# 

# APPLICATION PACKAGE FOR

# MARYLAND SENIOR RIDES PROGRAM

# FUNDING FOR FISCAL YEAR 2021

**Issued January 2020**

In order to be considered for this funding cycle

your application must be submitted to MTA no later than

**April 10, 2020 by 3:00 pm**

**MARYLAND DEPARTMENT OF TRANSPORTATION**

### MARYLAND TRANSIT ADMINISTRATION

**Office of Local Transit Support**



**GENERAL INFORMATION**

# Introduction

During the 2004 session, the Maryland General Assembly enacted legislation that established a Senior Rides Demonstration Program (SRDP). Fiscal Year 2006 was the first year of the new program, and the Secretary of the Maryland Department of Transportation (MDOT) awarded grants to qualified applicants based on the program’s guidelines. The Maryland Transit Administration (MTA) administers the program for the Maryland Department of Transportation (MDOT).

During the 2007 Session of the Maryland General Assembly, legislation was introduced and passed into law that could result in significant adjustments to SRDP’s framework. Passage of House Bill 1189 (enacted as Chapter 268, *Acts 2007*), resulted in the word “Demonstration” being removed from the program’s official name. As of October 1, 2007, the official name of the program became Senior Rides Program.

The Senior Rides Program (SRP) is also funding projects this FY 2021. Grants are awarded to qualified applicants based on the guidelines that are outlined in this application package.

SRP Webinar

This year a webinar for the Senior Rides Program Grant Application process will be available February 4, 2020 from 10:00 am to 11:00 am. While this webinar is not mandatory for the grant funding, attendance is encouraged. For more information and registration visit (either click on the link or copy and paste into your web browser):

[https://attendee.gotowebinar.com/register/4343294534648178957](https://gcc01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fattendee.gotowebinar.com%2Fregister%2F4343294534648178957&data=02%7C01%7Cnhuggins%40mdot.maryland.gov%7C906902f5c1cb439cbe2308d7938534bc%7Cb38cd27c57ca4597be2822df43dd47f1%7C0%7C0%7C637140072632510725&sdata=ErmgHGxgtZ5kphVtXCX3Xj7OnZkpwvwoUMD%2BUY9IWm8%3D&reserved=0)

**Program Focus and Eligibility**

The primary focus of this program is to encourage and facilitate the development of volunteer and/or paid transportation services for low-income to moderate-income seniors.

The following organizations are eligible to apply for SRP funding:

* government agencies,
* non-profit entities, and
* faith-based agencies that provide transportation services and are exempt from taxation under § 501 (c)(3) of the internal revenue code.

In order to be eligible for a Senior Rides Program grant, an applicant must submit a proposal for a project that:

* provides door-to-door transportation for low-income to moderate-income seniors who have difficulty accessing or using other existing transportation services;
* “door-to-door transportation” means providing, through pre-arranged appointment, safe escort from a departure point, into and out of a transport vehicle and to the door of the destination;
* “low-income to moderate-income” means the household income of an individual does not exceed 400% of the poverty threshold that is established by the United States Department of Commerce, Bureau of Statistics for a given year;
* “senior” means an individual age 60 or older;
* uses primarily volunteer drivers who drive their own vehicles;
* uses a dispatching system to respond quickly to requests from low-income to moderate-income seniors for door-to-door transportation; and
* defines a geographic area for which door-to-door transportation is provided. Note that service may be provided to eligible seniors who do not reside in the geographic area as it is defined in the application, so long as service is not diminished to seniors who do reside in the target geographic area.

Eligible programs that are already being planned or are in a pilot phase are encouraged to apply for funding to enhance or expand upon the current program. SRP funds may not be used to supplant existing resources.

# Project Funding and Local Match Requirements

**It is anticipated that in FY 2021, the MDOT MTA grant awards will be made at last year’s funding level.** For each grant, the successful applicant is required to provide a minimum 25% local match. This means that at least 25% of the total Funds Requested for operating costs associated with providing door-to-door transportation services for low-income to moderate-income seniors must be funded through local sources. ***The local match must be cash sources. In-kind services may not be used for local match*.** For example, volunteer services are not an eligible match asset.

It is anticipated that this funding cycle will be very competitive, therefore the scoring criteria will be very important.

Program participants may charge reasonable fees or fares for providing door-to-door transportation. Revenue generated from user fees, fares, or donations may not be used as local match.

The passage of HB1189, during the 2007 Session of the Maryland General Assembly, removed all caps on the number of grants an applicant may receive in a single year, total number of grants an applicant receives from the program, dollar amount an applicant may receive, and dollar amount a geographic area may receive.

