NCAN Grant Application (Oak Foundation):

Strengthening Postsecondary Transitions for Students w/ Learning Differences

Organization & Contact Info

* 1. FIRST & LAST NAME of the person completing this application
* 2. ORGANIZATION NAME
* 3. TITLE of the person completing this application
* 4. PHONE NUMBER of the person completing this application
* 5. EMAIL ADDRESS of the person completing this application
* 6. Organization MAILING ADDRESS
Address Line 2 Address Line 2
City State
Zip
* 7. How many students does your organization serve annually?
Less than 100
101 - 500
<u> 501 - 1,000</u>
More than 1,000

Middle School Students High School Students College/Postsecondary Students Two or more If two or more, indicate which * 9. What are the approximate percentages of students by racial designation in the population you serve? African American / Black Asian, Asian American or Pacific Islander Hispanic or Latinx/o/a Native American or Indigenous White Other / Not Listed	* 8. Which student population(s) does your organization PRIMARILY serve?
College/Postsecondary Students Two or more If two or more, indicate which * 9. What are the approximate percentages of students by racial designation in the population you serve? African American / Black Asian, Asian American or Pacific Islander Hispanic or Latinx/o/a Native American or Indigenous White Other / Not Listed	Middle School Students
Two or more If two or more, indicate which * 9. What are the approximate percentages of students by racial designation in the population you serve? African American / Black Asian, Asian American or Pacific Islander Hispanic or Latinx/o/a Native American or Indigenous White Other / Not Listed	High School Students
* 9. What are the approximate percentages of students by racial designation in the population you serve? African American / Black Asian, Asian American or Pacific Islander Hispanic or Latinx/o/a Native American or Indigenous White Other / Not Listed	College/Postsecondary Students
* 9. What are the approximate percentages of students by racial designation in the population you serve? African American / Black Asian, Asian American or Pacific Islander Hispanic or Latinx/o/a Native American or Indigenous White Other / Not Listed	Two or more
you serve? African American / Black Asian, Asian American or Pacific Islander Hispanic or Latinx/o/a Native American or Indigenous White Other / Not Listed	If two or more, indicate which
you serve? African American / Black Asian, Asian American or Pacific Islander Hispanic or Latinx/o/a Native American or Indigenous White Other / Not Listed	
Asian, Asian American or Pacific Islander Hispanic or Latinx/o/a Native American or Indigenous White Other / Not Listed	
or Pacific Islander Hispanic or Latinx/o/a Native American or Indigenous White Other / Not Listed	
Native American or Indigenous White Other / Not Listed	
Indigenous White Other / Not Listed	Hispanic or Latinx/o/a
Other / Not Listed	
reference submit.	White
For reference submit.	Other / Not Listed

Supports for Students with Learning Differences

Please complete the following prompts in 100 to no more than 200 words each.
10. What is your organization's current understanding of the extent to which students you
support are experiencing learning differences (diagnosed or not)?
11. What differentiated or targeted supports, if any, do you currently provide these students
in the postsecondary planning and transition process?
12. What data (survey responses, needs assessments, qualitative data, observations, etc.)
have you collected about your student population's learning differences? If none, please
describe what info would be useful to collect.
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13. Describe any partnerships (formal or informal) your organization has with any institutions
of higher ed- include name(s) of institutions, average number of students presently enrolled,
supports students receive at those institutions, etc.

Project Lead and Partnerships

This opportunity is a two-year commitment and requires consistent participation and responsiveness from a designated Project Lead. The Project Lead role is ideal for someone responsible for college partnerships and/or has programmatic oversight of students' persistence/completion outcomes. This grant project also requires grantee organizations to partner with up to two colleges/universities to plan and implement more effective postsecondary transitions for students with learning differences.

14. By checking this box you agree to designate a project lead throughout the duration of the grant project (Jan 2023 - July 2024) as described above.
I understand and agree.
15. By checking this box you agree to identify and engage with 1- 2 partner colleges or universities to plan and implement efforts to support students with learning differences.
16. Is the Project Lead the same person completing this application (from page 1)?
Yes No

Grant Project Lead- Details

17. Project Lead's FIRST & LAST NAME		
19. Project Load's TITLE	Commiste only if	
18. Project Lead's TITLE	Complete only if	
	different from	
	person	
19. Project Lead's PHONE NUMBER	completing application	
20. Project Lead's EMAIL ADDRESS		
21. Project Lead's PRONOUNS		
100		
22. How long has Project Lead been employed at this o	rganization?	
Less than 1 year	110,	
1 - 5 years		
5- 9 years		
10 years or more		
23. In no more than 150 words, describe the Project Lead	-	
the provision of supports for students with learning differen	ences.	
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24. What skills/experience can the Project Lead leverage	to share the knowledge acquired	
through this grant project with NCAN's broader audience/network of members? (i.e.		
facilitation experience, public speaking skills, etc)		