attached) whether the request is for a program covered under Executive Order 12372 and, where appropriate, whether the State has been given an opportunity to comment.

**BUDGET INFORMATION - Non-Construction Programs**

OMB Approval No. 0348-0044

SECTION A - BUDGET SUMMARY						
Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. REMSTEP	93.259	\$	\$	\$ 134,340.00	\$ 37,995.00	\$ 172,335.00
2.						0.00
3.						0.00
4.						0.00
5. Totals		\$ 0.00	\$ 0.00	\$ 134,340.00	\$ 37,995.00	\$ 172,335.00
SECTION B - BUDGET CATEGORIES						
6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)	
	(1)	(2)	(3)	(4)		
a. Personnel	\$	\$	\$	\$ 33,787.00	\$ 33,787.00	
b. Fringe Benefits				4,208.00	4,208.00	
c. Travel					0.00	
d. Equipment				49,750.00	49,750.00	
e. Supplies				20,280.00	20,280.00	
f. Contractual				24,000.00	24,000.00	
g. Construction					0.00	
h. Other				40,310.00	40,310.00	
i. Total Direct Charges (sum of 6a-6h)		0.00	0.00	134,340.00	37,995.00	172,335.00
j. Indirect Charges					0.00	
k. TOTALS (sum of 6i and 6j)	\$	\$ 0.00	\$ 0.00	\$ 134,340.00	\$ 37,995.00	\$ 172,335.00
7. Program Income		\$ 33,940.00	\$	\$	\$	\$ 33,940.00

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SECTION C - NON-FEDERAL RESOURCES					
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS	
8. REMSTEP	\$ 37,995.00	\$	\$	\$ 37,995.00	
9.				0.00	
10.				0.00	
11.				0.00	
12. TOTAL (sum of lines 8-11)	\$ 37,995.00	\$ 0.00	\$ 0.00	\$ 37,995.00	
SECTION D - FORECASTED CASH NEEDS					
	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$ 0.00	\$	\$	\$	\$
14. Non-Federal	0.00				
15. TOTAL (sum of lines 13 and 14)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT					
(a) Grant Program	FUTURE FUNDING PERIODS (Years)				
	(b) First	(c) Second	(d) Third	(e) Fourth	
16. REMSTEP	\$	\$	\$	\$	
17.					
18.					
19.					
20. TOTAL (sum of lines 16-19)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	
SECTION F - OTHER BUDGET INFORMATION					
21. Direct Charges:		22. Indirect Charges: No indirect charges are being requested			
23. Remarks:					

**v. Budget Justification  
Federal Request**

Category	Year One*	Amount
<b>Personnel</b>		
<b>Fringe Benefits</b>		
<b>Travel</b>		
<b>Equipment**</b>	<input type="checkbox"/> The Emergency Care Simulator (ECS) is the centerpiece of the mobile lab.	\$ 37,750.00
	<input type="checkbox"/> Proficiency with a heart monitor-defibrillator with 12-lead EKG is a requirement for CEP certification and re-certification.	\$ 12,000.00
	<b>Total Equipment</b>	<b>\$ 49,750.00</b>
<b>Supplies</b>	<p>These mobile lab components support practice in infant, child and prenatal critical care skills:</p> <input type="checkbox"/> Advanced Life Support (ALS) Baby	\$ 1,185.00
	<input type="checkbox"/> pediatric intubation trainer	\$ 925.00
	<input type="checkbox"/> pediatric immobilization board	\$ 299.00
	<input type="checkbox"/> prenatal education set	\$ 435.00
	<p>Supplemental props will complement skills practice on these components as well as the ECS:</p> <input type="checkbox"/> physio-controlled monitor-defibrillator ***\$4,500.00	\$ 4,500.00
	<input type="checkbox"/> (2) airway management trainers @ \$1,395.00 ea.	\$ 2,790.00
	<input type="checkbox"/> femoral access simulator	\$ 475.00
	<input type="checkbox"/> central venous cannulation simulator	\$ 610.00
	<p>Anatomical models include:</p> <input type="checkbox"/> full-body skeleton with organs	\$ 4,800.00
	<input type="checkbox"/> model bypass heart	\$ 355.00
	<input type="checkbox"/> EKG model heart	\$ 260.00
	<p>Additional highly specialized and task-specific tools for realistic practice on the ECS and related models include:</p> <input type="checkbox"/> (3) Laryngoscope Blades & Handle Set @ \$296.00 ea.	\$ 888.00
	<input type="checkbox"/> (4) Intubation Holders/Accessories @ \$81.00 ea.	\$ 324.00
	<input type="checkbox"/> Emergency Cricothyrotomy Kit	\$ 134.00
	<p>A gas accessory kit, which connects to compressed air cylinders, allows the ECS to respond in a lifelike manner.</p>	\$ 750.00
	<p>A carrying case will render the ECS mannequin fully portable, yet protected while in storage or transit.</p>	\$ 1,550.00
	<b>Total Supplies</b>	<b>\$ 20,280.00</b>



