

# FY2026 Clinical Educator Grant Program Application

**Instructions.**

* Use our helpful instructions and samples to fill out this application.
* Email your completed application to VISN16SCMIRECCEducation@va.gov by 4:30 pm CT on February 24, 2025.
* Copy your Mental Health or Service Line Chief for concurrence on the email. If you work at a CBOC, also include your clinic Director. If your Service Chief or Director is not included on the email, we cannot accept your application.
* Attach supporting documents to your email.
* **Questions?** Contact Dr. Ali Abbas Asghar-Ali at Ali.Asghar-Ali@va.gov or Dr. Jennifer Bryan at Jennifer.Bryan1@va.gov.
1. **Submission date:**

1. **Principal applicant name:**

1. **Principal applicant’s contact information:**
	1. VA Facility Name:
	2. Address:
	3. Mail Code / Suite#:
	4. City:
	5. State:
	6. Zip:
	7. Phone:
	8. Email:
2. **Principal applicant’s Care/Service Line Chief (and Clinic Director if appropriate):**

1. **Co-applicants’ contact information:**
	1. Co-applicants’ Names:
	2. VA Facility Name:
	3. Address:
	4. Mail Code / Suite#:
	5. City:
	6. State:
	7. Zip:
	8. Phone:
	9. Email:
2. **Title of the product:**

1. **Target Audience (check all that apply; the product is intended for broad use across VA. Clinicians and/or Veterans across the country would be expected to be able to use the product):**
	1. Veterans [ ]
	2. Family/Caregivers [ ]
	3. Mental Health Clinicians [ ]
	4. Primary Care Clinicians [ ]
	5. Public [ ]
2. **Other: List 1 to 3 objectives your project aims to achieve.**
	1. Objective 1:

* 1. Objective 2:

* 1. Objective 3:

1. **What clinical issue does your product address?**

1. **How will your product improve this issue?**

1. **Description of the product (maximum 500 words; in the description, please include the specific format of the product(s), e.g., tri-fold brochure, 20-slide presentation, etc.”):**

1. **Are there existing resources available to address this issue? If so, explain how your product is different (they are outdated, not user-friendly, or don’t apply to Veterans). At a minimum, search online for examples to ensure that your proposed product is not available.**

1. **How does your product specifically improve mental health care for rural and other underserved Veterans?**

1. **How will you evaluate the final product? (Check all that apply):**
	1. Pretest [ ]
	2. Posttest [ ]
	3. Follow-up Survey [ ]
	4. Individual Interviews [ ]
	5. Focus Group Interviews [ ]
	6. Other: [ ]
2. **Please describe the evaluation process:**

1. **Estimated timeline of project:**

1. **How do you anticipate national dissemination of the product:**

1. **How do you intend for the target audience to learn about your product?**

1. **What are relevant distributions lists and professional organizations to which announcements about your product should be shared?**

1. **How can we reach both VA and non-VA audience members?**

1. **What newsletters, bulletins, etc. are appropriate for announcements about your product?**

1. **Budget Table (list additional items on page 6 if needed):**

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| Item  | Purpose | Quantity | Cost per item | Total Cost |
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|  |  |  | **Grand Total:** |  |

1. **Enter additional text and references:**

1. **Enter additional budget information:**