# ­FY2026-2027 NCTCOG Solid Waste Grant Application

**PUBLIC SCHOOL OR SCHOOL DISTRICT (EXCLUDING UNIVERSITIES AND OTHER POST-SECONDARY INSTITUTIONS)**

*Please complete this document in its entirety to be considered for solid waste grant funding from the North Central Texas Council of Governments. Do not remove any section titles or existing text. Applications are due through the online portal at* [*https://solidwastegrants.nctcog.org/*](https://solidwastegrants.nctcog.org/) *by 5:00 PM (CST) on May 21, 2025. Additional details on how to complete the application, the grant requirements, and other information are available in the* [*Grant Application Guidelines.*](https://www.nctcog.org/getmedia/5468a837-a96e-454c-9272-065419268869/Solid-Waste-Grant-Application-Guidelines_2-21-23.pdf)

|  |  |
| --- | --- |
| Submitting Entity Name: |  |
| Department/Division: | Public school or school district |
| Current Solid Waste Provider: |  |
| Current Recycling Service Provider: |  |
|  | |
| Project Contact Name: |  |
| Project Contact Title: |  |
| Project Contact’s Direct Telephone/Fax: |  |
| Email Address: |  |
| Street Address (No PO Boxes): |  |
|  | |
| Secondary Project Contact Name: |  |
| Secondary Project Contact Title: |  |
| Secondary Project Contact’s Direct Telephone/Fax: |  |
| Email Address: |  |
| Street Address (No PO Boxes): |  |
|  | |
| Primary Financial Contact – Authorized Representative: |  |
| Financial Contact Title: |  |
| Financial Contact’s Direct Telephone/Fax: |  |
| Email Address: |  |
| Street Address (No PO Boxes): |  |

**Type of Eligible Entity:** *(check one)*

Public school or school district (excluding universities and other post-secondary institutions)

City (*applying on behalf of the school district*)

County (*applying on behalf of the school district*)

## Standard Project Information:

**Project Title:  
Project Abstract:** *Provide a short description (3 to 4 sentences maximum) of the proposed project here.*  **Which TCEQ funding category does this program fall under?** *A detailed description of each funding category is available for review in the* [Grant Application Guidelines](https://www.nctcog.org/getmedia/5468a837-a96e-454c-9272-065419268869/Solid-Waste-Grant-Application-Guidelines_2-21-23.pdf)*. (check one)*

Source Reduction and Recycling

**Will your program have an educational and/or training element to it?**

Yes

No

**Which goal area from *the Regional Solid Waste Management Plan* does this program fall under?** *A detailed list of regional plan goals and objectives is available for review in the* [Grant Application Guidelines](https://www.nctcog.org/getmedia/5468a837-a96e-454c-9272-065419268869/Solid-Waste-Grant-Application-Guidelines_2-21-23.pdf)*. (check one)*

Promote Creation and Expansion of Waste Management Programs

**How many students are represented within your school district?** *(check one)*

Under 1,000

1,000 – 5,000

5,000 – 10,000

10,000 – 20,000

20,000 – 50,000

50,000 – 100,000+

**Will you be partnering with a Parent-Teacher organization?**

Yes, group name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

No

## Grant Narrative:

*In this section, provide a detailed description of the proposed project, including the funding needs, project impacts and benefits, and how this proposed project will advance materials management. Please reference the scoring sheet located in the* [Grant Application Guidelines](https://www.nctcog.org/getmedia/5468a837-a96e-454c-9272-065419268869/Solid-Waste-Grant-Application-Guidelines_2-21-23.pdf) *for additional information on how this narrative will be scored. (500 words maximum).*

* *How many campuses are you looking to service?*
* *Thinking about how many locations are available to service on your campuses, how many sites would each campus adopt?*
* *Does your school district have an established Green Team or other student-body entity to partner with?*
* *Has your school district implemented a previous recycling campaign?*
* *If recycling services are already established in your district, who is responsible for the collection of materials (facilities management, students, etc.)?*
* *What does a successful recycling campaign look like to your district?*

## Private Industry Notification:

**For the project types listed below, this section must be complete to be considered for funding. Failure to complete this section will result in immediate disqualification for consideration of funds.** Please reference the [Grant Application Guidelines](https://www.nctcog.org/getmedia/5468a837-a96e-454c-9272-065419268869/Solid-Waste-Grant-Application-Guidelines_2-21-23.pdf) for additional information on how to complete this section.

This section is applicable only to the following grant categories:

* Source Reduction and Recycling
* Citizens’ Collection Stations and “Small” Registered Transfer Stations
* A demonstration project under the Education and Training project category.

