

HRSA

Health Resources & Services Administration

Bureau of Health Workforce

Notice of Funding Opportunity








Application due 07/08/2026

Primary Care Dental Faculty Development Center Program (PCDFD)

Opportunity number: HRSA-26-080



Contents

Before you begin	<u>3</u>
 Step 1: Review the Opportunity	<u>4</u>
Basic information	<u>5</u>
Eligibility	<u>6</u>
Program description	<u>9</u>
Award information	<u>14</u>
 Step 2: Get Ready to Apply	<u>18</u>
Get registered	<u>19</u>
Find the application package	<u>19</u>
Application writing help	<u>20</u>
 Step 3: Build Your Application	<u>21</u>
Application checklist	<u>22</u>
Application contents and format	<u>24</u>
 Step 4: Understand Review, Selection, and Award	<u>37</u>
Application review	<u>38</u>
Selection process	<u>43</u>
Award notices	<u>46</u>
 Step 5: Submit Your Application	<u>47</u>
Application submission and deadlines	<u>48</u>
Other submissions	<u>48</u>
 Step 6: Learn What Happens After Award	<u>49</u>
Post-award requirements and administration	<u>50</u>
Reporting	<u>54</u>
 Contacts and Support	<u>55</u>
Endnotes	<u>58</u>



Before you begin

If you believe you are a good candidate for this funding opportunity, secure your [SAM.gov](#) and [Grants.gov](#) registrations now. If you are already registered, make sure your registrations are active and up-to-date.

SAM.gov registration (this can take several weeks)

You must have an active account with SAM.gov. This includes having a Unique Entity Identifier (UEI).

[See Step 2: Get Ready to Apply](#)

Grants.gov registration (this can take several days)

You must have an active Grants.gov registration. Doing so requires a Login.gov registration as well.

[See Step 2: Get Ready to Apply](#)

Apply by the application due date

Applications are due by 11:59 p.m. Eastern Time on 07/08/2026.



To help you find what you need, this NOFO uses internal links. In Adobe Reader, you can go back to where you were by pressing Alt + Left Arrow (Windows) or Command + Left Arrow (Mac) on your keyboard.

- 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

In this step

Basic information	5
Eligibility	6
Program description	9
Award information	14

Basic information

Health Resources & Services Administration

Bureau of Health Workforce

Supporting the development of faculty who teach primary care dentistry.

Summary

The Primary Care Dental Faculty Development Center serves as a resource and training hub to:

- Support the development of faculty who teach primary care dentistry.
- Advance community and population-level approaches to assess and improve oral health outcomes.
- Prepare dental faculty for roles in program leadership.

Faculty development will include: increasing the ability to teach clinical dentistry, developing leadership competencies, and dissemination including publishing and presentations.

Funding details

Application types: Competing continuation, New

Expected total available funding in FY26: \$1,000,000

Expected number and type of awards: 1 CA (Cooperative Agreement)

Funding range per award: \$500,000 to \$1,000,000

We plan to fund awards in five budget periods for a total period of performance from 09/01/2026 to 08/31/2031.

The program and awards depend on the appropriation of funds and are subject to change based on the availability and amount of appropriations.



Have questions?

Go to [Contacts and Support](#).

Key facts

Opportunity name:
Primary Care Dental Faculty Development Center Program (PCDFD)

Opportunity number:
HRSA-26-080

Announcement version:
Initial

Federal assistance listing:
93.976

Keydates

NOFO issue date:
06/05/2026

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

Application deadline:
07/08/2026

Expected award date:
09/01/2026

Expected start date:
09/01/2026

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

Eligibility

Eligible entities include entities that have programs in dental or dental hygiene schools, or approved residency or advanced education programs in the practice of general, pediatric, or public health dentistry, which may include dental schools, or public or private not-for-profit hospitals, or public or private nonprofit entities which the Secretary of Health and Human Services deems capable of carrying out this grant.

Types of eligible organizations

These types of domestic* organizations may apply:

- Public and State controlled institutions of higher education.
- 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.
- Others (see text field entitled “Additional information on eligibility” for clarification).

*“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.

Additional information on eligibility

You can apply if you are an accredited school of dentistry, public or nonprofit hospital, or public or private nonprofit entity which the Secretary of Health and Human Services deems capable of carrying out this grant.

