



**APPLICATION FOR CO-SPONSORSHIP FUNDS
EDUCATIONAL and TRAINING EVENTS or CONFERENCES
2026 APPLICATION FORM**

AGENCY, ORGANIZATION, COMMITTEE, OR COALITION NAME: _____

ADDRESS: _____

CONTACT PERSON: _____

PHONE: _____ **EMAIL:** _____

TRAINING or CONFERENCE TITLE: _____

DATE(s) and LOCATION of the Event:

NOTE: Conferences or training must be completed on or before September 19, 2026.

NUMBER OF EXPECTED ATTENDEES: _____

TRAINING WILL BE HELD: ___ IN-PERSON ___ REMOTE ___ HYBRID

REGISTRATION FEE: YES ___ NO ___ **AMOUNT** _____

If yes, what expenses does the registration fee cover? *(Answer required if scholarships requested)*

THE APPLICANT named above is considered the sole or primary conference sponsor.
Please list the name of all other sponsors for this training event or conference:

*If the applicant is partnering with one or more organizations to sponsor a conference, none of the partnering organizations can also independently apply for co-sponsorship funds for the same event.
If a Fiscal Agent handles funds or signs contracts on your behalf, please notify the grants administrator.*

According to the Council's Five-Year State Plan, training conferences should "provide ongoing education and training that reflect and address the outcomes (independence, productivity, self-determination, integration and inclusion) as found in the Developmental Disabilities Assistance and Bill of Rights Act of 2000 ("[DD Act](https://mn.gov/mnddc/dd-act/index.html)"- <https://mn.gov/mnddc/dd-act/index.html>) into programs and supports for people with developmental disabilities and their families." Conferences and training opportunities for individuals with developmental disabilities and their families, as well as advocates, providers, or professionals, will lead to greater networking and partnering across the state through a variety of delivery modes.

The definitions of a **developmental disability**; and definitions of **independence, productivity, self-determination, integration, and inclusion** appear at the end of this Application Form.

1. Briefly state the **purpose** of the training event(s) or conference:

2. Describe how this training or conference is designed for individuals with developmental disabilities and their families?

2(a). How will people with developmental disabilities help plan and take part in the training event? (Please explain what they will do and how you will include them.)

2(b). How will you make sure the training event includes many different kinds of people, especially those who are often left out? (Please explain how you will invite people and help them feel welcome.)

2(c). How will you make sure the event is easy for people with disabilities to attend and take part in? (Please explain what supports, tools, or changes you will offer.)

- 3. How** will the training event assist people with developmental disabilities to increase their **independence, productivity, self-determination, integration, and inclusion (IPSII)** in the community? Please give two examples of the relationship between the training provided and the IPSII results. *(IPSII definitions are also found on the back page of this application.)* *(Please attach additional sheets, if needed, or use the additional fill-in space provided on the last page).*

4. Co-sponsorship funds. You may request **up to a total of \$2,000** to help pay for things like:

- **Presenter Fees** (paying people who are speaking or teaching),
- **Individualized Accommodations** (*things that help make the event more inclusive for everyone*)
- **Scholarships** for people with developmental disabilities or family members who need financial assistance so they can participate in a training event that traditionally charges registration fees.

4(a). PRESENTER FEES

Do you want to use any money to pay presenters? Yes ____ No ____
If yes, how much money are you asking for \$ _____

Write the names of the presenters, what they will talk about, and how much money each will receive:

- Name: _____ \$ _____
Topic: _____
- Name: _____ \$ _____
Topic: _____
- Name: _____ \$ _____
Topic: _____
- Name: _____ \$ _____
Topic: _____

Are any of the presenters listed above employees, contracted employees, or key members of the sponsoring organization? (List which presenter is and their relationship to your organization).

4(b). How will each of the identified presenters' presentations **increase** the independence, productivity, self-determination, integration, and inclusion (**IPSII**) of persons with developmental disabilities in the community?

4(c). SCHOLARSHIPS

Do you want to use any money for scholarships? Yes ____ No ____

If yes, how much money are you asking for \$_____

How much money is that per person?