*Northland Pioneer College  
Rural Outreach for Paramedical Education*

<b>Contractual</b>	<p>Because the dissemination and sustainability of the project relies on a pool of trainers, two training sessions for twelve participants each are scheduled.</p> <p><input type="checkbox"/> Basic On-Site Education Course (2 days)</p> <p><input type="checkbox"/> Advanced On-Site Education Course (2 days) prepares trainers to use learning module options to expand educational possibilities</p> <p>A Disaster Medical Readiness training session (2 days) will complete trainers' capabilities with the ECS.</p> <p>This category also includes contractual funds to secure the services of a consultant for project evaluation.</p> <p style="text-align: right;"><b>Total Contractual</b></p>	<p>\$ 6,500.00</p> <p>\$ 6,500.00</p> <p>\$ 5,000.00</p> <p>\$ 6,000.00</p> <p><b>\$ 24,000.00</b></p>
<b>Construction</b>		
<b>Other</b>	<p>This category includes software licenses and assurances, and two ECS Learning Module Options to enhance the skills practice capabilities of the ECS in topics especially relevant to rural areas. Because the ECS will be continually transported and utilized throughout the project service area, an extended, multi-year warranty is also included.</p> <p>Disaster Medical Readiness (DMR) Learning Module for ECS</p> <p>Software License: DMR Learning Module</p> <p>Software Assurance: DMR Learning Module</p> <p>Cardiopulmonary Critical Situations Learning Module for ECS</p> <p>Software License: Cardiopulmonary Critical Situations Learning Module</p> <p>Software Assurance: Cardiopulmonary Critical Situations Learning Module</p> <p>ECS System Warranty Upgrade (Basic to Enhanced)</p> <p>(2) Multi-Year ECS Enhanced System Warranties @ \$5,130.00 ea.</p> <p style="text-align: right;"><b>Total Other</b></p>	<p>\$ 16,000.00</p> <p>\$ 1,050.00</p> <p>\$ 2,100.00</p> <p>\$ 8,000.00</p> <p>\$ 400.00</p> <p>\$ 800.00</p> <p>\$ 1,700.00</p> <p>\$ 10,260.00</p> <p><b>\$ 40,310.00</b></p>
<b>Total Direct Charges</b>		<b>\$ 134,340.00</b>
<b>Indirect Charges</b>		
<b>Total Federal Request</b>		<b>\$ 134,340.00</b>

\* No federal funds are requested for Project Years Two and Three.

\*\*Prices are the average of three bids. The ECS is a sole-source item from METI, Inc. A letter attesting to this can be provided upon funding.

\*\*\* Used-Excellent Condition

**Non-Federal Resources (Match)**

Category	Year One	Total
<b>Personnel</b>	10% of Project Director's Annual Salary	\$ 6,546.00
	20% of Project Coordinator's Annual Salary	\$ 9,061.00
	(36) Associate Faculty Hours @ \$505.00 ea.	\$ 18,180.00
	<b>Total Personnel</b>	<b>\$ 33,787.00</b>
<b>Fringe Benefits</b>	10% of Project Director's Annual Fringe Benefits	\$ 1,366.00
	20% of Project Coordinator's Annual Fringe Benefits	\$ 2,842.00
	<b>Total Fringe Benefits</b>	<b>\$ 4,208.00</b>
<b>Travel</b>		
<b>Equipment</b>		
<b>Supplies</b>		
<b>Contractual</b>		
<b>Construction</b>		
<b>Other</b>		
<b>Total Non-Federal Resources (Match)</b>		<b>\$ 37,995.00</b>