Individuals are not eligible applicants under this NOFO.

Other eligibility criteria

Domestic faith-based and community-based organizations, tribes, and tribal organizations are also eligible to apply, if otherwise eligible.

- You must be accredited by the Commission on Dental Accreditation (CODA) before September 1, 2026. We will check the CODA website to confirm your accreditation.

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.

Each trainee must also:

- Have one of these health professional degrees: Doctor of Dental Surgery (DDS), Doctor of Dental Medicine (DMD), or Dental Hygienist (DH).
- Be a licensed dentist or dental hygienist.
- Have a non-tenured, junior faculty appointment (instructor, assistant professor, associate professor, or program director).
- Have their faculty appointment at an accredited dental school, dental hygiene school, or primary care dental residency program. Eligible types of residency programs include:
 - General Practice Residency (GPR)
 - Advanced Education in General Dentistry (AEGD)
 - Pediatric Dentistry
 - Dental Public Health (DPH) Residency
- Be newly hired faculty within the past five years.

Note: Faculty from your own institution are eligible to participate as trainees, if otherwise eligible.

Completeness and responsiveness criteria

We will review your application to make sure it meets these basic requirements to move forward in the competition.

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 in your attachments.

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 purpose of this program is to create a Primary Care Dental Faculty Development Center. The center will support dental faculty development by leading training activities and through subawards to training partners. The center will support faculty trainees with improved teaching strategies, evaluation and assessment strategies, and leadership development.

The center will tailor training to faculty teaching primary care dentistry:

- At the predoctoral level (dentistry and dental hygiene) and postdoctoral level (GPR, AEGD, Pediatrics, DPH).
- In academic and community-based settings.
- As new clinicians pursuing long-term academic careers and experienced clinicians entering teaching for the first time.
- To increase dental faculty's clinical, research, and leadership skills and their ability to teach clinical dentistry.

Background

Dental schools continue to face challenges recruiting and retaining faculty. The American Dental Education Association (ADEA) reports an increase of total open faculty positions from 383 in academic year (AY) 2018-19 to 645 in AY 2022-23^[1]. Further, the proportion of schools redistributing teaching loads to cover faculty vacancies increased from 44% in AY 2020-21 to 67% in AY 2021-22^[2]. Use of part-time faculty also decreased from 32% to 21% in the same time period. While the total lost faculty positions decreased from AY 2020-21 to AY 2021-22, more full-time faculty positions were cut at schools^[3].

Demand for dental faculty is unlikely to wane. The number of accredited dental schools has increased from 65 in AY 2015-16 to 75 today as has enrollment in dental education, increasing from 25,381 in AY 2018-19 to 27,004 in AY 2023-24^[4].

While CODA requires programs to conduct faculty development, implementation varies. Faculty development can prepare clinicians with clinical, research, and administrative skills to transition from clinical practice to teaching in competitive academic environments.

HRSA has funded prior faculty development efforts to prepare clinicians to teach and in 2020 published qualitative outcomes of these efforts. The outcomes describe resources

and infrastructure supporting improved faculty skills in education, research, and administration. Common faculty development activities included community-based training, curriculum enhancements, web-based training, and interprofessional education methods. Faculty development modalities included faculty seminars, master's degrees, and mentoring. Pipeline activities, online resources, and continuing education also supported clinicians moving into academics. While faculty development can also improve retention, the effect of faculty development on dental practice patterns and patient outcomes are still less clear⁵¹.

Program goal and objectives

Goal: To increase dental faculty's clinical, research, and leadership skills and their ability to teach clinical dentistry.

If you receive this award, you will establish a Primary Care Dental Faculty Development Center with these objectives:

Objective 1. Prepare faculty to teach clinical primary care dentistry in academic as well as community-based settings.

Objective 2. Advance community and population-level approaches to assess and improve oral health outcomes.

Objective 3. Increase the supply of qualified faculty for leadership positions within dental schools, dental hygiene schools, and primary care dental residency programs.

Program requirements and expectations

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

If you receive this award, you must use this funding to:

- Plan, develop, and implement a Primary Care Dental Faculty Development Center that is national in scope.
- Advertise the center's dental faculty development program nationally.
- Complete a planning year from September 1, 2026, to August 31, 2027. Use the planning year to:
 - Develop curricula in the three focus areas described here. Make curricula applicable at the pre-doctoral and post-doctoral level and in academic and community-based settings.
 - Create a methodology to collect and score trainee applications.
 - Recruit trainees for the first cohort.
 - Initiate any required subawards for needed training content and support.