# Geographic Distribution of Awards

The MDOT MTA will award grants each year, based on funding availability, the number of eligible applications received, and the quality of the proposed projects. The grants will be distributed among five geographic areas, to the extent that qualified applications are received and to the extend practicable, grants will be distributed among rural, urban, and suburban areas:

* **The Baltimore Metro Area**
  + Baltimore County
  + the City of Baltimore
  + Harford County
  + Carroll County
  + Anne Arundel County
  + Howard County
  + Cecil County
* **The Washington D.C. Metropolitan Area**
  + Montgomery County
  + Prince George’s County
  + Frederick County
* **Western Maryland**
  + Garrett County
  + Allegany County
  + Washington County
* **Southern Maryland**
  + Calvert County
  + Charles County
  + St. Mary’s County
* **The Eastern Shore**
  + Kent County
  + Caroline County
  + Talbot County
  + Queen Anne’s County
  + Dorchester County
  + Somerset County
  + Wicomico County
  + Worchester County

# Application Evaluation Criteria

Eligible applications within each geographic area will be evaluated and scored for the following criteria:

1. ability to reach the targeted population of low-income to moderate-income seniors and provide door-to-door transportation (up to 25 points)
2. projected volume of ridership and basis for projection (up to 20 points)
3. marketing and outreach plan to attract riders and drivers (up to 10 points); *provide samples of marketing/outreach materials*
4. ability to sustain door-to-door transportation for low-income to moderate-income seniors should funding be reduced and/or beyond the time when grants may not be available (up to 25 points)
5. ability to coordinate its dispatcher system with a local central dispatch system and the extent to which the program applicant encourages (up to 20 points):

* shared riding;
* coordination between public and private sector transportation providers; and
* innovation in risk management for drivers and riders.

**Each SRP application will be scored up to a maximum of 100 points, based upon the score for each of the six criteria.**

A selection committee comprised of representatives of MDOT MTA, the Department of Aging, the Department of Disabilities, the State Coordinating Committee for Human Services Transportation (SCCHST), and MDOT MTA’s regional coordinating bodies will review and evaluate applications and make recommendations to the Secretary for grant funding.

# Risk Management

It is the responsibility of the local applicant to develop risk management policies and procedures that address the following areas:

* **criminal background and driving record checks of drivers** – *these are* *strongly recommended to protect your organization and your passengers;*
* **driver and vehicle safety** – *this could include operating policies that protect drivers from injury or other risk, minimum vehicle safety and maintenance standards, periodic vehicle safety inspections, and volunteer vehicle insurance;*
* **driver training** – *this could include safe driving techniques/defensive driving, passenger assistance/sensitivity, accident/incident procedures, CPR/first aid, and communications and recordkeeping procedures; and*
* **liability coverage of the program applicant that provides door-to-door transportation under the SRP** – *this should provide coverage beyond the personal vehicle insurance of your volunteers*.

While the State has not established any minimum requirements for these areas for this project, local program risk management policies and procedures will be taken into consideration when evaluating the application under criteria #1 and #6.

# Reporting Requirements

SRP recipients must submit quarterly reports as well as an annual report to the MDOT MTA. The quarterly reports must accompany quarterly requests for payment submitted to MDOT MTA.

MDOT MTA will use the quarterly reports to evaluate how efficiently and effectively the local recipients are using SRP funding. SRP reports must include the following information:

* the total number of one-way passenger trips, service miles, and hours of service provided during the reporting period;
* the number of riders and drivers participating in the program;
* the program operating costs for the reporting period;
* the amount and source of matching funds used for the Senior Rides grant;
* the nature of cooperative efforts between the program participant and other government and private-sector entities;
* innovations in risk management for drivers and riders;
* information on rider fees, if applicable, including the fee schedule, the methodology used in establishing the fee schedule, and total amount of fees collected; and
* the amount and source of any additional revenue generated by the program in connection with the program.

**The required Operations Reporting Form is attached.**

**APPLICATION INSTRUCTIONS**

# Part I

# Contains information that will be circulated to the selection committee for their review, evaluation, scoring, and selection. This package includes forms and questions, which must be completed in its entirety in order for your application to be considered. Part I must follow the format as structured in this package so that the selection committee can fairly evaluate your application.