**Estimated Program Income**

Category	Year One*	Amount
<b>Course Fees**</b>	(76) Northland Pioneer College Certified Emergency Paramedic Re-Certification Students @ \$175.00 ea.	\$ 13,300.00
	(24) Northland Pioneer College Certified Emergency Paramedic Students @ \$760.00 ea.	\$ 18,240.00
	<b>Total Estimated Course Fees</b>	<b>\$ 31,540.00</b>
<b>Rental Fees***</b>	(3) Certified Emergency Paramedic Re-Certification classes outside Northland Pioneer College, but within ROPE Partnership @ \$800.00 ea.	\$ 2,400.00
	<b>Total Estimated Rental Fees</b>	<b>\$ 2,400.00</b>
<b>Total Estimated Program Income</b>		<b>\$ 33,940.00</b>

\* Program Income for Year One is estimated based upon the number of Certified Emergency Paramedic Certification and Re-Certification students stated in Project Goals.

\*\*Course Fees for all Northland Pioneer College courses are approved by the District Governing Board. These course fees were approved for academic year 2004-2005 on May 18, 2004.

\*\*\*Rental Fees are based on a cost of \$10.00 per student per hour, per 8 hour day, with a minimum of ten students per class.

Any income generated by the program will be used to maintain and update all components of the mobile skills laboratory, including regularly needed replacement parts for the Emergency Care Simulator: neck skin, chest tubes, trauma patches, tape, arm skin, etc. Income will also be used to update product warranties and provide for any repairs needed to keep the mobile skills lab in top working order.

**Staffing Plan and Personnel Requirements  
An Overview, Including Biographical Sketches for Key Personnel**

Rural Outreach for Paramedical Education (ROPE) will be staffed by two key personnel: a Project Director and a Project Coordinator. No federal funds are requested for either position; Northland Pioneer College will provide salaries and benefits for both as part of the required matching budget. Federal funds are requested for a Project Evaluator, who will be contracted upon receipt of grant funding.

Peggy L. Belknap, M.Ed., Director of Northland Pioneer College's (NPC's) Division of Business and Community Services, will serve as Project Director for ROPE, ensuring that all project strategies are carried out and that all project goals are met. In the organizational structure of the college, Ms. Belknap is directly supervised by the College President. Ms. Belknap will manage the budget, provide administrative oversight, serve as a liaison between the funder and the college, assist in the development and maintenance of the project's partnership advisory committee, supervise the Project Coordinator and hire and supervise the Project Evaluator. Ms. Belknap will also prepare and submit the Annual Performance Report to the Office of Rural Health Policy, and will prepare and submit the annual one-page Financial Status Report. Because NPC's Emergency Medical Technology (EMT) program operates within the Division of Business and Community Services, Ms. Belknap is experienced in managing EMS curriculum and training. Recognizing the compelling need for authentic, hands-on training opportunities in rural Northeastern Arizona, she was instrumental in assisting with the development of the ROPE concept.

Ms. Belknap has been employed by NPC since 1990, beginning her career as an Academic Advisor and advancing to Coordinator of Admissions before being named Director of the Division of Business and Community Services in July, 2000. In addition to the EMT program, Ms. Belknap oversees NPC's Fire Science, Real Estate, Hospitality and Power Plant Technology programs as well as Community Services and Business and Industry Training.

Since taking the reins of the Division of Business and Community Services in 2000, Ms. Belknap has been a leader in the nurturing of relations between the college and the communities, businesses and industries within its service area. She has renewed and invigorated advisory committees consisting of representatives from community, business and industry for the EMT, Fire Science and Power Plant programs, and has in turn served as NPC's representative on such boards as the Northern Arizona Fire Chief's Association and the Northern Arizona Emergency Medical Services group. Ms. Belknap's success in building working alliances with key stakeholders throughout the college service area has resulted in the development of new curriculum and programs, created directly in response to industry needs, such that NPC is truly functioning as a *community* college. This aptitude, along with her years of experience in budgetary and personnel management, will serve her well as Project Director of ROPE. For the purpose of clarification with regard to required budgetary match, Ms. Belknap will spend ten percent of her time in this capacity.

