

About this Planning Guide

This planning guide has been made available as a courtesy tool to help prospective Buckle Up for Life partners better understand the *Common Partnership Application*—by offering advanced visibility on questions that will be asked. Since actual applications are web-based and must be submitted in a single sitting (without the ability to save work along the way), applicants may find it beneficial to use this guide to prepare their responses prior to formal submission.

Use of this planning guide, however, is completely optional.

This planning guide is NOT an actual application of any kind, and it should not be submitted to Buckle Up for Life. Any planning guides that are submitted to Buckle Up for Life will be discarded.

About the *Common Partnership Application*

Prospective Buckle Up for Life partners who are interested in applying for either the *Community Grant* or *Gift of Safety* partnership (or both) must do so using the consolidated and streamlined *Common Partnership Application* that will be linked on the [Become a Partner](#) page of Buckle Up for Life's website, during the application period, as noted therein.

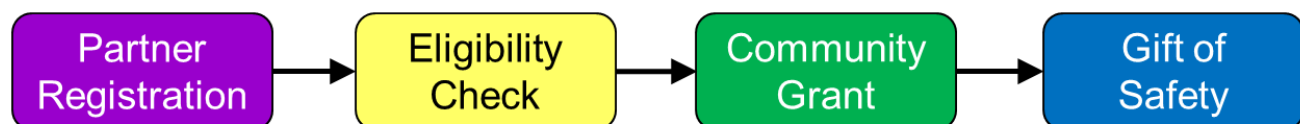
This is a new process for the 2024-2025 program year.

The web-based *Common Partnership Application* utilizes branch logic questioning to route applicants to the sections required for each partnership for which they are interested and eligible to apply. Because of this branch logic structure, applicants may see some sections and/or questions listed on this static planning guide that do not ultimately appear on their formal, dynamic application.

All applicants will be assessed and considered for each opportunity for which they apply.

The *Common Partnership Application* is comprised of four main sections, outlined below.

Common Partnership Application Sections:



In the pages that follow, applicants can view a description of each section (color-coded to match the diagram above), and the questions associated with each.

PARTNER REGISTRATION

Required:
ALL APPLICANTS!

Section Description:

- ✓ Registration as a BUFL partner is **required** for each organization prior to applying for *Community Grant* and/or *Gift of Safety* partnerships. **This is a new process for the 2024-2025 program year.**
- ✓ Partner registration provides Buckle Up for Life with each agency's contact information, as well as background on their community, their organization, and their child passenger safety program.
- ✓ All registered Buckle Up for Life partners (even those that aren't subsequently awarded a *Community Grant* or *Gift of Safety* partnership) will automatically receive limited, free benefits (the same benefits historically assigned to *Education Partners*), as outlined on Buckle Up for Life's [Become a Partner](#) page. Taking advantage of these benefits is completely optional.
- ✓ This is a non-competitive registration, not an application.
- ✓ Registration is free.

Section Questions: (*denotes response required)

Partner Institution	
Applying Institution*:	
Tax Status*:	<input type="checkbox"/> 501(c)(3) <input type="checkbox"/> 509(a) <input type="checkbox"/> Public Service Agency <input type="checkbox"/> Federally Recognized Tribal Nation <input type="checkbox"/> Private/For-Profit Business <input type="checkbox"/> Other/None of These (Please Explain)
EIN/TIN*:	
Org Website*:	
Facebook:	
Instagram:	
You Tube:	

Contact Info		
	Person Submitting Registration*	Primary Person Responsible for Daily Program Implementation
Name*		
Title*		
Email Address*		
Mailing Address*		
City*		
State*		
Zip*		
Phone*		

Community Background

Provide a brief description of the community(ies) or population(s) you serve. *

(Please answer in 200 words or less)

Organizational Background

Provide a brief overview of your organization (mission, vision, primary services offered, etc.). *

(Please answer in 200 words or less)