- Support two cohorts of at least 20 trainees each. These cohorts must run on two-year cycles beginning in years two and four of the grant award.
 - The first cohort must start by September 1, 2027, and end by August 31, 2029.
 - The second cohort must start by September 1, 2029, and end by August 31, 2031.
- In the first four months of each two-year cohort, work with each trainee to create an Individual Development Plan (IDP). IDPs should target their clinical, research, and leadership goals. Provide regular mentorship and guidance to implement the IDPs.
- Plan and host a minimum of four face-to-face training sessions for each two-year cohort (one per academic semester).
- Support trainee travel to the ADEA annual conference and exhibition.
- Create a flexible application process to accommodate trainees with varied levels of prior training, experience, and faculty development coursework.
- Submit trainee applications through the appropriate department chair or designated institutional official, as direct trainee submissions are not permitted.
- Identify an internal advisor or mentor. This person will guide the implementation of the trainee's IDP. They will also help tailor faculty development activities to the resources available where the trainee is teaching.
- Help trainees become clinician educators and faculty leaders capable of teaching primary care dentistry in interprofessional clinical sites targeting rural populations and populations with limited access to services.
- Integrate in-person, virtual, and any tele-technology in training, for example tele-precepting, tele-mentoring, Project ECHO, live video, remote patient monitoring, or other technology as appropriate.
- Use of methods such as Multiple Chronic Conditions (MCC) e-Care Plan, artificial intelligence and assistive technology, and mobile health technologies to provide telehealth and in-person care delivery.

Focus area one: Teaching clinical dentistry

You must develop a robust curriculum to assist trainees with:

- Targeted, effective teaching strategies (lectures, case studies, simulations, group discussion, and interprofessional teaching approaches).
- Curriculum development.
- Communication skills.
- Student and resident evaluation to assess mastery of competencies and collect feedback.
- Mentoring and advising.

- Use of online learning platforms.
- Virtual simulation.
- Teledentistry models.
- Multimedia resources.

Training should:

- Ensure that trainees have mastery of current clinical techniques and are calibrated with their programs' clinical standards.
- Build interpersonal skills, including active listening, clear concise communication, critical thinking, providing constructive feedback, and conflict resolution.
- Help trainees maintain a high degree of ethics and professionalism.

Focus area two: Academic scholarship

You must include additional curriculum to introduce trainees to research skills, such as:

- Grant writing.
- Research methodology.
- Study design.
- Literature reviews.
- Data collection methods.
- Statistical analysis approaches.
- Publication and report writing.
- Data presentation and dissemination.
- Collaborative approaches to research projects.

Training should focus on developing skills to engage in community and population-level approaches to assess and improve oral health outcomes. These approaches may include:

- Integrating oral health and primary care medicine.
- Training to care for vulnerable populations, such as pregnant women, infants, and people with special needs and complex medical conditions.
- Preventing and controlling dental diseases through organized community efforts.

Skills could also include population health projects such as evaluating systems of care or designing surveillance systems to measure oral health status.

Focus area three: Program leadership

You must develop and deliver leadership curriculum to advance trainees' careers into administrative and leadership roles. Leadership development content should match trainees' IDP goals, and may include:

- Specific continuing education programs.
- Leadership training courses (virtual or in-person).
- Networking skills building.
- Mentorship and career advocacy development.
- Administrative skills building (constructing budgets, schedules, and other administrative tasks).
- Collaboration strategies for achieving projects and initiatives, such as accreditation preparation, both within and outside of the trainees' specific department, school, and institution.
- Leading efforts to establish faculty development initiatives targeting additional faculty where the trainees teach.

Statutory authority

42 U.S.C. § 293k-2 (Section 748 of the Public Health Service Act)

Award information

Cooperative agreement terms

Our responsibilities

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

- Monitor and support implementation of the Project Work Plan through monthly collaborative meetings and progress report reviews.
- Confer with the center in the development of the faculty development training program.
- HRSA may collaborate, upon request, to provide help on the process for identifying and/or selecting competitive applicants for the program.
- Collaborate with the center to identify appropriate outcome measures, evaluation plans, and dissemination strategies to ensure successful program outcomes.
- Collaborate with the center on design strategies to disseminate best practices, available evidence, and evaluation tools.
- Collaborate with the center on their strategy to recruit trainees, including review of advertising announcements, application forms, and scoring rubrics.

