

Notice of Funding Opportunity
Application due 07/17/2026

HRSA

Health Resources & Services Administration

Bureau of Health Workforce
Division of Nursing and Public Health
Public Health Training Centers (PHTC) Program
HRSA-26-078



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Before You Begin

Health Resources and Services Administration
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All activities proposed in your application and budget narrative must align with applicable law, including but not limited to statutes, executive orders, federal regulations, and applicable judicial holdings. Accordingly, discretionary awards shall not be used to fund, promote, encourage, subsidize, or facilitate: racial preferences or other forms of racial discrimination by the recipient, including activities where race or intentional proxies for race will be used as a selection criterion for employment or program participation; denial by the recipient of the sex binary in humans, or the belief that sex is a chosen or mutable characteristic; illegal immigration; or any other initiatives that compromise public safety. If an application does not align, the application will not receive funding to the extent permitted by law and applicable court orders.

Step 1: Review the Opportunity

Basic information

Summary

The Public Health Training Centers (PHTC) Program aims to increase the knowledge of the public health workforce through traineeships, specialized training and professional development in partnership with state and local health departments, community-based primary care providers, and related organizations (including non-traditional partners) to address public healthcare needs.

Have questions? Go to [Contacts and Support](#).

Key facts

Opportunity name: Public Health Training Centers (PHTC) Program

Opportunity number: HRSA-26-078

Announcement version: Initial

Federal assistance listing: 93.516

Key dates

NOFO issue date: 06/15/2026

Informational webinar: See [Join the webinar](#)

Application deadline: 7/17/2026

Expected award date is by: 09/01/2026

Expected start date: 09/01/2026

See [other submissions](#) for other time frames that may apply to this NOFO.

Funding details

Application Types: Competing continuation, New

Expected total available funding in FY 2026: \$9,100,000

Expected number and type of awards: 10 CA (Cooperative Agreement)

Funding range per award: up to \$910,000 per award

We plan to fund awards in four 12-month budget periods for a total four-year period of performance. The period of performance is from September 1, 2026, to August 31, 2030. Your request for years 2, 3, and 4 cannot exceed your year 1 request.

Eligibility

You can apply if you are an accredited school of public health, or another public or nonprofit private institution accredited to provide graduate or specialized training in public health.

Types of eligible organizations

These types of *domestic organizations may apply if they otherwise meet the eligibility criteria.

“Domestic” means the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, the Northern Mariana Islands, American Samoa, Guam, the U.S. Virgin Islands, the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau.

Independent school districts

Public and State controlled institutions of higher education

Native American tribal governments (Federally recognized)

Native American tribal organizations (other than Federally recognized tribal governments)

Nonprofits having a 501(c)(3) status with the IRS, other than institutions of higher education

Nonprofits without 501(c)(3) status with the IRS, other than institutions of higher education

Private institutions of higher education

For profit organizations other than small businesses

Additional information on eligibility

You can apply if you are an accredited school of public health, or another public or nonprofit private institution accredited to provide graduate or specialized training in public health.

Individuals are not eligible applicants under this NOFO.

Trainee eligibility

To receive support under this program, a trainee must be one of the following:

- A U.S. citizen or non-citizen national
- An individual lawfully admitted for permanent residence to the United States.
- Any other “qualified alien” under section 431(b) of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Pub. L 104-193, as amended.

Individuals on temporary or student visas are not eligible to participate or receive PHTC support.

This program provides traineeships to graduates or students in specialized training in public health who are enrolled in health professions programs related to fields experiencing severe workforce shortages^[1]. This includes, but is not limited to, the following fields:

- Maternal and child health
- Nutrition

- Toxicology
- Environmental health
- Epidemiology
- Biostatistics

In addition to offering traineeship to graduates or students in specialized training, applicants may also provide traineeship to undergraduate juniors or seniors enrolled in a health profession degree program in which there is a shortage of health professionals (such as public health, psychology, sociology, or social work).

Qualifications for principal investigator or project director

The **Principal Investigator (PI)** must be a senior public health professional with:

- Expertise in adult education and training
- Leadership skills
- Recognized standing within their professional field

This individual must dedicate at least 5% of their time to program activities

Completeness and responsive criteria

We will not consider an application that:

- Is from an organization that does not meet all [eligibility criteria](#).
- Requests funding above the award ceiling shown in the [funding range](#).
- Is submitted after the [deadline](#).

Application limits

You may not submit more than one application. If you submit more than one application, we will only accept the last on-time submission.

Cost sharing

This program has no cost-sharing requirement. If you choose to share in the costs of the project, we will not consider it during merit review. Recipients agree that once committed, cost sharing amounts are enforceable and subject to reporting and auditing requirements under 2 CFR 200.

Maintenance of effort

Federal funds must add to any existing non-federal funds for your proposed activities. If you receive an award, you will have to spend at least as much as you spent in the last fiscal year before the award. 42 U.S.C. § 295n-2(b) (section 797(b) of the Public Health Service Act) requires this. We will enforce these statutory requirements through all available mechanisms. You must provide supporting documentation of your maintenance of effort as [Attachment 5](#).

Post-award requirements

Before you apply, make sure you understand the requirements that come with an award.

See [Step 6: Learn What Happens After Award](#) for information on regulations that apply, reporting, and more.

Program description

Purpose

The Public Health Training Centers (PHTC) Program aims to strengthen the public health workforce by offering:

- Student traineeships
- Field placements
- Technical assistance
- Targeted training

It supports projects that enhance preventive medicine, health promotion, disease prevention, and healthcare access in rural or medically vulnerable communities.

- The goal of the PHTC Program is to increase the supply of a high-quality public health workforce for rural and medically vulnerable communities.

Background

The U.S. public health infrastructure is complex and ever evolving, requiring a strong workforce with both clinical and non-clinical expertise to address the growing demand of the public's health care needs. This highlights the need for accessible, high-quality education and training, as well as upskilling initiatives to support the development of future public health workers.

Historically, Public Health Training Centers (PHTC), have served as resources to state and local public health agencies, working to strengthen the nation's public health infrastructure and address emerging needs. In the 2024-2025 academic year, the PHTC program provided experiential learning opportunities to 410 public health students across 288 training sites nationwide. Of these training sites, 73% were in medically vulnerable communities, 27% in primary care settings, and 25% in rural areas. In addition to experiential learning, the program provided 2,749 continuing education courses to 317,126 practicing professionals. [2]

In support of the Administration's efforts To Make America Healthy Again (MAHA) and address chronic disease, obesity, and poor nutrition, the PHTC program delivers targeted education and training to public health students and professionals. Through strategic partnerships and a focus on workforce development, the program aims to expand and retain a skilled, crisis-ready public health workforce. This workforce will promote health, wellness, and prevention initiatives to improve the quality of life for communities nationwide.