**For those agencies on ProjectWise, submit your grant in the appropriate folder but remember to contact the program manager.For those agencies NOT on ProjectWise and to ensure submission, contact and then email your grant application to the program manager (information below).**

**Part II**

Contains assurances that must be met in order for your organization’s application to be considered by the selection committee. ***This form must be completed and signed exactly as printed in this package; alterations to the text of the assurances will invalidate your application.*** Also, attach a copy of the agency’s § 501(c) certification if it is not a public entity.

**For those agencies on ProjectWise, submit your grant in the appropriate folder but remember to contact the program manager.For those agencies NOT on ProjectWise and to ensure submission, contact and then email your grant application to the program manager (information below).**

**The deadline for submitting applications for the FY 2021 SRP funding cycle is:**

April 10, 2020 by 3:00 p.m.

Submit your application with the above-specified copies to:

##### Ms. Nancy Huggins

**Program Manager, Human Services**

**Maryland Transit Administration**

**Office of Local Transit Support**

**6 St. Paul Street, 8th Floor**

**Baltimore, MD 21202**

[**nhuggins@mdot.maryland.gov**](mailto:nhuggins@mdot.maryland.gov)

**PART I:**

**APPLICATION FORMS AND QUESTIONS**

**Checklist:**

|  |  |  |
| --- | --- | --- |
| 1 |  | Application Summary Page |
| 2 |  | Proposed FY2021 Funding Request |
| 3 |  | Relevant organizational experience |
| 4 |  | Planning and implementation efforts for this project to date |
| 5 |  | How funds awarded through this program would be used |
| 6 |  | Operating policies and characteristics of the proposed demonstration project |
| 7 |  | Organizational staffing and management for the proposed project |
| 8 |  | Risk management and safety |
| 9 |  | Projected ridership |
| 10 |  | Marketing and outreach |
| 11 |  | Program sustainability |
| 12 |  | Coordination |
| 13 |  | Implementation plan |
| 14 |  | FY 2021 Project Budget |
| 15 |  | Assurances |
| 16 |  | § 501 (c) certification, if applicable |

**Maryland Senior Rides Program**

**1. Application Summary Page for Fiscal Year 2021**

***This must be the first page of the application***

Legal Name of Applicant Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

Federal Identification Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Executive Director: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Director/Contact:­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Proposed Project Summary:**

Local Project Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***(This is the name that will be used to promote the service.)***

Counties Served: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Brief Project Description: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**2. Proposed FY 2021 Funding Request:**

1. Total Project Expenses $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Total Operating Revenue $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Fares, Fees, User Donations)*

1. Net Project Cost (A minus B) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Total Funds Requested $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. State Funds Requested $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(75% of Total Funds requested)

1. Local Matching Funds $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(25% of Total funds requested)

1. Local Overmatch Funds (C minus D) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Source of local funds: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Proposed FY 2021 Funding Request (EXAMPLE):**

1. Total Project Expenses $\_150,000\_\_\_\_\_\_\_\_\_\_ \_
2. Operating Revenue $\_ 10,000\_\_\_\_\_\_\_\_\_\_\_\_

*(Fares, Fees, User Donations)*

1. Net Project Cost (A minus B) $\_140,000\_\_\_\_\_\_\_\_\_\_\_\_
2. Total Funds Requested $ 20,000
3. State Funds Requested $\_ 15,000\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(75% of Total Funds requested)

1. Local Matching Funds $\_ 5,000 \_\_\_\_\_\_\_\_\_\_\_\_\_

(25% of Total funds requested)

1. Local Overmatch Funds (C minus D) $\_120,000\_\_\_\_\_\_\_\_\_\_\_\_\_

Source of local funds: Other Grants – (Donations, General Funds, etc.)

\_\_\_\_\_\_\_\_

**3. Proposed Program**

1. **Describe your relevant organizational experience, including:**

* Providing door-to-door transportation
* Working with senior and individuals with a disability
* Working with volunteers

1. **Describe planning and implementation efforts for this project to date. If this project is currently funded by the SRP, describe your accomplishments and/or barriers from previous year’s funding that was received:**
2. Indicate how funds awarded through this program would be used (for example, to operate new or expanded services, etc.)
3. **Describe operating policies and characteristics of the proposed project, including:**

* Target population of low-income to moderate-income seniors *(explain how you reached this number; what is the percentage of the population you will serve)*
* Geographic area of service *(map of service area is encouraged as well)*
* User eligibility screening guidelines
* Scheduling and dispatching methodology
* Service delivery methodology
* User fee structure (if any)
* Data collection/recordkeeping

1. **Describe the organizational staffing and management for the proposed project, including:**

* Lead agency
* How this project fits into larger agency
* Partnering agencies
* Contractors
* Project Manager
* Administrative and other staff
* Volunteer and/or paid driver
* Driver qualifications
* Driver reimbursement

1. **What is the current (if any) and projected ridership to be provided to the target population by the project?**

* Current (per month)
* Projected for 2021 (per month goal by the end of FY 2021)
* What is the basis for the projection?