According to state law, a project or service funded under this program must promote cooperation between public and private entities (by definition includes non-profit organizations) and may not be otherwise readily available or create a competitive advantage over a private industry (by definition includes non-profit organizations) that provides recycling or solid waste services. If the proposed project provides a service, in the spaces below, list all known private service providers in the affected geographic area known to provide similar or related services and summarize your discussion with the providers. You must comply with the notification requirements. Please attach additional pages if needed.

## Statement of Private Sector Notification:

|  |  |  |  |
| --- | --- | --- | --- |
| Private Sector Providers Contacted | Name and Position | Date Notified | Method of Contact |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Summaries of Discussions with Private Industry:**

*In this section, summarize the discussions with the private sector providers.*

## Budget:

*In this section, itemize each requested budget category for the proposed project. Supplemental documentation is required, including quotes, estimates, and images of requested items to the application to assist the Grant Selection Subcommittee score the proposed project.**Please reference the* [Grant Application Guidelines](https://www.nctcog.org/getmedia/5468a837-a96e-454c-9272-065419268869/Solid-Waste-Grant-Application-Guidelines_2-21-23.pdf) *to review what types of supplemental documentation are required and the scoring sheet for additional information on how this section will be scored. Additional lines can be added to the itemized budgets, if necessary. Listed items under ‘Other’ must be purchased either as listed or by increasing line item quantities.* ***Please note: each line item must equal or exceed $500.00 to be an eligible expense.***

|  |  |
| --- | --- |
| **Budget Categories** | **Total Funding Request Per Category** |
| 1. Equipment (unit cost of $5,000 or more) | $ |
| 2. Construction | $ |
| 3. Contractual (other than for Construction) | $ |
| 4. Other Expenses | **$15,186.50** |
| **TOTAL GRANT FUNDS REQUESTED** | **$15,186.50** |

**1. Equipment (Unit Price of $5,000 or more)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Item/Description | Purpose | Quantity | Unit Cost | Total Amount Requested |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
| Total Equipment Budget |  |  |  | $ |

**2. Construction**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Description | Purpose | Quantity | Unit Cost | Total Amount Requested |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
| Total Construction Budget |  |  |  | $ |

**3. Contractual (other than for construction)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Description | Purpose | Quantity | Unit Cost | Total Amount Requested |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
| Total Contractual Budget |  |  |  | $ |

**4. Other Expenses**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Description | Purpose | Quantity | Unit Cost | Total Amount Requested |
| GeoCube Recycling Bins 32” | Collect Recycling | 15 | $329.95 | $4,959.25 |
| Description | Purpose | Quantity | Unit Cost | Total Amount Requested |
| GeoCube Recycling Bins 28” | Collect Recycling | 50 | $313.95 | $4,709.25 |
| T-Shirts | Promote Program | TBD | $2,500 | $1,000 |
| Recycling Signage | Visual of Recyclables Accepted | TBD | $3,000 | $1,000 |
| **Total “Other” Budget** |  |  |  | **$15,186.50** |

**Applicant’s Match**  
Amount: $  
Narrative: *Please provide a description and breakdown of the anticipated matching funds that will be provided as a part of the proposed project. Note: matching funds are not required for these grants.*

**If more money becomes available, could the proposed project be expanded?**

Yes  No

**If the proposed project is unable to be fully funded, would you be able to accept partial funding?**

Yes  No  
**Please briefly describe the top funding priorities if you can accept partial funding.**

**Do you have a preference on which fiscal year you receive the funding?**

First FY  Second FY  No preference

## Timeline:

*In this section, provide a detailed description of the proposed project’s timeline, including specific activities and the responsible party for each. Please reference the grant application portal for an example project timeline. For information on how this section will be scored please review the* [Grant Application Guidelines](https://www.nctcog.org/getmedia/5468a837-a96e-454c-9272-065419268869/Solid-Waste-Grant-Application-Guidelines_2-21-23.pdf)*. Additional rows can be added as necessary.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Activity** | **Responsible Party** | **Estimated Start Date** | **Estimated Completion Date** | **Additional Information** |
| Application Submitted | Applicant |  |  |  |
| Purchase of deliverables | Applicant |  |  |  |
| Implementation of deliverables | Applicant |  |  |  |
| Year-later report | Applicant |  |  |  |
|  |  |  |  |  |

## Grant Application Checklist:

Completed Grant Narrative

Completed Budget section

Provided supplemental documentation for the budget and proposed project

Completed Timeline Section

Completed Private Sector Notification, *if the proposed project type is Source Reduction and Recycling, Citizens’ Collection Stations and “Small” Registered Transfer Stations, or a demonstration project under the Education and Training project category.*

Attached Resolution/Court Order

Attached Letters of Support *(required for Regional Collaborative Projects)*

For any further inquiries, please contact:

Alexa Gilbert

Environment and Development Planner

North Central Texas Council of Governments

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