Program goal and objectives

The goal of the PHTC Program is to increase the supply of a high-quality public health workforce for rural and medically vulnerable communities. It will do this by achieving the following objectives:

Objective 1. Expand and enhance the public health workforce.

Objective 2. Increase community-based training partnerships in rural and medically vulnerable areas.

Objective 3. Provide tailored, quality training to address current and emerging public health needs including chronic disease management and improving health and nutrition.

Program requirements and expectations

Award recipients are required to participate in federally designed evaluations to assess program effectiveness and efficiency upon request.

If you are awarded funding, you must fulfill the requirements below.

Training center and training programs

- **Designate a geographic area or medically vulnerable population** the training center will serve, located outside of the teaching facility, that is participating in the program with the training center.
- **Assess in real-time:** public health issues to include the prevention and management of chronic diseases and training needs and gaps of the public health workforce of the area.
- **Plan, develop, and deliver training programs** to improve preventive medicine, health promotion, disease prevention, and healthcare access.

Community-based training partnerships

- Establish and implement a formal arrangement with Community Based Training (CBT) partner(s). You must include details of this allocation in the proposed line-item budget and budget justification.
- CBT partners may include state and local health departments, primary care providers, community organizations (including non-traditional partners).

Traineeships

- **Provide traineeships** to students in health professions fields that have a severe workforce shortage. This includes the fields of maternal and child health, nutrition, toxicology, epidemiology, environmental health, and biostatistics.
- Traineeship must provide financial support, including partial tuition, fees and applicable stipends or allowances.
- You must dedicate at least 20 percent of your overall requested budget (direct and indirect costs) as traineeships.

Field placements

- **Establish or strengthen field placements** for students through CBT Partnerships. Placements must take place in a public or nonprofit private health agency or organizations. Including but not limited to non-traditional health care settings, such as mobile health units, shelters, community centers, telemedicine sites, or other locations where health services are provided outside hospitals and outpatient clinics.
- Placements must provide structured opportunities for students to apply acquired knowledge and skills in a public health practice setting.

- Placements should support the mastery of public health competencies while balancing the student’s educational needs with the needs of the community.
- Field placements must last at least three months.
- Field placements must involve a minimum of 15 students. You may give stipend support for a combination of both field placements and faculty-student collaborative projects above the minimum requirement of 15 students.

Faculty-student collaborative projects

- **Involve faculty members and students in collaborative projects** to enhance public health services in medically vulnerable communities.
- Projects may include research projects or community interventions identified by a governmental public health agency or other public health service entity.
- Students and faculty advisors collaborate with the agency to address specific public health issues among a specified target population. They work together to develop the methodology and approach.
- Projects can range from three to six months.

Leadership Institutes

- **Establish or enhance leadership institutes** that support a separate cohort of trainees using an integrated primary care and public health approach.
- Train this cohort in advanced adaptive and strategic leadership skills that underscore core public health competencies.

Evaluations

- Tracking of field placement participants for up to one year after program completion is required.

Statutory authority

[42 U.S.C. § 295a](#) (Public Health Service Act Section 766) and [42 U.S.C. § 295b](#) (Public Health Service Act Section 767)

Award information

Cooperative agreement terms

Our responsibilities

Aside from monitoring and technical assistance, we also get involved in these ways:

- Providing programmatic consultation for development and delivery of training and technical assistance, project data collection methods, and metrics across the projects.
- Providing ongoing input in all phases of the project to accomplish the goals of the cooperative agreement.
- Reviewing project information prior to dissemination.
- Assisting to enhance or develop a network among other funded programs, federal agencies, and external stakeholders. This network will disseminate resources, best practices, and lessons learned.

- Providing assistance and referral in the establishment and facilitation of effective collaborative relationships with federal and state agencies, resource centers, and other HRSA recipients that may be relevant to the project’s mission.
- Collaborating with recipients to assist in developing and implementing assessment and evaluation strategies.
- Leading the PHTC network, which includes working with recipients in planning and coordinating conference calls, webinars and meetings, working groups, learning exchanges, and communities of practice.

Your responsibilities

You must follow all relevant laws and policies. Your other responsibilities will include:

- You must carry out all required activities, including those outlined in the [Program requirements and expectations](#).
- Programmatic oversight, including:
 - Providing the agency program staff with an opportunity to review project information prior to dissemination.
 - Establishing contacts that may be relevant to the project’s mission, such as federal and non-federal partners and other agency award projects.
 - Working with agency program staff to identify collaborative partnerships for community-based training topics and sites.
 - Working with agency program staff to implement all network activities, including but not limited to conference calls, meetings, working groups, and learning collaboratives.
- Participation in PHTC network, including:
 - Participating in ongoing PHTC network conference calls, learning exchanges, and webinars with other awardees under this NOFO.
 - Working with agency program staff to identify network working groups, learning exchanges, and communities of practice.
- Coordinating activities with other awardees under this NOFO.
 - Participating in annual meetings.
- Evaluation activities, including:
 - Collaborating with agency program staff and other recipients under this NOFO to develop and implement assessment and evaluation strategies.
 - Partnering with agency program staff to evaluate priorities and respond to constituent and field requirements.

Funding policies and limitations

Changes in HHS regulations

As of October 1, 2025, HHS has adopted [2 CFR Part 200](#), with some modifications included in 2 CFR Part 300. These regulations replace those in 45 CFR Part 75.

Policies

- To make an award, funding must be available and allocated for this program and purpose, at which point we will move forward with the review and award process.

- Have clear policies and good financial practices to avoid spending HRSA funds on unallowable activities. Like other award rules, we may audit your policies, procedures, and controls.
- Support beyond the first budget year will depend on:
 - Appropriation of funds.
 - Your satisfactory progress in meeting the project’s objectives.
 - A decision that continued funding is in the government’s best interest.
- If we receive more funding for this program, we may:
 - Fund more applicants from the rank order list.
 - Extend the period of performance.
 - Award supplemental funding.

General limitations

- For guidance on some types of costs we do not allow or restrict, see
 - Project Budget Information in Section 3.1.4 of the [R&R Application Guide](#). You can also see [2 CFR Part 200 Subpart E](#) - General Provisions for Selected Items of Cost.
 - [Allowable and Unallowable Costs and Activities](#), in the HHS Grants Policy Statement.
- All costs must be [reasonable](#), necessary, [allocable](#) to the award, and adequately documented ([2 CFR 200.403](#)).
- You cannot earn profit from the federal award. See [2 CFR 200.400\(g\)](#).
- Current appropriations law includes a salary limit of \$228,000 as of January 2026 that applies to this program. You may pay salaries at a rate higher than the Executive Level II if the amount beyond the HHS SRL is paid with non-HHS funds. For help calculating salaries under this limit, read more at “salary rate limitation” in the [R&R Application Guide](#).