Your responsibilities

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

- Meet monthly with the HRSA Project Officer.
- Confer with HRSA to design and implement the solicitation notice to recruit and select eligible trainees. Address geographic representation by selecting trainees across HRSA/HHS Regions.
- Convey HRSA requirements to trainees and their respective department chairs and gather written 'sign-off.'
- Confer with HRSA in the development of the faculty training program. Work with HRSA to refine and implement the Project Work Plan at least annually across the five-year award.
- Collaborate with HRSA to identify appropriate outcome measures, evaluation plans, and dissemination strategies to ensure successful program outcomes.
- Collaborate with HRSA to design strategies to disseminate best practices, available evidence, and evaluation tools.

- Make subawards to training partners as needed in year 1 of the grant, ensuring initiation of the faculty development program no later than September 1, 2027 and ensure subrecipients are aware of all program and grant requirements.
- Coordinate with HRSA to modify the faculty development program, as needed, to meet the program goal and objectives.
- Submit all materials for general distribution, including online or partner materials, for HRSA review prior to dissemination in the program.
- Attend and participate in HRSA and related stakeholder meetings, as applicable.

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 \[PDF\]](#). 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 \[PDF\]](#).

Program-specific statutory or regulatory limitations

- You cannot use grant funds:
 - To buy real property, or for construction.
 - To pay for equipment costs not related directly to the purposes of this award. Funding for reasonable equipment purchases is allowed.
 - For foreign travel or training.
 - For specialty board certification exam fees.
 - For accreditation costs and fees.
 - For financial assistance to other health care trainees.
- You must have policies, procedures, and financial controls in place. You must comply with legal requirements and restrictions, including those that limit specific uses of funding.

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.

Per [45 CFR 75.414](#) (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

In this step

Get registered	19
Find the application package	19
Application writing help	20

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.

If you need additional information about user roles in SAM.gov, see “Get registered: SAM.gov user roles” in the [R&R Application Guide \[PDF\]](#).

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-26-080.

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.

FAQs will be posted on Grants.gov Related Documents tab.



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



Step 3:

Build Your Application

In this step

Application checklist	<u>22</u>
Application contents and format	<u>24</u>

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](#) 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, memorandum of understanding, and contracts	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 priority documentation	Yes
<input type="checkbox"/> 7. Training chart	Yes
<input type="checkbox"/> 8. Letters of support	Yes
<input type="checkbox"/> 9. Progress report for competing continuation applications	Yes
<input type="checkbox"/> 10-15. Other relevant documents	Yes

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: 60

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
- .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 \[PDF\]](#).

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.
- Be sure to describe the creation or improvement of a Primary Care Dental Faculty Development Center that is national in scope and aims to include eligible trainees.

Need

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

- Describe the trainees and their unmet needs this program will address.
- Discuss the need for a comprehensive, two-year faculty development program serving junior primary care dental faculty.
- Describe how this project will improve the oral health outcomes of the population served by the trainees and their respective dental students and residents.
- Use and cite demographic data whenever possible.

Approach

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

- Explain how the center will achieve the program [goal and objectives](#).
- Describe how you will create a national Primary Care Dental Faculty Development Center. Describe how you will support trainees through training and development activities delivered by the center and any subaward training partners.
- Provide evidence of your experience in faculty development of primary care dental faculty. Describe how you will help trainees become clinician educators and faculty leaders capable of teaching primary care dentistry in interprofessional clinical sites targeting rural populations and populations with limited access to services.
- Include how you will tailor content to meet the needs of faculty teaching at the pre-doctoral and post-doctoral level as well as in academic and community-based settings.
- Address how you will provide faculty development approaches targeting both new clinicians pursuing long-term academic careers and experienced clinicians entering teaching for the first time.
- Describe how you will develop IDPs to match the needs of the individual trainees and provide them with necessary mentorship, knowledge, and skills (including pedagogical skills), and experience needed for career advancement and promotion.
- Describe detailed plans to develop curriculum in all three [focus areas](#) of the NOFO.
- Detail how you will host a minimum of four face-to-face training sessions for each two-year cohort and how you will support trainees' attendance at the ADEA annual conference and exhibition.
- State clearly how you will advertise the center's dental faculty development program nationally, create a method to collect and score trainee applications, and enroll cohorts of at least 20 trainees by the cohort start dates.
- Describe how the center will integrate in-person, virtual, and any tele-technology in your training.
- Detail how you will collaborate with HRSA, including:
 - Hosting monthly meetings with the HRSA Project Officer.
 - Collaborating on the development of the training content.
 - Conferring on selection of the trainees.
 - Working together to identify outcome measures and an evaluation approach.
 - Reviewing materials and dissemination products.