Program Background

Describe your current child passenger safety initiatives. *For example, how is your program structured? Who do you serve, and how and where do you serve them? How frequently? Include any program strengths as well as challenges. Include any details that make your program unique.**

(Please answer in 200 words or less)

How many total people combined (adults, children, and/or teens) did your program educate on child passenger safety in the last 12 months? *Only include meaningful interactions like classroom instruction, demonstrations, or carside assistance. Do not include activities like handing out fliers at a health fair. Do not include social media likes or website clicks, etc.**

How many total car seats did your program check in the last 12 months? *Include both seats already owned by families, as well as new seats that your program may have provided for free with installation assistance.**

How many total, new, free car seats did your program provide to families in the last 12 months? *Do not include seats that you sold or provided in exchange for donations. Do not include seats that you checked that families already owned, or any second-hand seats.**

Does your program partner with any local Toyota dealerships?*

Yes No

If Yes, above, provide name(s) of Toyota dealership(s):

Program Capacity

List the individuals from your organization (including those already identified in previous sections) who will be directly implementing Buckle Up for Life programs, if/as offered/awarded. For each, indicate their role on your team as well as relevant certifications/trainings, and any non-English language fluency.*

Team Member Name	Team Member Role			Certs/Trainings					CPST Expire Date (If Applies)	If Expires Prior to 7/31/25, Plan to Recert? (If Applies)	Language Fluency (Other than English)		
	Check All That Apply:			Check All That Apply:							Please List:		
	Staff	Vol	Other	CPST	CPST-I	STAC	SCHL BUS	None of These			Spoken	Written/Read	
1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

ELIGIBILITY CHECK

Required:
ALL APPLICANTS!

Section Description:

- ✓ Questions in this section assess an applicant's eligibility to apply for at least one (but not necessarily both) of the following programs: *Community Grant* or *Gift of Safety* partnership—thereby allowing them to proceed to the next section(s).
- ✓ Applicants that do not qualify for either competitive partnership listed above will be directed to the end of the *Common Partnership Application*. However, as registered Buckle Up for Life partners, they will still receive the limited benefits referenced in the purple section, above.

Section Questions: (*denotes response required)

- Do you have at least one certified child passenger safety technician (CPST) on staff, who will remain certified, in good standing through at least July 31, 2025?*
- Yes No
- Is your organization one of the following: 1) a qualified tax-exempt nonprofit organization, as determined under section 501(c)(3) or 509(a) of the Internal Revenue Code or applicant's country equivalent for North American applicants located outside of the United States; 2) a public service agency (e.g., fire/police departments, local health departments, public schools, etc.); or 3) a federally recognized tribal nation?*
- Yes No
- Does your organization operate in North America?*
- Yes No
- Are you requesting resources to serve families in your community? (Note: hospital-based programs will not receive funding for in-house patient programs). "In-house" refers to a program that is limited to a hospital's own patients.*
- Yes No

COMMUNITY GRANT

Optional:
INTERESTED & ELIGIBLE
APPLICANTS ONLY!

Section Description:

- ✓ Questions in this section assess an applicant's interest in and eligibility to apply for *Community Grant* funding.
- ✓ Applicants who are both interested and eligible can elaborate on their plan for implementing the *Community Grant* partnership. This includes an upload of their proposed budget, using only the approved template provided by Buckle Up for Life.

Section Interest and Eligibility Questions: (*denotes response required)

- Would you like to apply for the Community Grant (\$20,000)? To read more about the Community Grant Partnership and Associated Benefits, Visit <https://www.buckleupforlife.org/our-partners/become-a-partner/>. *
 Yes No
- If you are a current Community Grant partner, did you also receive a Community Grant last year? If you are not a current Community Grant partner, select No. *
 Yes No
- Are you applying on behalf of a coalition? *Buckle Up for Life does not offer the Community Grant Partnership to third party coalitions. Organizations who house coalition community chapters should apply on their own behalf or apply for a Gift of Safety Partnership.* *
 Yes No
- Does your institution have its own capacity (time, staffing, certifications, etc.) to distribute at least 150 car seats (for free) with installation assistance, and to educate at least 225 people on child passenger safety--and to report on that work--between August 1, 2024 and July 31, 2025? Education includes only meaningful interactions like classroom instruction, demonstrations, or carside assistance; metrics like number of fliers distributed at a health fair, or social media likes or website clicks do not count. Additionally, work should not be outsourced to another agency. *
 Yes No