Program-specific statutory or regulatory limitations

Additionally, these specific costs are not allowed:

- Accreditation costs like renewals or annual fees, credentialing, licensing, continuing education fees, certification exam or licensing fees, and franchise fees and expenses.
- Membership fees to organizations that directly fund lobbying activities.
- Laboratory fees.
- Food or drinks.
- Liability insurance, unemployment insurance, life insurance, taxes, fees, retirement plans, or other fringe benefits for trainees.
 - Exception: Health insurance for trainees is allowed.
- Payment of temporary personnel replacement costs for the time faculty, preceptors, or other participants are away from usual worksite during involvement in project activities.
- Paid release time for project faculty.

- Construction or major renovation.
- Foreign travel.

See [Manage Your Grant](#) for other information on costs and financial management.

Indirect costs

Indirect costs are costs you charge across more than one project that cannot be easily separated by project. For example, this could include utilities for a building that supports multiple projects.

As of October 1, 2025, [2 CFR 300.414](#) indirect costs for training awards cannot exceed 8% of modified total direct costs. To calculate the (MTDC), we exclude from the direct cost base:

- Direct cost amounts for equipment, tuition, fees, and participant support costs
- Subawards and subcontracts exceeding \$50,000.

For modified total direct costs, we use the definition at [2 CFR 200.1](#).

Consider your indirect costs when developing your [budget](#).

Program income

Program income is money earned as a result of your award-supported project activities. You must use any program income you generate from awarded funds for approved project-related activities. Find more about program income at [2 CFR 200.307](#).

Step 2: Get Ready to Apply

Get registered

SAM.gov

You must have an active account with SAM.gov to apply. SAM.gov registration can take several weeks. Begin that process today.

To register:

- Go to [SAM.gov Entity Registration](#) and select Get Started. From the same page, you can also select the Entity Registration Checklist for the information you will need to register.
- You must agree to the [financial assistance general certifications and representations](#) specifically. Those for contracts are different.

When you register, you will also receive your required Unique Entity Identifier (UEI).

Once you register:

- You will have to maintain your registration throughout the life of any award.
- If your organization has multiple UEIs, use the one associated with your physical location.

Grants.gov

You must also have an active account with [Grants.gov](#). You can see step-by-step instructions at the Grants.gov [Quick Start Guide for Applicants](#) and [How to Apply for Grants](#).

Find the application package

The application package has all the forms you need to apply. You can find it online. Go to [Grants Search at Grants.gov](#) and search for opportunity number HRSA-26-078.

After you select the opportunity, we recommend that you click the Subscribe button to get updates.

Application writing help

Visit [HHS Tips for Preparing Grant Proposals](#).

Visit [HRSA's How to Prepare Your Application](#) page for more guidance.

See [Apply for a Grant](#) for other help and resources.

Join the webinar

For more information about this opportunity, Visit the [Bureau of Health Workforce's open opportunities](#) website. The webinar will be recorded.

Have questions? Go to [Contacts and Support](#).

FAQs will be posted on the Bureau of Health Workforce’s open opportunities website.

Step 3: Build Your Application

Application checklist

There are two types of forms in Grants.gov.

- Some forms allow you to upload components of your application to the form. These include components like your project narrative, budget and budget narrative, and attachments, as applicable.
- Other forms are more typical, fill-in-the-blank forms.

Make sure that you have everything you need to apply.

Narratives

See the instructions for the [project narrative, form](#), and the [budget and budget narrative](#).

Form	Included in page limit*?
<input type="checkbox"/> Research & Related Other Project Information	Yes*
<input type="checkbox"/> Research & Related Budget	Yes*

Attachments

See [instructions for attachments](#).

Form	Included in page limit*?
<input type="checkbox"/> 1. Accreditation Documentation	Yes
<input type="checkbox"/> 2. Project Organizational Chart	Yes
<input type="checkbox"/> 3. Letters of agreement with other entities	Yes
<input type="checkbox"/> 4. Staffing Plan and Job Description	Yes
<input type="checkbox"/> 5. Maintenance of effort documentation	Yes
<input type="checkbox"/> 6. Funding preference or priority documentation	Yes
<input type="checkbox"/> 7. Tables and charts	Yes
<input type="checkbox"/> 8. Letters of Support	Yes
<input type="checkbox"/> 9. Other relevant document	Yes
<input type="checkbox"/> 10. Other relevant document	Yes
<input type="checkbox"/> 11. Other relevant document	Yes
<input type="checkbox"/> 12. Other relevant document	Yes
<input type="checkbox"/> 13. Other relevant document	Yes

<input type="checkbox"/> 14. Other relevant document	Yes
<input type="checkbox"/> 15. Other relevant document	Yes

Other required forms

See [form instructions](#).

Other required forms

See [form instructions](#).

Form	Included in page limit*?
<input type="checkbox"/> SF-424 (R&R)	No
<input type="checkbox"/> Project Abstract Summary Form	No
<input type="checkbox"/> R&R Subaward Budget Attachment(s)	Yes*
<input type="checkbox"/> Research & Related Senior/Key Person Profile form	No
<input type="checkbox"/> Project/Performance Site Location(s)	No
<input type="checkbox"/> Disclosure of Lobbying Activities (SF-LLL)	No
<input type="checkbox"/> Standardized Work Plan (SWP) form	No

* Unless otherwise indicated, only what you attach to a form counts toward the page limit. The form itself does not count.

Application contents and format

This section includes guidance on each component found in the application checklist.

Application page limit: 50 pages

Submit your information in English and express whole number budget figures using U.S. dollars.

Required format

Required format for project summary, project narrative, budget narrative, and attachments

Font: A readable font like Arial, Courier, CG Times, or Times New Roman

File format: We only accept the following document formats:

- .PDF - Adobe Portable Document Format
- .DOC/.DOCX - Microsoft Word
- .RTF - Rich Text Format or .TXT - Text
- .WPD - Word Perfect Document
- .XLS/.XLSX - Microsoft Excel
- .VSD - Microsoft Visio

Size: 12-point font

Footnotes, charts, graphics, and budget tables may be 10-point or higher.

Ink color: Black

Spacing: Single-spaced, including all text and tables

Alignment: Left

Headings: Bold all headings and align left.

Size: 8.5 x 11 (Make sure the print area is set and allows printing to 8.5 x 11.)

Margins: 1-inch on all sides

Footer: On each page as the footer, include your organization's name and page numbers. If a competing continuation or competing supplement, also include your 10-digit award number.

Page numbering:

- Do not number the standard OMB-approved forms.
- Number each attachment page sequentially (that is, 1, 2, 3).
- Reset the numbering for each attachment.
- Treat each attachment as a separate section.