High-level work plan

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

- Describe how you'll achieve each of the objectives during the period of performance.
- Provide 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.
- Include the extent to which these stakeholders address the needs of the trainees the center is serving.
- 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](#).

- Discuss challenges that you are likely to encounter in designing and carrying out the activities in the work plan.
- Include potential challenges recruiting trainees, center staff, and training partners to deliver the faculty development content.
- Explain approaches that you'll use to resolve these challenges.

Performance reporting and evaluation

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

- **Outcomes.** Describe the expected outcomes (desired results) of the funded activities.
- **Program evaluation.** The evaluation should examine processes and progress towards goals, program objectives, and expected outcomes. Be sure your evaluation plan assesses any:
 - Increase in number of faculty prepared to teach primary care dentistry in academic and community-based settings.
 - Improvement in teaching and training experiences provided to pre- and post-doctoral dental and dental hygiene students and residents.
 - Implementation and impact of population and community health approaches to assess and improve health outcomes.
 - Instances of dental and dental hygiene faculty advancement, and promotion into leadership positions.

- Evaluations must follow the HHS Evaluation Policy, as well as the standards and best practices described in [OMB Memorandum M-20-12](#). 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. 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](#).

- Briefly 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.
- Discuss how you'll follow the approved plan, account for federal funds, and record all costs to avoid audit findings.
- Describe how you'll assess the unique needs of the trainees you serve.
- Include a staffing plan and job descriptions for key faculty and staff in [Attachment 4](#).

- Describe the organizations you will partner with to fulfill the program goals and meet the training objectives. Include key agreements in [Attachment 3](#) and letters of support in [Attachment 8](#).
- You will also include biographical sketches for key staff using the Research & Related Senior/Key Person Profile form. See [Other required forms](#).

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 \[PDF\]](#) 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 \[PDF\]](#).

Participant and trainee support costs

In your budget narrative:

- List tuition, fees, health insurance, stipends, travel, subsistence, and other costs.
- Identify the number of 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.
- Include the costs to fund a minimum of two in-person training sessions annually in years two to five.
- Include the costs to fund all trainees’ attendance at the Annual Session and Exhibition of ADEA in years two to five.

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 \[PDF\]](#).

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 provide documentation of your CODA accreditation or initial accreditation. Please do not provide only the 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, memorandum of understanding, and contracts

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 \[PDF\]](#).

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, experience, qualifications, and your reasons for the amount of time you request for each staff position.

For key personnel, attach a one-page job description. It must include the role, responsibilities, and qualifications.

Attachment 5: Maintenance of effort documentation

You will 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 priority documentation

- Provide a list of the priorities you're requesting, clearly indicated by the number and name of the priority.
- Provide documents that prove you qualify for your chosen funding priorities.
- Include all data showing your calculations, including numerators and denominators, where applicable.
- Provide a letter signed by the respective dean, department chair, or program director attesting to the accuracy of all data and information submitted supporting your requested priority points.

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

Attachment 7: Training chart

Provide a training chart that details the number of primary care dental faculty trainees you plan to train in each cohort. Include:

- The number of pre-doctoral dental faculty trainees.
- The number of pre-doctoral dental hygiene faculty trainees.
- The number of primary care post-doctoral faculty trainees by discipline (general, pediatric, dental public health).
- The number of academic dental faculty trainees.
- The number of community-based dental faculty trainees.
- The number of faculty trainees anticipated by HRSA/HHS Region.

Attachment 8: Letters of support

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 for the document to be considered.

