



NEW MEXICO  
**Developmental Disabilities  
Planning Council**

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*Susana Martinez*  
Governor

*Denise Weaver*  
Chairperson

*Cristine Marchand*  
Executive Director

## In-State Agency Conference Stipends

The New Mexico Developmental Disabilities Planning Council announces the availability of funds for eligible organizations to establish stipends *for individuals with developmental disabilities and family members* to attend in-state conferences sponsored by the agency receiving funding. The purpose of the stipends is to assist attendees with costs associated with the cost of registration and/or travel to the conference. NMDDPC is currently accepting applications from eligible agencies to receive funds for this purpose.

### **Available Funding**

Individual awards to recipient agencies are up to \$2,500 per conference/training. Reimbursement will be contingent on completion of pre-negotiated milestones based on the grantee's project goals and objectives.

### **Match**

**Recipients are expected to provide a 25% match of cash or in-kind services to the total stipend allocation. In the case of projects whose activities target individuals with developmental disabilities who live in urban or rural poverty areas, the match may be reduced.**

### **Application**

To be considered for funding, the content of the conference/symposia must emphasize one or more of the following Federal areas of emphasis: **Employment, Housing, Transportation, Health, Recreation, Formal/Informal Community Supports, Education, Child Care, Quality Assurance and/or Cross Cutting**. A participant satisfaction survey is required as part of the application and will be provided once if the stipend application is approved.

In order to be considered for funding, please complete all areas of the application. Attach additional documentation if necessary. Return the completed application, with all attachments, to NMDDPC. Applications may be mailed, faxed, emailed, or dropped off in person. Mailing and physical address: NMDDPC **Attn: Rosemarie Ortiz** 810 W. San Mateo Street, Suite C, Santa Fe, NM 87505. Phone: (505) 476-7325 Email address: [rosemarie.ortiz@state.nm.us](mailto:rosemarie.ortiz@state.nm.us)

**Application form must be turned into NMDDPC at least 6 weeks prior to the start date of the conference.**

### **Final Report**

Recipients of contracts will be required to submit to NMDDPC a comprehensive final report within 30 days after the conference that includes the following information:

1. Overall summary of the conference and workshop themes.
2. A description of the federal areas of emphasis addressed and the workshops/theme that addressed each area.
3. Descriptions of sessions/workshops that provided technical assistance and training regarding disability issues and the audience(s) of these workshops.
4. A summary of the results of the participant satisfaction survey in addition to copies of the surveys.
5. Breakout of attendees by the following categories: 1) Person with a developmental disability; 2) family member or guardian of a person with a developmental disability, and 3) others (professionals, etc.)
6. Include an Executive Summary in addition to the full report.
7. Provide an electronic copy of the full report and Executive Summary.
8. Complete the NMDDPC Project Data Performance Report
9. The recipients of the funding must be available to make a presentation to the Council about the conference and outcomes (if requested).

# Stipend Application

## SECTION 1 (ALL FIELDS MUST BE COMPLETED)

Name of Agency/Organization Applying for Stipend Funding		
Contact person for Conference		
Description of Agency		
Address		
Phone	Fax	Email

## SECTION 2 (ALL FIELDS MUST BE COMPLETED)

Title of Conference/Symposia	
M/D/YYYY	M/D/YYYY
Date Conference Begins	Date Conference Ends

## SECTION 3 (CHECK ALL THAT APPLY WITH A MINIMUM OF ONE.)

**1 pt.**

Area of emphasis to be addressed by conference/symposia (check all that apply)	
<input type="checkbox"/> Employment <input type="checkbox"/> Education & Early Intervention <input type="checkbox"/> Health <input type="checkbox"/> Housing <input type="checkbox"/> Childcare	<input type="checkbox"/> Recreation <input type="checkbox"/> Transportation <input type="checkbox"/> Quality Assurance <input type="checkbox"/> Informal/Formal Community Supports <input type="checkbox"/> Other _____

## SECTION 4

**21 pts.**

1. What is the purpose of the conference/symposia?
2. Describe the overall goal and content of the conference.
3. Describe the workshops/themes to be included in the conference that relate to the areas of emphasis checked above.
4. Describe the composition of the target audience (person with DD, families, Providers, professionals, etc.)
5. Describe how recipients of the stipends will be selected.
6. What experience has the applicant had in conference planning?