File names: You can find guidance for naming our files in the [R&R Application Guide](#).

Project narrative

Use the Research & Related Other Project Information form to attach the project narrative. In the project narrative, you will describe all aspects of your project.

Use the section headers and the order as listed.

Introduction

See merit review criterion 1: [Need](#)

Briefly describe the purpose of your project and the geographic area or medically vulnerable population the training center will serve.

Need

See merit review criterion 1: [Need](#)

Use and cite demographic data whenever possible.

Describe:

- The unmet public health workforce education and training needs of the area the center will serve.
- How the center will help plan and develop training programs to meet such needs. Include the characteristics and needs of geographic area and/or medically vulnerable populations the center plans to partner with.
- The state, local, and tribal health department's workforce development plans in the identified geographic area.
- The training curricula modifications and enhancements you will incorporate that address the public health workforce core competencies and concepts to improve

preventative medicine, manage and prevent chronic disease, promote health, or access to quality of health care services.

- Your organization's approach to recruitment, placement, and retention of current and future public health professionals likely to practice in community-based settings in rural or medically vulnerable communities.

Approach

See merit review criterion 2: [Response](#)

In your application describe:

- How you'll address your stated needs and meet the program requirements and expectations described in this NOFO.
- The strategies for ongoing staff training, teamwork, and information sharing. Also include strategies for outreach and collaboration efforts to involve patients, families, and communities.
- A plan to distribute reports, products, or project outputs to target audiences.

High-level work plan

See merit review criteria 2: [Response](#) and 4: [Impact](#)

In your application describe:

- How you'll achieve each of the objectives during the period of performance.
- A timeline that includes each activity and identifies who is responsible for each. As needed, identify how key stakeholders will help plan, design, and carry out all activities. The extent to which these stakeholders address the needs of the populations and communities served.
- The partnerships with CBT sites used to establish or strengthen faculty-student collaborative projects and field placements.

You will also include a more detailed work plan in your Standardized Work Plan (SWP). See [Other required forms](#).

Resolving challenges

See merit review criterion 2: [Response](#)

In your application discuss:

- The challenges that you are likely to encounter in designing and carrying out the activities in the work plan. Explain approaches that you'll use to resolve them.

Performance management

See merit review criteria 3: [Performance management](#) and 5: [Resources and capabilities](#)

In your application describe:

Outcomes

- The expected outcomes (desired results) of the funded activities.

Performance measurement and reporting

See [Reporting Manual](#) for performance measure requirements and examples of reporting forms. In your application describe:

- How you will collect and report the required performance data accurately and on time.
- How you will manage and securely store data.
- Your process to track field placement participants after program completion for up to one year.
- How you will monitor and analyze performance data to support continuous quality improvement.

Program evaluation

The evaluation should examine processes and progress towards goals, program objectives, and expected outcomes. Evaluations must follow the HHS Evaluation Policy, as well as the standards and best practices described in [OMB Memorandum M-20-12](#).

In your application describe your plan to evaluate the project. Include:

- The evaluation questions, methods, data to be collected, and timeline for implementation.
- The evaluation barriers and your plan to address them.
- The evaluation capacity of your organization and staff. Include experience, skills, and knowledge.
- How you will disseminate results, how you will assess whether your dissemination plan is effective, whether the results are national in scope, and the extent of potential replication.

See the [reporting](#) section for more information.

Sustainability

See merit review criterion 4: [Impact](#)

We expect you to sustain key project elements that improve practices and outcomes for the target population. In your application:

- Propose a plan for project sustainability after the period of federal funding ends.
- Highlight key elements of your projects. Examples include training methods or strategies that have been effective in improving practices.
- Describe the actions you'll take to obtain future sources of funding.
- Determine the timing to become self-sufficient.
- Discuss challenges that you'll likely encounter in sustaining the program. Include how you will resolve these challenges.

Organizational information

See merit review criterion 5: [Resources and capabilities](#)

In your application describe:

- Your mission, structure, and the scope of your current activities. Explain how they support your ability to carry out the program requirements. Include a project organizational chart.
- How you'll follow the approved plan, account for federal funds, and record all costs to avoid audit findings.
- How you'll assess the unique needs of the trainees you serve.
- A staffing plan and job descriptions for key faculty and staff in [Attachment 4](#).
 - You will also include biographical sketches for key staff using the Research & Related Senior/Key Person Profile form. See [Standard Forms](#).
- The organizations you will partner with to fulfill the program goals and meet the training objectives. Include key agreements and letters of support in [Attachment 3](#) and [Attachment 8](#).

Budget and budget narrative

See merit review criterion 6: [Support requested](#)

Your **budget** should follow the instructions in budget narrative: detailed instructions section of the [R&R Application Guide](#) and any specific instructions listed in this section.

HHS now uses the definitions for [equipment](#) and [supply](#) in [2 CFR 200.1](#). The new definitions change the threshold for equipment to the lesser of the recipient's capitalization level or \$10,000 and the threshold for supplies to below that amount.

The total project or program costs are all allowable (direct and indirect) costs used for the HRSA activity or project. This includes costs charged to the award and nonfederal funds used to satisfy any matching or cost sharing requirement (which may include maintenance of effort, if applicable).

Reminder: Indirect costs for training awards cannot exceed 8% of modified total direct costs.

The **budget narrative** supports the information you provide in the Research and Related Budget Form. The merit review committee reviews both. Your budget should show a well-organized plan.

The budget narrative includes an itemized breakdown and a clear justification of the requested costs. As you develop your budget, consider:

- If the costs are reasonable, allowable and allocable, and consistent with your project's purpose and activities.
- Restrictions on spending funds. See [Funding policies and limitations](#).

To create your budget justification narrative, see budget narrative instructions in the [R&R Application Guide](#).

Participant and trainee support costs

Student traineeship support

You must dedicate at least 20 percent of your overall requested budget (direct and indirect costs) as traineeships to individuals who are pursuing a course of study in a health professions field in which there is a severe shortage of health professionals such as epidemiology, environmental health, biostatistics, toxicology, nutrition, and maternal and child health.

Traineeships may also include undergraduate juniors or seniors enrolled in a health profession degree programs in disciplines with shortages.

Traineeship support can cover costs associated with tuition and fees.

Field placement stipends

Students participating in field placements may receive up to:

- If considered: \$3,500 per student for undergraduate junior and senior students and post-baccalaureate certificate program.
- \$5,000 per year for graduate students.

Full-time students may receive a stipend for a field placement for no more than 1 year, or 12 non-consecutive months. Part-time students may receive a stipend prorated at one-half of the fixed amount for no more than 2 years, or 24 non-consecutive months.

Field placements must involve a minimum of 15 students. You may give stipend support for a combination of both field placements and faculty-student collaborative projects above the minimum requirement of 15 students.