Attachment 9: Progress report for competing continuation applications

If your application is to request continued funding for a project that is in the final budget period of a period of performance, you must include a progress report as an attachment. If you do not receive an award under this NOFO, you will still need to submit the report through the usual process.

Your progress report should briefly present your accomplishments related to the program objectives during the current period of performance. Include:

- The period covered.
- Specific project objectives.
- The program activities conducted for each objective.
- Positive or negative results or technical problems.
- A table showing the number of trainees participating in the program.

Attachments 10-15: Other relevant documents

You may use attachments 10 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 \[PDF\]](#). 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 applicable, identify if you are requesting funding priorities. For more information, see section 3.1.2 of the [R&R Application Guide \[PDF\]](#).

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 two 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

In this step

Application review	<u>38</u>
Selection process	<u>43</u>
Award notices	<u>46</u>

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 \[PDF\]](#). The members use these criteria.

Criterion	Total number of points = 100
1. Need	10 points
2. Response	30 points
3. Performance management	15 points
4. Impact	10 points
5. Resources and capabilities	20 points
6. Support requested	15 points

Criterion 1: Need (10 points)

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

The panel will review your application for how well it:

- Describes a project purpose that aligns with the purpose of the funding opportunity.
- Describes primary care dental faculty trainees' unmet needs this program will address.
- Discusses the needs of your organization to provide a comprehensive, two-year dental faculty development program to junior primary care dental faculty.
- Describes how the healthcare and specific patient health outcomes of populations served by the trainees and their respective dental students and residents will be improved because of the project.

Criterion 2: Response (30 points)

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

Approach (15 points)

The panel will review your application for how well it:

- Describes how you will create a national Primary Care Dental Faculty Development Center that supports faculty development of junior primary care dental faculty trainees through training and development activities delivered by the proposed Center and any sub-award training partners.
- Provides evidence of your experience in faculty development of primary care dental faculty to become clinician educators and faculty leaders capable of teaching primary care dentistry in interprofessional clinical sites targeting rural populations and populations with limited access to services.
- Includes how you will customize faculty development content to meet the needs of clinical primary care dental faculty teaching in pre-doctoral (dentistry and dental hygiene) and post-doctoral (GPR, AEGD, Pediatrics, and DPH), as well as in academic and community-based settings.
- Addresses how you will provide faculty development approaches targeting both new clinicians pursuing long-term academic careers and returning clinicians entering teaching for the first time.
- Describes how you will develop IDPs to match the needs of the individual trainees and provide them with necessary mentorship, knowledge, and skills (including pedagogical skills), and experience needed for career advancement and promotion.
- Describes detailed plans to develop curriculum in all Focus Areas of the NOFO.
- Details how you will host a minimum of four, face-to-face training sessions for each two-year faculty development cohort, and support trainees' attendance at the ADEA annual conference and exhibition.
- Clearly states how you will advertise the center's dental faculty development program nationally, create a method to collect and score applications for junior faculty trainees hired to teach within the past five years, and enroll two cohorts of not less than 20 trainees each by the start of years 2 and 4 of the 5-year cooperative agreement project.
- Describes how the center will integrate in-person, virtual, and any tele-technology in training and patient care, for example tele-precepting, tele-mentoring, project ECHO, live video, remote patient monitoring, or other technology as appropriate.

- Details how you will collaborate with HRSA to implement the Dental Faculty Development Center including hosting monthly meetings with the HRSA Project Officer, collaborating on the development of the training content, conferring on selection of the trainees, working together to identify outcome measures and an evaluation approach, and reviewing materials and dissemination products.

High-Level Work Plan (10 points)

The panel will review your application for how well it:

- Describes activities that will address the problem and meet project objectives.
- Provides a timeline that includes each activity and identifies who is responsible for each.
- Includes the extent to which project stakeholders can address the needs of the trainees the center is serving.

Resolution of Challenges (5 points)

The panel will review your application for how well it:

- Describes the obstacles and challenges you may face during project design and implementation. This includes the quality of your plan to deal with them.
- Includes potential challenges recruiting trainees, center staff, and training partners to deliver the faculty development content.

Criterion 3: Performance reporting and evaluation (15 points)

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

Evaluation

The panel will review your application for how well it:

- Demonstrates strong and effective methods to monitor and evaluate the expected outcomes and desired results of the center.
- Assesses any increase in the number of faculty prepared to teach primary care dentistry in academic and community-based settings.
- Captures improvements in teaching and training experiences provided to pre- and post-doctoral dental and dental hygiene students and residents.
- Documents population and community health approaches to assess and improve oral health outcomes.
- Collects instances of dental and dental hygiene faculty advancement and promotion.