1. **What marketing and outreach methods and strategies will be used to build and promote the proposed project?** *(Provide samples of marketing/outreach materials.)*

* Recruiting drivers/volunteers
* Marketing/outreach for riders

1. **Provide a brief implementation plan for the project, including major tasks and milestones with target dates for achievement.**
2. **How will the project be sustained should funding be reduced and/or beyond the time when grants may not be available?**

* Provide a plan should funding be reduced and/or withdrawn.
* Indicate possible future funding sources.
* How will you monitor and evaluate the program?

1. **How will the project be coordinated with other organizations and services in your community? Among passengers?**

* How will dispatching be coordinated?
* How will the service be coordinated between public and private sector transportation providers?
* Will passenger trips be shared with others? How will this be arranged?

1. **Describe how your organization will manage risk and provide for safe delivery of services, including:**

* Driver training and safety
* Vehicles used (including organizational fleet, if any)
* Vehicle safety
* Liability coverage

**4. FY 2021 Project Budget**

### PROJECT EXPENSES - FY 2021

**OPERATING EXPENSES**

|  |  |
| --- | --- |
| Dispatcher Salaries |  |
| Fringe Benefits |  |
| Fuel and Oil |  |
| Mileage Reimbursement |  |
| Vehicle Insurance |  |
| Vehicle Depreciation[[1]](#footnote-1) |  |
| Vehicle Lease |  |
| Vehicle Storage |  |
| Operation Training |  |
| Other |  |
| **Operations Subtotal** |  |

**MAINTENANCE EXPENSES**

|  |  |
| --- | --- |
| Mechanic Salaries |  |
| Fringe Benefits |  |
| Maintenance Contracts |  |
| Materials and Supplies (parts) |  |
| Maintenance Facility Rental |  |
| Equipment Rental |  |
| Utilities |  |
| Vehicle Storage |  |
| Maintenance Training |  |
| Other |  |
| **Maintenance Subtotal** |  |

**ADMINISTRATIVE EXPENSES**

|  |  |
| --- | --- |
| Administrator Salary |  |
| Manager Salary |  |
| Support Staff Salary |  |
| Fringe Benefits |  |
| Materials and Supplies |  |
| Telephone |  |
| Office Rental |  |
| Utilities |  |
| Advertising |  |
| Printing |  |
| Administration Training |  |
| Other |  |
| **Administration Subtotal** |  |

|  |  |
| --- | --- |
| **TOTAL Project EXPENSES** |  |

## OPERATING REVENUE

|  |  |
| --- | --- |
| Passenger Fares |  |
| Passenger Donations |  |
| Other |  |
| **Operating Revenue Subtotal** |  |

|  |  |
| --- | --- |
| **NET PROJECT COST\*** |  |

*\*(Total Project Expenses minus Operating Revenue)*

|  |  |
| --- | --- |
| **TOTAL Funds Requested** |  |

|  |  |
| --- | --- |
| **STATE Funds Requested\*\*** |  |

*\*\*(75% of Total Funds Requested)*

#### LOCAL/LOCAL OVERMATCH FUNDING

|  |  |
| --- | --- |
| Donations |  |
| Agency General Funds |  |
| Other (specify) |  |

|  |  |
| --- | --- |
| **TOTAL Local Funds\*\*\*** |  |
| **TOTAL Local Overmatch Funds\*\*\*** |  |

*\*\*\*(Must be 25% of Total Funds Requested)*

1. **APPLICATION CERTIFICATION**

**I certify to the best of my ability and knowledge that this information is true and accurate.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Authorized Official**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name (printed)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Title**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Organization**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date**

**PART II:**

**CERTIFICATIONS AND ASSURANCES**

SENIOR RIDES PROGRAM

# I. PROGRAM ASSURANCES

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Applicant) makes the following assurances to the Maryland Transit Administration of the Maryland Department of Transportation in conjunction with its application for state financial assistance for the Senior Rides Program (SRP).

1. The applicant has the requisite fiscal, managerial, and legal capability to carry out the SRP and to receive and disburse state funds.
2. Some combination of local or private funding sources has or will be committed to provide the required local share.
3. The applicant has and will comply with the administrative requirements that relate to the applications made to and grants received from the Maryland Department of Transportation for the SRP.