Stipends are used to encourage the field placements for public health students and are subsistence allowances for students to help defray living expenses and dependence allowances during the training experience, and are not provided as a condition of employment, or for tuition, fees, health insurance, or other costs associated with the training program. The stipend amounts that can be charged to the award are fixed. Award recipients may not provide stipends lower than the amount specified; however, recipients may choose to provide higher stipend amounts by including funds from non-federal sources.

In your budget narrative:

- List tuition, fees, health insurance, stipends, travel, subsistence, and other costs.
- Identify the number of participants and trainees.
- Separate these costs from others so we can identify them easily.
- Include a sub-total entitled "Total Participant and Trainee Support Costs" with the summary of these costs."

Annual meeting

Include the estimated cost of two staff to travel for a two-to-three day, in-person annual meeting.

Consultant

Identify each consultant, the services they will perform, the total number of days, travel costs, and the total estimated costs.

Attachments

See section [3.2 of the HRSA R&R Application Guide](#).

Place your PDF attachments in order in the Attachments form. See [application checklist](#) to determine if they count toward the page limit.

Unless the instructions below require it, do not submit organizational brochures or other promotional materials (for example, slides, films, clips).

Attachment 1: Accreditation documentation

You must attach a copy of your organization's accreditation demonstrating that it is an accredited school of public health, or another public or nonprofit private institution accredited for the provision of graduate or specialized training in public health, that plans, develops, operates, and evaluates projects to improve preventive medicine, health promotion and disease prevention, or access to and quality of health care services in rural or medically vulnerable communities. Don't provide a web link to the accreditation body's website. HRSA will not open any links included in the application.

Attachment: 2 Project organizational chart

Provide a one-page diagram that shows the full project's organizational structure. Include all aspects, not just the applicant organization.

Attachment: 3 Letters of agreement with other entities

Provide any documents that describe working relationships between your organization and others you refer to in the proposal. Documents that confirm actual or pending contracts or agreements should clearly describe the roles of subrecipients and contractors and any deliverables. It is not necessary to include the entire contents of lengthy agreements, so long as the portions you include describe the working relationship between you and the other organization. Make sure letters of agreement are signed and dated.

Attachment: 4 Staffing plan and job descriptions

See Section 3.1.7 of the [R&R Application Guide](#).

Include a staffing plan that shows the staff positions that will support the project and key information about each. Justify your staffing choices, including education and experience qualifications and your reasons for the amount of time you request for each staff position.

- **Job descriptions:** Limit each job description to one page. Include role, responsibilities, and qualifications. Describe your organization's timekeeping to comply with federal standards on documenting personnel costs.
- **Staffing plan:** You must present a plan with education and experience qualifications and justify the time requested for each position.
- **Expertise needed for project staff:** Academic-practice partnerships, workforce development, adult learning, evidence-based education, and technology-based learning models, particularly distance learning and emerging technologies.
- **Key personnel:** Must devote adequate time to achieving project objectives.
- **Project Coordinator:** Must be a senior health professional with skills in adult education and training management. 100% effort is required for this position.

- **Other key personnel:** For example, key personnel like Evaluator or Instructional Designer must demonstrate expertise in community, state, and local activities and partnerships. Staff should include individuals with experience in adult education, training, instructional design, and curriculum development.
- **Salary support:** You must include a detailed percentage of effort on the PHTC Program grant and other salary sources for key personnel. (For example: Jane Doe, Training Developer: 50% PHTC Program, 20% Title 2 grant, 15% University of X, 15% NIH grant.)

Attachment: 5 Maintenance of effort documentation

Include non-federal funds that support proposed activities. These include cash, in-kind, and other contributions. Do not include any federal funds. See [Maintenance of Effort](#) requirement.

Use the sample format below to provide the Maintenance of Effort documentation.

FY before application: Actual nonfederal expenditures	First FY of award: Estimated nonfederal expenditures
\$	\$

Attachment: 6 Funding preference documentation

There is a statutory funding preference for accredited schools of public health. A letter documenting accreditation as a School of Public Health will be used to document eligibility for this preference. Include a statement that you are eligible for the funding preference based on being an accredited School of Public Health and state that the required documentation is in [Attachment 1](#).

See [Selection process](#) for information about how these apply.

Attachment: 7 Tables & charts

Provide tables or charts that give more details about the proposal. These might be Gantt, PERT, or flow chart.

Attachment: 8 Letters of support (as applicable)

You may provide letters of support from other organizations or departments involved in the proposed project.

Letters of support can also be from individuals within your institution who hold the authority to speak for the organization or department such as a CEO or chair.

Recommenders should indicate an understanding of and commitment to the project, and what their contribution to the project will be. You should reference letters of support in the applicable section of the project narrative.

Recommenders must sign and date their letter of support.

Attachment: 9-15 Other relevant documents

You may use attachments 9 through 15 to add other relevant documents.

Other required forms

You will need to complete some other forms. Upload the following forms at Grants.gov. You can find them in the NOFO [application package](#) or review them and any available instructions at [Grants.gov Forms](#).

Forms	Submission Requirement
SF-424 R&R (Application for Federal Assistance) form	With application.
Project Abstract Summary Form	With application.
Research & Related Other Project Information	With application.
Research & Related Senior/Key Person Profile (Expanded)	With application.
R&R Subaward Budget Attachment(s) Form	With application.
Project/Performance Site Location(s)	With application.
Disclosure of Lobbying Activities (SF-LLL)	If applicable, with the application or before award.
Standardizes Work Plan (SWP) form	With application.

Form instructions

In addition to the requirements for the [budget narrative](#), [project narrative](#), and [attachments](#), following are instructions for each of the other forms required by this NOFO. See the [application checklist](#) for a full list of all application requirements.

SF-424 (R&R) application for federal assistance

This is your application for federal assistance. Follow the instructions in section 3.1.1 of the [R&R Application Guide](#). This is the application for Federal Assistance.

Important: public information

When filling out your SF-424 form, pay attention to Box 15: Descriptive Title of Applicant's Project.

We share what you put there with [USAspending](#). This is where the public goes to learn how the federal government spends their money.

Instead of just a title, insert a short description of your project and what it will do.

[See instructions and examples.](#)

Project abstract summary form

Complete the information in the Project Abstract Summary form. Include a short description of your proposed project. Include the needs you plan to address, the proposed services, and the population groups you plan to serve.

When writing your summary:

- Use 4,000 characters or fewer.
- Make sure it's clear, accurate, short.
- Do not refer to other parts of the application.
- Do not include [personally identifiable information \(PII\)](#) in abstract form.

If you receive an award, we'll put your project abstract on public websites and databases, including [USA Spending.gov](#)

Research & related other project information

In addition to the requirements in the [project narrative](#) section, you will provide some additional information in this form.