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Section Questions: (*denotes response required)

<p>Why are you most interested in implementing the <i>Community Grant</i>?*</p>	<p>Select only ONE:</p> <ul style="list-style-type: none"><input type="checkbox"/> To launch or establish a new CPS program<input type="checkbox"/> To sustain your current level of CPS outreach<input type="checkbox"/> To expand on your level of CPS outreach
<p>If awarded, how would Buckle Up for Life funding help support your selection in the previous question?*</p> <p><i>(Please answer in 200 words or less)</i></p>	
<p>How will you raise awareness about the services offered by Buckle Up for Life in order to recruit participants in your community?*</p> <p><i>(Please answer in 200 words or less)</i></p>	

Describe your workplan for serving participants in your community. *For example, how will you structure your BUFL program? Who will you serve, and how and where will you serve them? How frequently? Include any program goals or relevant milestones.**

(Please answer in 200 words or less)

Do you plan to purchase at least 150 car seats (the minimum number needed to meet the car seat distribution deliverable), using only Buckle Up for Life funds (per your submitted grant application budget)?*

(Please answer in 200 words or less)

Yes No

If No, above, please explain any alternate funding source(s) you will use to help meet your minimum car seat distribution goal:

Are you currently receiving funds from any motor vehicle manufacturer (do not include Buckle Up for Life grant funding)?*

(Please answer in 200 words or less)

Yes No

If Yes, above, please explain:

Budget

Please upload your budget using the approved template, and follow directions exactly as outlined.*

The approved budget template is available for download from the [Become a Partner](#) page of Buckle Up for Life's website.

Please see budget instructions, on the following two pages.

The image shows a sample of the 'Proposed Budget' form for Toyota's Buckle Up for Life program. The form is titled 'Proposed Budget' and includes the Toyota logo. It contains several sections for budgeting, including 'SALARY/WAGES/EQUIPMENT', 'PROGRAM SUPERVISOR/EQUIPMENT', 'SALARIES', 'ADMINISTRATIVE/PROMOOTIONAL', and 'ADMINISTRATIVE/PROMOOTIONAL'. The form also features a 'TOTAL REQUESTED FUNDS' section and a 'BUDGET READY TO SUBMIT?' checkbox.

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Budget Instructions

Please use the provided, blank *Excel* template to prepare your proposed budget, according to the instructions below. Once complete, upload your budget with your grant application.

a. Disqualification

- Failure to follow ALL budget instructions will result in automatic disqualification of your entire application.

b. Submission

- Budget should be submitted only in *Excel* format. Budgets submitted as PDF, MS Word documents, or any other format will be rejected causing your entire application to be disqualified.
- Budget must be submitted/uploaded at the same time and in the same manner as your full grant application.
- Do not submit your budget if any of the validation fields display the message “DO NOT SUBMIT.” In this case, please review these instructions fully, to identify and correct the potential error(s).

c. Format

- Budget only in whole dollars, rounding to the nearest dollar. *For example, an item with unit cost of \$67.89 should be reflected as \$68. An item with unit cost of \$41.23 should be reflected as \$41.*
- Overall budget should reflect the exact amount of funding requested (\$20,000). *For example, the following overall budget amount examples would not be acceptable: \$20,037, \$19,984, etc.*

d. Allocation of Program Expenses

- Allocate expected expenses, by providing cost per unit and number of units requested for each line item. For some items, a quantity of 1 (one) unit may be appropriate.
- Organize line item expenses under the section headings provided in the budget template, and as explained below:

BUDGET SECTION	INCLUDES (<i>but not limited to</i>)	NOTES
SALARY/ BENEFITS SUPPORT	<ul style="list-style-type: none"> • Salary • Fringe • Contracted labor (E.g., interpreters, instructors, etc.) • Gift cards and/or other forms of stipend payment/recognition provided to staff or volunteers 	<ul style="list-style-type: none"> • Entire section is limited to \$5000 (25% of total grant). • Salary is not a required expense.
PROGRAM SUPPLIES/ EQUIPMENT	<ul style="list-style-type: none"> • Car seats • Check supplies (E.g., pool noodles, towels, clipboards, etc.) 	<ul style="list-style-type: none"> • Choose car seat vendor(s) and type(s), make(s), and model(s) that best meet the needs of the families you serve. Keeping affordability in mind, however, consider taking advantage of institutional pricing and/or volume discounts (whenever available); and consider versatile convertible seats with low weight minimums—as a lower-cost alternative for infants—rather than pricier infant-only carrier-style seats. • If budgeting for fewer car seats than grant deliverable, be sure to explain alternate funding in grant application.
MARKETING/ PROMOTIONS	<ul style="list-style-type: none"> • Branded promo items (E.g. lanyards, bags, keychains, etc.) 	<ul style="list-style-type: none"> • All BUFL logo placements must be approved by BUFL prior to production. • Prior to budgeting for branded items, review list, below, of in-kind items that BUFL provides grantees for free.
ADMIN/OTHER	<ul style="list-style-type: none"> • Printing • Postage • Mileage (current government rate) • Volunteer/event refreshments • Gift cards and/or other forms of incentive provided to families/participants • CPST certification fees • Conference fees • Travel/lodging 	<ul style="list-style-type: none"> • Entire section is limited to \$5000 (25% of total grant).

e. Branded Program Materials, Provided In-Kind

- In addition to direct funding, a selection of branded materials (examples shown below) will be provided to *Community Grant* partners at the beginning of the program year. Please take this into consideration when preparing your budget.
 - Tablecloths
 - Banners/posters
 - High visibility vests
 - Jackets and shirts
 - Giveaways (stickers, keychains, etc.)
 - Printed educational materials

f. Prohibited Expenses (Unless Otherwise Pre-Approved)

- Indirect costs, or non-salary overhead (E.g., utilities, office rent, taxes, liability insurance, etc.)
- Alcoholic beverages
- Paid advertising
- Procurement or maintenance of vehicles
- Gas (alternatively, reimbursement of mileage at current government rate is acceptable)

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Optional:
**INTERESTED & ELIGIBLE
APPLICANTS ONLY!**

Section Description:

- ✓ Questions in this section assess an applicant’s interest in and eligibility to apply for the *Gift of Safety* partnership.
- ✓ Applicants who are both interested and eligible can elaborate on their plan for implementing the *Gift of Safety* partnership.

Section Interest and Eligibility Questions: (*denotes response required)

- Would you like to apply for the *Gift of Safety Partnership* (50 Free Car Seats; No Funding)? To read more about the *Gift of Safety Partnership* and associated benefits, visit <https://www.buckleupforlife.org/our-partners/become-a-partner/>. *
 Yes No
- Does your institution have its own capacity (time, staffing, certifications, etc.) to distribute at least 50 convertible car seats (for free), with proper education and installation assistance to families in need--and to report on that work--between August 1, 2024 and July 31, 2025? Work should not be outsourced to another agency. *
 Yes No

Section Questions: (*denotes response required)

Why are you most interested in implementing <i>Gift of Safety</i> in your community? *	Select only ONE: <input type="checkbox"/> To launch or establish a new CPS program <input type="checkbox"/> To sustain your current level of CPS outreach <input type="checkbox"/> To expand on your level of CPS outreach
Describe your workplan for distributing seats, and explain how it supports the answer you selected in the previous question. * (Please answer in 200 words or less)	