# II. EQUAL RIGHTS ASSURANCE

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** (Applicant) hereby makes the following assurance to the Maryland Transit Administration of the Maryland Department of Transportation in conjunction with its application for financial assistance for the SRP.

1. No person, on the basis of race, color, national origin, sex or handicap shall be excluded from the participation in, or denied the benefits of, or be subject to discrimination under said project, program, or activity.
2. The applicant shall not discriminate against any employee or applicant for employment because of race, color, sex, national origin, and shall take affirmative action to ensure that applicants are employed, and that employees are treated during employment, without regard to their race, color, religion, sex or national origin.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Authorized Official**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Name (printed)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Title**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date

11/09

# Maryland Senior Rides Program

# FY 2021

# Application Schedule

**January 10, 2020:** Beginning of Application Period

**April 10, 2020:** Applications due to MTA

**June 2020:**  Notification of awards

**July 1, 2020 -** **June 30, 2021:** Funding year

# Additional Information

If you need clarification on anything in this application, please contact:

##### Ms. Nancy Huggins

**Program Manager, Human Services**

**Maryland Transit Administration**

**Office of Local Transit Support**

**6 St. Paul Street, 8th Floor**

**Baltimore, MD 21202**

[**nhuggins@mdot.maryland.gov**](mailto:nhuggins@mdot.maryland.gov)

# MARYLAND SENIOR RIDES PROGRAM

## OPERATIONS REPORTING FORM

## Agencies awarded grants through the Maryland Senior Rides Program must complete this reporting form at the end of each quarter and at the end of each Fiscal Year, providing statistical and narrative information. Specified statistical data are required each quarter, as instructed below. Certain narrative information is required only at the end of the Fiscal Year, as instructed below. End-of-year narrative information must be provided in print and electronically, using Microsoft Word.

## *Note: Quarterly Requests for Payment will be processed only if accompanied by a completed Operations Reporting Form.*

## 

**FISCAL YEAR FY2021**

**ORGANIZATION\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

REPORTING PERIOD (check appropriate box):

1ST Quarter 2nd Quarter 3rd Quarter 4th Quarter Complete Fiscal Year

(Jul-Sep) (Oct-Dec) (Jan-Mar) (Apr-June) (Jul-June)

1. Total number of seniors, measured as separate, unduplicated individuals, who were provided transportation during the time period: \_\_\_\_\_\_\_\_\_\_

(Example: The same 15 individual seniors received transportation in July, August, and September. In addition, 5 other individual seniors were served in July; no other new individuals were served in August; and 5 other individual seniors (not the same people as the ones in July) were served in September. The total number of individuals served is 25 (15 in each of the three months, + 5 others in July only, + 5 others in September only.)

NOTE: The end of the year total is not the sum of all four quarters but is the total number of individual seniors provided transportation.

1. Total number of drivers, measured as unduplicated individuals, who participated in the time period: \_\_\_\_\_\_Volunteer drivers \_\_\_\_\_\_\_Paid drivers \_\_\_\_\_\_Total of volunteer and paid drivers
2. Total number of one-way rides provided during the time period: \_\_\_\_\_\_\_\_\_\_\_
3. Total number of senior-ride miles provided during the time period: \_\_\_\_\_\_\_\_\_\_\_

(Senior-ride miles are defined as all miles accumulated on the driver’s vehicle that are associated with providing a trip to a senior through your Senior Rides program, e.g., if volunteer driver leaves from his home, drives to the senior’s home, transports the senior to a destination and back, then travels back to his home, all the accumulated miles from the driver’s home and to the points in-between and then back home are counted as senior-ride miles.)

1. Total number of senior-ride hours provided during the time period: \_\_\_\_\_\_\_\_\_\_\_

(Senior-ride hours include all the elapsed time that correspond to senior-ride miles, defined above, plus any additional time that is needed to serve the senior’s trip; e.g., if the volunteer driver waits with the senior at the senior’s destination, that time is also included as part of senior-ride hours.)

1. If the seniors are charged a fee for transportation, describe the fee schedule and methodology for establishing the fee schedule. If there is no fee for transportation, please indicate.

(Report on separate page and only at end of Fiscal Year.)

1. Describe the nature of cooperative efforts between your agency/your Senior Ridesprogram and other government and private-sector entities. ***(Report on separate page and only at end of Fiscal Year.)***
2. Describe your agency’s approach to risk management and any innovations in risk management.

***(Report on separate page and only at end of Fiscal Year.)***

1. Depreciation is not an eligible expense for vehicles/equipment purchased with State funds. [↑](#footnote-ref-1)