- Complete sections 1 through 6.
- Upload a blank document in item 7: Project Summary/Abstract to avoid a cross-form error with your Project Abstract Summary Form.
- Upload your project narrative in item 8.
- Leave items 9, 10, and 11 blank.

Research & related senior/key person profile (expanded)

Include biographical sketches for people who will hold the key positions.

- Try to use no more than 2 pages per person.
- Do not include non-public [personally identifiable information](#).
- If you include someone you have not hired yet, include a letter of commitment from that person with their biographical sketch.
- Upload sketches in the Research & Related Senior/Key Person Profile form.
- Include:
 - Name and title
 - Education and training – for each entry include Institution and location, degree and date earned, if any, and field of study.
 - Section A, Personal Statement. Briefly describe why the individual's experience and qualifications make them well-suited for their role.
 - Section B, Positions and Honors. List in chronological order previous and current positions. List any honors. Include present membership on any federal government public advisory committee.
 - Section C, Other Support. This section is optional. List selected ongoing and completed projects during the last three years. Begin with any projects relevant to the proposed project. Briefly indicate the overall goals of the projects and responsibilities of the person.
 - Other information. If they apply, include language fluency and experience working with populations that are culturally and linguistically different from their own.

R&R subaward budget attachment(s) form

You will also complete the R&R Subaward Budget Attachment Form for each subaward you propose. These include subcontracts. You will do this using the R&R Subaward Budget Attachment(s) Form.

Use the following instructions:

- Once you open this form, you can select “Click here to extract the R&R Subaward Budget Attachment”.
- Save the file and then open it to complete it.
- Once you save the file you can upload it within the form.
- Repeat the steps for each subaward.

If you have more than 10 subawards, you may upload the extra budget forms in the Research and Related Other Project Information form in Block 12 “Other Attachments”.

Project performance site location(s)

Follow the form instructions in [Grants.gov Forms](#). Use the “Next Site” option rather than “Additional Location(s)” to add more than one project/performance site location.

Disclosure of lobbying activities (SF-LLL) form

Follow the form instructions in [Grants.gov Forms](#).

Standardized work plan form**Does not count toward the page limit**

In addition to the requirements in [project narrative, high-level work plan](#), follow these instructions:

- Submit your workplan through the SWP Form. Provide a detailed work plan that demonstrates your experience or ability implementing a project of the proposed scope.
- Follow the instructions in the SWP Form.
- Select your organizational priorities that best fit the objective.
- As specified in the NOFO, [program goal and objectives](#) must be copied as stated.

Step 4: Understand Review, Selection, and Award

Application review

Initial Review

We will review your application to make sure that it meets [eligibility](#) criteria, including the [completeness and responsiveness criteria](#). If your application does not meet these criteria, we will not fund it. If this is the case, we will notify your authorized official.

We will not review any pages that exceed the page limit.

Merit review

A panel reviews all applications that pass the initial review. You can find more about the merit review process in the [R&R application guide](#). The members use these criteria.

Criterion	Total number of points = 100
1. Need	20 points
2. Response	25 points
3. Performance management	10 points
4. Impact	20 points
5. Resources and capabilities	15 points
6. Support requested	10 points

Criterion 1: Need (20 points)

See the project narrative [Introduction](#) and [Need](#) sections.

The panel will review your application for how well it:

- Describes the problem and its contributing factors.
- Clearly identifies the designated geographic areas or medically vulnerable population the center will serve. Describes the target population or area facing significant need and demand for workforce development for public health workers.
- Describes the partnerships needed to develop and implement this project.

Criterion 2: Response (25 points)

See the project narrative [Approach](#), [High-level work plan](#), and [Resolving challenge](#) sections.

The panel will review your application for:

Approach (10 points)

The panel will review your application for how well it:

- Proposes a project that responds to the program’s [purpose](#), requirements and expectations.
- Describes the plan to develop and/or enhance training to educate public health professionals using a variety of modalities that integrate public health areas, MAHA priorities, [\[3\]](#) and meet the quality training standards established by the Centers for Disease Control and Prevention (CDC). [\[4\]](#)
- Plans to establish or strengthen faculty-student collaborative projects and/or field placements
- Assists in the formation or strengthening of workforce development plans at state, local and tribal health departments.
- Discusses the establishment or engagement with current Leadership Institutes that use an integrated primary care and public health approach.
- Identifies strategies for recruitment, placement, and retention of current and future public health professionals likely to practice in community-based primary care in rural or medically vulnerable communities.
- Demonstrates strength in the assessment of the public health professionals needs within the training centers serving area. This includes the education and training needs of the future public health workforce and will assist in the planning and development of training programs to meet such needs;
- Identifies strategies to train current and emerging public health leaders that are likely to hold leadership roles at state or local public health agencies.

High-level work plan (10 points)

The panel will review the application for how well it:

- Explains the plan, design, and execution of the project to meet the proposed goals.
- Describes activities, timeframe, outcomes and deliverables, and key partners required each year to meet the project’s proposed goals.

Challenges (5 points)

The panel will review the application for how well it:

- Describes potential barriers and challenges you may face during project design and implementation. This includes the quality of your plan to address the challenges.

Criterion 3: Performance Management (10 points)

See the project narrative [Performance reporting and evaluation](#) section.

The panel will review your application for:

- Describes a plan to collect and manage data to ensure accurate and timely performance.
 - This includes a process to track trainees up to one year after program completion.
- Proposes to use collected data for continuous quality improvement and to monitor and evaluate project results.
- Demonstrates strong and effective methods to monitor and evaluate project results.

- Describes an evaluation plan that meets program requirements.
- Anticipates evaluation obstacles and how you propose to address them.

Criterion 4: Impact (20 points)

See the project narrative [High-level work plan](#) and [Sustainability](#) sections.

The panel will review your application for:

- How effective the proposed project is likely to be.
- How strong of a public health impact it is likely to have.
- How likely the project results could be national in scope.
- How easy it will be to replicate project activities.
- How likely the program will continue beyond the federal funding.

Criterion 5: Resources and capabilities (15 points)

See the project narrative [Organizational information](#) and [Performance reporting and evaluation](#) sections.

The panel will review your application to determine the extent to which:

- It describes the mission, structure, and scope of your activities and how they relate to your proposed project goals.
- Project staff have the training or experience to carry out the project.
- You have the capabilities to fulfill the needs of the proposed project.
- You have collaborative partners and practice sites available to fulfill the needs of the proposed project.
- It includes [letters of agreement](#), [memoranda of understanding](#), or [letters of support from collaborating partners and practice sites](#).

Criterion 6: Support requested (10 points)

See the [Budget and budget narrative](#) section.