Performance measurement

The panel will review your application for how well it:

- Presents a quality plan to collect and manage data to ensure accurate and timely performance.

Criterion 4: Impact (10 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 (20 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:

- You describe your mission, structure, and scope of current activities, and how they support your ability to carry out the program requirements and include a project organizational chart.
- You discuss how you will follow the approved plan, account for federal funds, and record all costs to avoid audit findings.
- You describe the organizations you will partner with to fulfill the program goals and meet training objectives, and include key agreements and letters of support.
- Project staff have the training or experience to carry out the project, including the clinical, teaching, research, and leadership expertise required to assure trainee competencies in each respective focus area of the program, as well as the experience to carry out performance reporting and program evaluation on the grant.
- You have quality facilities available to carry out the project.
- You have the capacity to gather, manage, and use data.

Criterion 6: Support requested (15 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 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.
- If participant or trainee support costs support the faculty development in each required focus area.
- If consultant services are clearly identified and adequate in each required focus area of the project.
- How clearly you identify [travel costs](#) for face-to-face trainee learning sessions and attendance at the ADEA conference.

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.
- Merit review results. These are key in making decisions but are not the only factor.
- [Alignment with HRSA Mission and Strategic Priorities](#)

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 priorities

This program includes a funding priority, based on 42 U.S.C. 293k-2(c), sec. 748(c) of the Public Health Service Act. There are eight funding priorities, and you are permitted to apply for more than one. A funding priority adds points to merit review scores if we determine that the application meets the listed criteria. Qualifying for a funding priority does not guarantee that your application will be successful.

Priority 1: Collaborative project (1 Point)

We will give you a funding priority if:

You propose a collaborative project between 1) a department of general, pediatric, or public health dentistry and 2) a department of primary care medicine. The interdisciplinary collaboration must be a focus of your application and be included in the work plan. You must include a letter of agreement from the collaborating department of primary care medicine in Attachment 3.

Priority 2: Discipline retention (1 Point)

We will give you a funding priority if:

Sufficient numbers of program completers from your training program enter and remain in the practice of primary care dentistry. There are two ways to qualify:

- Record of Training: To qualify under this method you must confirm that more than 90 percent of your program completers from AY 2023-24 and AY 2024-25 entered and remain in the practice of primary care dentistry. You must provide a letter from the dean at your institution that affirms your actual percentage of retention.
OR
- Significant Improvement: To qualify under this method, you must confirm an increase of 50 percent or more in the number of program completers from AY 2022-23 to AY 2024-25 who entered and remain in the practice of primary care dentistry. You must provide a letter from the dean at your institution that affirms your actual percentage improvement.

Note: New programs that did not have program completers in the above academic years are not eligible for this priority due to the absence of baseline data.

Priority 3: Student background (1 Point)

We will give you a funding priority if:

25 percent or more of your total current trainee population in your CODA-accredited primary care training program is from a rural background, disadvantaged background, or underrepresented minority. You must also affirm that you did not count any trainee more than once when making the calculation. To calculate the greatest percentage, include the following formula in your application:

$$\text{Percentage} = \frac{\text{\# current enrolled trainees who are underrepresented minorities or from rural or disadvantaged backgrounds}}{\text{Total number of trainees enrolled}} \times 100$$

Priority 4: Formal relationships (1 Point)

We will give you a funding priority if:

You have established, or plan to establish, a formal relationship with a Federally Qualified Health Center (FQHC), a rural health clinic, or an accredited teaching facility and that conduct training for the purpose of training faculty trainees. You must include a letter of agreement from the FQHC, the rural health clinic, or an accredited teaching facility in [Attachment 3](#). To apply for this priority, you must provide sufficient documentation of the actual or pending working relationship with the center.

Priority 5: Vulnerable populations (1 Point)

We will give you a funding priority if you include training on how to conduct:

- Teaching programs targeting vulnerable populations such as older adults, homeless individuals, victims of abuse or trauma, individuals with mental health or substance use disorders, individuals with disabilities, and individuals with HIV/AIDS.
- Teaching programs in the risk-based clinical disease management of all populations.