Ms. Donna Farkas, FLTCEP, will serve as Project Coordinator for ROPE. An Associate Faculty in NPC's EMT program since 1990, Ms. Farkas was hired as part-time EMT Program

Coordinator in August, 2002, and made full-time EMT Program Coordinator in January, 2003. In the course of her fifteen years of experience as a flight paramedic in the NPC service area, Ms. Farkas has become one of a family of advanced life support providers, united by their commitment to the rural constituency they serve. She is intimately familiar with all issues related to Emergency Medical Services, and it was at Ms. Farkas' behest that NPC resolved to take a leadership role in the education of paramedical professionals, whose skills are so critical in rural areas. Ms. Farkas not only identified, but also quantified and qualified the need for authentic, accessible, hands-on training in advanced life support skills, and it was she who conceptualized the mobile laboratory that is the centerpiece of Rural Outreach for Paramedical Education. As ROPE Project Coordinator, Ms. Farkas will utilize her skills as an educator, paramedic and EMT Program Coordinator to ensure that all project strategies are completed. She will develop and maintain the mobile skills lab, implement training opportunities and courses for project partners and their constituents, facilitate biannual meetings of the project advisory committee and interface with the Project Evaluator. For the purpose of clarification with regard to required budgetary match, Ms. Farkas will spend twenty percent of her time in this capacity.

The ROPE Advisory Committee will play a crucial role in the success of the project, so it is appropriate that it is described here. ROPE Project Director Peggy Belknap posits that the effectiveness of any advisory committee is a function of its capacity to advise key personnel, rather than be driven by them. Therefore, the ROPE Advisory Committee will be apprised of the progress of the project through biannual meetings facilitated by Project Coordinator Donna Farkas and attended by Ms. Belknap. These meetings will provide a forum for review of ongoing project evaluation, as well as discussion of any issues that arise. It is through these biannual meetings that the project will be continually analyzed, refined and improved. The ROPE Advisory Committee is comprised of a representative from each project partner entity. Each member of the Advisory Committee will have an equal vote, and a quorum of not less than 51% of members must be present for a vote to take place.

Staffed by highly competent key personnel, and guided by a comprehensive advisory committee representing the interests of all stakeholders, Rural Outreach for Paramedical Education will be successful and sustainable, because it is a true partnership.

**ASSURANCES - NON-CONSTRUCTION PROGRAMS**

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

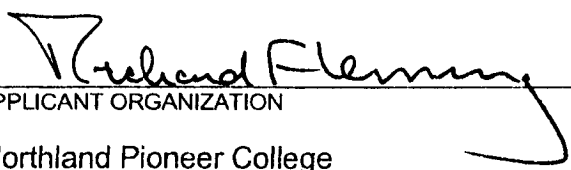
**PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET.  
SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.**

**NOTE:** Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL 	TITLE President, Northland Pioneer College
APPLICANT ORGANIZATION Northland Pioneer College	DATE SUBMITTED July 22, 2004

## CERTIFICATIONS

### 1. CERTIFICATION REGARDING DEBARMENT AND SUSPENSION

The undersigned (authorized official signing for the applicant organization) certifies to the best of his or her knowledge and belief, that the applicant, defined as the primary participant in accordance with 45 CFR Part 76, and its principals:

- (a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal Department or agency;
- (b) have not within a 3-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) are not presently indicted or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (b) of this certification; and
- (d) have not within a 3-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause or default.

Should the applicant not be able to provide this certification, an explanation as to why should be placed after the assurances page in the application package.

The applicant agrees by submitting this proposal that it will include, without modification, the clause titled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion--Lower Tier Covered Transactions" in all lower tier covered transactions (i.e., transactions with sub-grantees and/or contractors) and in all solicitations for lower tier covered transactions in accordance with 45 CFR Part 76.

### 2. CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The undersigned (authorized official signing for the applicant organization) certifies that the applicant will, or will continue to, provide a drug-free workplace in accordance with 45 CFR Part 76 by:

- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) Establishing an ongoing drug-free awareness program to inform employees about--
  - (1) The dangers of drug abuse in the workplace;
  - (2) The grantee's policy of maintaining a drug-free workplace;
  - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
  - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a) above;
- (d) Notifying the employee in the statement required by paragraph (a), above, that, as a condition of employment under the grant, the employee will--
  - (1) Abide by the terms of the statement; and
  - (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- (e) Notifying the agency in writing within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central

- point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- (f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d) (2), with respect to any employee who is so convicted--
- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
  - (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

For purposes of paragraph (e) regarding agency notification of criminal drug convictions, the DHHS has designated the following central point for receipt of such notices:

Office of Grants and Acquisition Management  
 Office of Grants Management  
 Office of the Assistant Secretary for Management and Budget  
 Department of Health and Human Services  
 200 Independence Avenue, S.W., Room 517-D  
 Washington, D.C. 20201

### 3. CERTIFICATION REGARDING LOBBYING

Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non-appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs (45 CFR Part 93).