The panel will review your application to determine:

- How reasonable the proposed budget is for each year of the period of performance.
- How reasonable are costs and how well they align with the project's scope.
- How sufficient the time is for key staff to spend on the project to achieve project objectives.

We do not consider **voluntary** cost sharing during merit review.

Risk review

Before making an award, we review your award history to assess risk. We need to ensure all prior awards were managed well and demonstrated sound business practices. We:

- Review any applicable past performance.
- Review audit reports and findings.
- Analyze the budget.
- Assess your management systems.

- Ensure you continue to be eligible.
- Make sure you comply with any public policies.

We may ask you to submit additional information.

As part of this review, we use SAM.gov Entity Information [Responsibility/Qualification](#) to check your history for all awards likely to be more than \$250,000 over the period of performance. You can comment on your organization's information in SAM.gov. We'll consider your comments before making a decision about your level of risk.

If we find a significant risk, we may choose not to fund your application or to place specific conditions on the award.

For more details, see [2 CFR 200.206](#).

Selection process

When making funding decisions, we consider:

- The amount of available funds.
- Assessed risk.
- Alignment with HRSA [Mission and Strategic Priorities](#).
- The results of reviewing the progress report submitted with a competing continuation application that seeks a new period of performance.
- Merit review results. These are key in making decisions but are not the only factor.

We may:

- Consider the larger portfolio of agency-funded projects, including project type and geographic distribution.
- Consider the funding priorities, funding preferences, and special considerations listed.
- Fund out of rank order.
- Fund applications in whole or in part.
- Fund applications at a lower amount than requested.
- Decide not to allow a recipient to subaward if they may not be able to monitor and manage subrecipients properly.
- Choose to fund no applications under this NOFO.

Additionally, we may not make an award if you are delinquent on two or more Single Audit Reports.

You cannot appeal a denial, or the amount of funds awarded.

Funding preferences

This program includes funding preferences, based on 42 U.S.C. 295a(b)(2) (PHS Act section 766(b)(2)). If we determine that your application meets these criteria, we will move it up in

our ranking of fundable applications. Qualifying for a funding preference does not guarantee that you will receive funding.

Funding preference will be determined by HRSA staff.

Qualifications to meet the funding preferences:

Qualification 1: Accredited School of Public Health

You can request funding preference if:

You must confirm your eligibility for this funding preference by attaching a copy of your organization's accreditation as a school of public health. You must submit this documentation as Attachment 6.

Special considerations

This program includes a special consideration related to geographic distribution. HRSA may give your application special consideration if it addresses the following focus areas:

- geographic distribution of the PHTC awards across the nation

Qualifying for special consideration does not guarantee that you will receive funding.

To achieve the distribution of awards as stated, we may need to fund out of rank order.

Award notices

We issue Notices of Award (NOA) on or around the start date listed in the NOFO. See “how we make awards” in the [R&R Application Guide](#) for more information.

By drawing down funds, you accept the terms and conditions of the award.

Step 5: Submit Your Application

Application submission and deadlines

Your organization's authorized official must certify your application. See the section on [finding the application package](#) to make sure you have everything you need.

Application deadline

You must submit your application by **07 17 2026, at 11:59 p.m. ET.**

Grants.gov creates a date and time record when it receives applications.

If you need a deadline extension, see "requesting a waiver" in the [R&R Application Guide](#).

Submission method

Grants.gov

You must submit your application through Grants.gov. You may do so using Grants.gov Workspace. This is the preferred method. For alternative online methods, see [Applicant System-to-System](#).

For instructions on how to submit in Grants.gov, see the [Quick Start Guide for Applicants](#). Make sure that your application passes the Grants.gov validation checks, or we may not get it. Do not encrypt, zip, or password protect any files.

If Grants.gov rejects your application due to errors, you must correct and resubmit before the deadline.

If you want to know more about correcting errors or tracking your application, you can refer to the [R&R Application Guide](#).

Have questions? Go to [Contacts and Support](#).

Other submissions

Intergovernmental review

This NOFO is not subject to [Executive Order 12372](#), Intergovernmental Review of Federal Programs. No action is needed.

Step 6: Learn What Happen After Award

Post-award requirements and administration

Administrative and national policy requirements

There are important rules you need to know if you get an award. You must follow:

- All terms and conditions in the Notice of Award.
- The regulations at [2 CFR 200](#), Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, modifications at 2 CFR 300, or any superseding regulations.
- The [HHS Grants Policy Statement](#). This document is incorporated by reference in your Notice of Award. If there are any exceptions to the GPS, they'll be listed in your Notice of Award.
- All federal statutes and regulations relevant to federal financial assistance, including those highlighted in [HHS Grants Policy Statement](#), Appendix D: HHS Administrative and National Policy Requirements.
- See the requirements for performance management in [2 CFR 200.301](#).
- All anti-discrimination laws: By applying for or accepting federal funds from HHS, you certify compliance with all federal antidiscrimination laws and these requirements. Complying with those laws is a material condition of receiving federal funding streams. You are responsible for ensuring subrecipients, contractors, and partners also comply.

Required Alignment with HRSA Mission and Strategic Priorities

Recipients must use funds awarded under this NOFO to implement program goals or agency priorities in accordance with the HRSA [vision, mission, core values, and strategic priorities](#), where authorized by law.

In administering programs under this and all funding announcements, HRSA prioritizes:

- **Evidence-based healthcare:** Funding activities supported by rigorous scientific evidence, particularly for programs serving children and adolescents, where HRSA is committed to approaches that reflect the highest standards of clinical care and child safety.
- **Biological and physiological integrity:** Recognizing the relevance of biological sex to health outcomes, HRSA encourages applicants to account for sex-based health factors in program design, data collection, and service delivery where scientifically appropriate.

HRSA will implement these priorities consistent with applicable laws, regulations, court orders, and all required administrative procedures. Applicants are encouraged to describe how their proposed programs align with these priorities in their project narratives.

Funded activities must advance HRSA’s vision of protecting and improving the health and well-being of Americans. The particular focus is on those who are medically vulnerable, or live in areas with limited access to care. HRSA’s duty is to serve wisely, effectively, and with measurable results that justify every taxpayer dollar invested.

Consistent with HRSA’s priorities, in carrying out any project funded under this NOFO, the recipient must adhere to the following principles, where they are consistent with the authority and scope of the award and its activities:

- **Gold standard science:** Design and deliver services using gold standard evidence-based and evidence-informed approaches, establish measurable performance goals, and use data to monitor outcomes and drive continuous improvement.
- **Program integrity and fiscal stewardship:** Recipients must:
 - Administer funds in accordance with all applicable federal statutes, regulations, and award conditions.
 - Maintain strong internal controls.
 - Prevent waste, fraud, and abuse.
- **Partnership and local leadership:** Coordinate with state, tribal, territorial, local, and community partners, as appropriate, and tailor services to meet community-identified needs while respecting local decision-making authority.