The proposed activities must be a focus of your application and included in your work plan.

Priority 6: Cultural competency and oral health literacy (1 Point)

We will give you a funding priority if:

Your project includes educational activities in cultural competency and oral health literacy. These activities must be included in your work plan.

Priority 7: Placement in practice settings (1 Point)

We will give you a funding priority if:

Your program completers practice in underserved areas or serve health disparity populations at a high or significantly increased rate. There are two ways to qualify:

1. **High Rate:** To qualify under this method, you must provide a letter from your dean or program director that affirms that 40 percent or more of your program completers from AY 2023-24 and AY 2024-25 practice in underserved areas or serve health disparity populations. You must include the actual percentage calculation in your letter.

OR

2. **Significant Increase:** To qualify under this method, you must provide a letter from your dean or program director that affirms that the percentage of your program completers who practice in underserved areas or serve health disparity populations increased by at least 20 percentage points from AY 2022-23 to AY2024-25. You must include the actual percentage calculations in your letter.

Note: New programs that had no program completers in the above academic years are not eligible for this priority due to the absence of baseline data.

Priority 8: Special populations (1 Point)

We will give you a funding priority if:

You propose establishing a special populations oral health care education center or training program for the didactic and clinical education of dentists, dental health professionals, and dental hygienists who plan to teach oral health care for people with developmental disabilities, cognitive impairment, complex medical problems, significant physical limitations, and vulnerable elderly.

Special considerations

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 \[PDF\]](#) for more information.



Step 5: Submit Your Application

In this step

Application submission and deadlines	<u>48</u>
Other submissions	<u>48</u>

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 07/08/2026, 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 \[PDF\]](#).

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 \[PDF\]](#).



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 Happens After Award

In this step

Post-award requirements and administration	<u>50</u>
Reporting	<u>54</u>

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 [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:
<p>Implementing, acquiring, or upgrading health IT for activities funded by any entity</p>	<p>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.</p> <p>Visit to 45 CFR 170, Subpart B learn more.</p>
<p>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.</p>	<p>Use health IT certified under the ONC Health IT Certification Program if certified technology can support the activity.</p>

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](#).

Reporting

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

You must also follow these program-specific reporting requirements:

- 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).
- We will require a Quarterly Progress Update (QPU). A QPU is due within 15 calendar days after each quarter of the project period. It will be automatically generated by the EHBs system. This update requires you to report progress on activities included in your Standardized Work Plan (SWP).



Contacts and Support

In this step

Agency contacts	<u>56</u>
Help with systems	<u>57</u>

Agency contacts

Program and eligibility

Jesse Ungard

Project Officer

Attn: Primary Care Dental Faculty Development Center Program (PCDFD)

Bureau of Health Workforce

Health Resources and Services Administration

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Financial and budget

Chase Young

Grants Management Specialist

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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 \[PDF\]](#)
- [HRSA Grants page](#)
- [HHS Tips for Preparing Grant Proposals](#)
- [Frequently Asked Questions](#)
- [Applicant Training](#)
- The [HRSA Manage Your Grant](#) webpage
- [Bureau of Health Workforce Glossary](#)

Endnotes

1. ADEA U.S. Dental School Faculty Open Positions Report, 2018-19 and 2022-23. <https://www.adea.org/home/publications/research-and-data/faculty/adea-us-dental-school-faculty-open-positions-report--2018-19-and-2022-23> ↑
2. ADEA Dental School Faculty Vacant Position, 2020-21 and 2021-22. <https://www.adea.org/home/publications/research-and-data/faculty/adea-dental-school-faculty-vacant-positions-2020-21-and-2021-22> ↑
3. ADEA Trends in Dental Education 2024-25. <https://www.adea.org/home/publications/Books-and-Guides/dental-education-trends> ↑
4. Ibid. ↑
5. Ungard JT, Beck E, Byington EA, Catalanotto FA, Chou C-F, Edelstein BL, Fenesy KE, Hicks JL, Holtzman JS, Jung P, Kritz-Silverstein D, Kovarik RE, Rogers S, Sabato EH, Outcomes from the Health Resources and Services Administration's Dental Faculty Development Program. J Dent Educ. June 2020 doi: 10.1002/jdd.12192 ↑