The undersigned (authorized official signing for the applicant organization) certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the under-

signed, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

- (2) If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. (If needed, Standard Form-LLL, "Disclosure of Lobbying Activities," its instructions, and continuation sheet are included at the end of this application form.)
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

### 4. CERTIFICATION REGARDING PROGRAM FRAUD CIVIL REMEDIES ACT (PFCRA)

The undersigned (authorized official signing for the applicant organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The undersigned agrees that the applicant organization will comply with the Public Health Service terms and conditions of award if a grant is awarded as a result of this application.



**5. CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE**

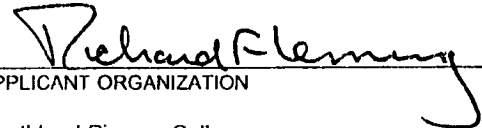
Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children's services provided in private residence, portions of facilities used for inpatient drug or alcohol treatment, service providers whose sole source of applicable Federal funds is Medicare or Medicaid, or facilities where WIC coupons are redeemed.

Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing the certification, the undersigned certifies that the applicant organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act.

The applicant organization agrees that it will require that the language of this certification be included in any subawards which contain provisions for children's services and that all subrecipients shall certify accordingly.

The Public Health Services strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL 	TITLE President, Northland Pioneer College
APPLICANT ORGANIZATION Northland Pioneer College	DATE SUBMITTED 07/22/2004

**RURAL OUTREACH FOR PARAMEDICAL EDUCATION**

**An innovative partnership project submitted to the  
Rural Emergency Medical Service Training and Equipment Assistance Program by  
Northland Pioneer College**

**Peggy Belknap – Project Director  
P.O. Box 610, Holbrook, AZ 86025  
(928)-524-7455 – [pbelknap@npc.edu](mailto:pbelknap@npc.edu)**

**Abstract**

Northland Pioneer College (NPC), a comprehensive, multi-campus community college serving rural and remote Northeastern Arizona, will partner with the State authorized EMS council for Northern Arizona, 14 Northern Arizona fire departments, 12 hospitals and two other community colleges to form Rural Outreach for Paramedical Education (ROPE). The purpose of the ROPE partnership is to provide high-quality, *accessible*, and cost effective training opportunities for certification and re-certification of Certified Emergency Paramedics (CEPs) and continuing education for Emergency Medical Service (EMS) providers in Northeastern Arizona, thereby eliminating the need for costly travel to distant metropolitan areas.

This innovative project will bring a *mobile hands-on, critical care skills lab*, the centerpiece of which is a human patient simulator, to CEP students and EMS providers across a remote, four-county service area of over 47,000 square miles. Project goals are as follows: 1.) By 9/29/2007, 80% or more of the 400 Certified Emergency Paramedics in the project service area will receive a Certificate of Completion for re-certification, from one of the project partners, through use of the mobile skills lab. 2.) By 9/29/2005, 100% of Certified Emergency Paramedic candidates at NPC will be able to check off 100% of their initial training in all critical care competency areas by using the mobile skills lab. 3.) By 9/29/2007 at least 75% of the first-year group that were served by the project will return for their next re-certification.

The mobile skills lab will be available to each partner so they may provide *on-site* continuing education to their EMS providers. This is especially significant, because 7 of the 12 partnership hospitals are located on the tribal lands of the Navajo, Hopi and White Mountain Apache People. The ROPE project will allow Native American professionals to instruct their own EMS providers, customizing continuing education to address unique cultural and linguistic needs, especially relative to health, medicine, death and dying.

Project sustainability is assured by ongoing evaluation activities that are regularly reviewed by the partnership, and an innovative train-the-trainer model, through which mobile skills lab instructors will come directly from the ranks of the partnership. Course fees, tuition and user fees will provide for maintenance and repair of the mobile skills lab.

Rural Outreach for Paramedical Education is a highly replicable demonstration project that *will* enable EMS providers throughout Northeastern Arizona to surmount the barriers of time and distance that impede their access to continuing education. It *will* enhance certification and re-certification rates of paramedical professionals. It *will* improve the critical care skills of emergency medical practitioners - and indeed, it *will* save lives.