Recipients must manage any project awarded under this NOFO in accordance with the following objectives in programs authorized to advance them:

Make America Healthy Again (MAHA): HRSA prioritizes the health and well-being of all Americans by supporting common-sense, evidence-based health policies that promote:

- Personal responsibility.
- Strong families and communities.
- Proper nutrition.
- The prevention and management of chronic disease, while ensuring access to high-quality, affordable physical and mental health care.

Child protections, biological integrity, parental rights, and lawful use of funds: HRSA prioritizes safeguarding children’s health and safety by:

- Not supporting medical interventions for gender dysphoria in minors that lack a strong evidence base.
- Applying sex-based definitions grounded in biological reality.
- Supporting parental authority, transparency, and choice in education, including school-based health centers that respect parental rights and religious upbringing.
- Ensuring taxpayer funds are not used to promote or support elective abortions, consistent with federal law and the Hyde Amendment.

Advancing evidence-based, merit-driven, and ethically grounded health care: HRSA will prioritize unbiased, transparent science; merit-based workforce opportunities; and programs that demonstrate measurable outcomes, while deprioritizing organizations with:

- Conflicts of interest.

- "Harm reduction" models.
- Housing-first approaches.
- Activities that facilitate illegal drug use or unsafe medical practices.

Promoting public safety, lawful use of federal funds, and national health priorities: To the extent permitted by law, HRSA will align funding with administration priorities by:

- Supporting ending the HIV epidemic through authorized, evidence-based care.
- Reserving benefits for eligible individuals.
- Discouraging illegal immigration and unsafe community practices.
- Prioritizing recipients that enforce public safety, address serious mental illness and substance use through treatment and recovery, and reduce homelessness responsibly.

To the extent allowable by law, under awards, HRSA will give priority to states and municipalities for programs to:

- Enforce prohibitions on open illicit drug use.
- Enforce prohibitions on urban camping and loitering.
- Enforce prohibitions on urban squatting.
- Enforce, and where necessary, adopt, standards that address individuals who are a danger to themselves or others and suffer from serious mental illness or substance use disorder, or who are living on the streets and cannot care for themselves. The approach must be through assisted outpatient treatment or by moving them into treatment centers or other appropriate facilities through civil commitment or other available means, to the maximum extent permitted by law.

HRSA will implement these priorities consistent with applicable laws, regulations, court orders, and any required procedures.

The recipient must demonstrate ongoing compliance with these priorities, in all programs that are authorized to advance them, through program design, implementation, reporting, and evaluation.

Failure to meaningfully align funded activities with the applicable requirements may result in corrective action, additional reporting requirements, or other actions consistent with federal grant regulations at [2 CFR Part 200](#) and the terms and conditions of this award. This includes termination under [2 CFR § 200.340\(a\)\(4\)](#) if an award no longer effectuates the program goals or agency priorities.

Cybersecurity

- If awarded, you must develop plans and procedures, modeled after the NIST Cybersecurity framework, to protect HHS systems and data. See [details here](#).

Successful applicants under this NOFO agree that:

Where award funding involves:	Recipients and subrecipients are required to:
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Implementing, acquiring, or upgrading health IT for activities funded by any entity	Use health IT that meets standards and implementation specifications adopted in 45 CFR 170, Subpart B, if such standards and implementation specifications can support the activity. Visit to 45 CFR 170, Subpart B learn more.
Implementing, acquiring, or upgrading health IT for activities by eligible clinicians in ambulatory settings, or hospitals, eligible under Sections 4101, 4102, and 4201 of the HITECH Act	Use health IT certified under the ONC Health IT Certification Program if certified technology can support the activity. Visit https://www.healthit.gov/topic/certification-ehrs/certification-health-it to learn more.

If standards and implementation specifications adopted in [45 CFR part 170, Subpart B](#) cannot support the activity, recipients and subrecipients are encouraged to use health IT that meets non-proprietary standards and implementation specifications developed by consensus-based standards development organizations. This may include standards identified in the ONC Interoperability Standards Advisory, available at <https://www.healthit.gov/isp/>.

Reporting

If you are successful, you will have to follow the reporting requirements in Section 4 of the [R&R Application Guide](#). The NOA will provide specific details.

- Progress report(s) each year
- Annual performance reports.
- All HRSA recipients must collect and report performance data so that HRSA can meet its obligations under the Government Performance and Results Modernization Act of 2010 (GPRMA) and the Foundations for Evidence-Based Policymaking Act of 2018.
- The Annual Performance Report (APR) collects data on all academic year activities from July 1 to June 30. It is due to HRSA on July 31 each year. If award activity extends beyond June 30 in the final year of the grant, HRSA may require a Final Performance Report (FPR) to collect the remaining performance data. The FPR is due within 120 calendar days after the period of performance ends.
- You can find examples of APRs at [Report on Your Grant](#) on the HRSA website. Performance measures and reporting forms may change each academic year. HRSA will provide additional information in the Notice of Award (NOA).

Contacts and Support

Agency contacts

Program and eligibility

Caroline Ayong

Project Officer

Attn:

Public Health Training Centers (PHTC) Program

Division of Nursing and Public Health

Health Resources and Services Administration

cayong@hrsa.gov

301-287-0230

Financial and budget

John Gazdik

Grants Management Specialist Division of Grants Management Operations Office of Financial Assistance and Acquisition Management (OFAAM) Health Resources and Services Administration

JGazdik@hrsa.gov

301-443-6962

HRSA Contact Center

Open Monday – Friday, 7 a.m. – 8 p.m. ET, except for federal holidays.

Call: 877-464-4772 / 877-Go4-HRSA

TTY: 877-897-9910

[Electronic Handbooks Contact Center](#)

Help with systems

Grants.gov

Grants.gov provides 24/7 support. You can call 800-518-4726, search the [Grants.gov Knowledge Base](#), or [email Grants.gov for support](#). Hold on to your ticket number.

SAM.gov

If you need help, you can call 866-606-8220 or live chat with the [Federal Service Desk](#).

Helpful websites

- [Application Guide](#)
- [HRSA Grants page](#)
- [HHS Tips for Preparing Grant Proposals](#)

- [Frequently Asked Questions](#)
- [Applicant Training](#)
- [Bureau of Health Workforce Glossary](#)

Footnotes

[1] 42 U.S.C. 295b(b)(3) (Public Health Service Act Sec. 767(b)(3))

[2] Explore Health Professions Training Programs. (2024).
<https://data.hrsa.gov/topics/health-workforce/training-programs>

[3] [Make America Healthy Again \(MAHA\) | HHS.gov](#)

[4] Quality training Standards. (2025, February 24). Training Development.
<https://www.cdc.gov/training-development/php/qts/index.html>