(\$ _____ per person) for scholarships for ____ participants (number of anticipated participants receiving scholarships).

The applicant is responsible for determining eligibility criteria for scholarships and having a scholarship application process in place. Scholarship funds may be used to pay all or a portion of the registration fee for individuals with developmental disabilities or families who could not otherwise attend without some financial assistance.

4(d). INDIVIDUALIZED ACCOMMODATIONS COSTS

Type of Accommodation: _____

Amount Requested: \$_____

(Note: Accommodation requests for venue rent, food, or supplies will not be approved. Individualized accommodations might include translators, caption services, or transportation)

4(e). TOTAL AMOUNT requested for presenter fees, individualized accommodations, and scholarships

(4a + 4c + 4d) = \$_____ (not to exceed \$2,000).

5. CUSTOMER SATISFACTION

The attached sample **Customer Satisfaction Survey** (Survey) for Training Conferences should be completed by training conference participants who are people with developmental disabilities or family members. You will be given a template to record the aggregate responses of this Survey to the GCDD within two weeks of the training.

If your Application is approved and co-sponsorship funds are awarded, we ask that you inform and remind participants about the Survey, its relationship to the co-sponsorship funds received, and the importance of completing the Survey prior to leaving the conference site or before leaving the virtual event.

In addition, recipients of co-sponsorship funds will be asked to provide the following:

- Documentation of any changes in local or state policies, procedures, and best practices as a result of this conference;
- Documentation of any systems change activities as a result of this conference.

Application deadline:

No later than 5:00 PM (CST) on Thursday, January 15, 2026

Submit applications, questions, or request an alternate format:

Paul Nevin, Grants Administrator
Governor's Council on Developmental Disabilities
(651) 282-2899 voice (877) 348-0505 toll free
(800) 627-3529– Minnesota Relay Service OR 711
Email: paul.nevin@state.mn.us

GCDD plans to notify applicants of status by February 6, 2026

DEFINITIONS

INDEPENDENCE	The extent to which individuals with developmental disabilities exert control and choice over their own lives.
PRODUCTIVITY	Engagement in income-producing work that is measured by increased income, improved employment status, or job advancement; or Engagement in work that contributes to a household or community.
SELF-DETERMINATION	<p>The freedom to choose how, where, and with whom to live; freely created relationships; contributing to the community in a meaningful way;</p> <p>Taking responsibility for personal decisions and actions; making decisions about financial resources, needed supports, and hiring or evaluating direct care providers;</p> <p>Dignity and respect of and for people with disabilities;</p>
INTEGRATION AND INCLUSION	<p>Whatever it takes to remove system barriers, achieve what may seem impossible, and do no harm.</p> <p>The use by individuals with developmental disabilities of the same community resources that are used by and available to other citizens;</p> <p>Living in homes close to community resources, with regular contact with citizens without disabilities in their communities;</p> <p>The full and active participation by individuals with developmental disabilities in the same community activities and types of employment as citizens without disabilities, and utilization of the same community resources as citizens without disabilities; living, learning, working, and enjoying life in regular contact with citizens without disabilities.</p> <p>Having friendships and relationships with individuals and families of their own choosing.</p>

Definition of “developmental disability” -

The term “developmental disability” is defined in the DD Act as a severe, chronic disability of an individual from birth that:

1. Is attributable to a mental or physical impairment or a combination of mental and physical impairments;
2. Is manifested before the individual attains age 22;
3. Is likely to continue indefinitely;
4. Results in substantial functional limitations in three or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, and economic self-sufficiency; and
5. Reflects the individual’s need for a combination and sequence of interdisciplinary, or generic care services, supports or other assistance that is of lifelong or extended duration and is individually planned and coordinated;
6. When applied to infants and young children, individuals from birth to age nine, inclusive, with a substantial developmental delay or specific congenital or acquired conditions may be considered to have a developmental disability if the individual, without services and supports, has a high probability of meeting those criteria later in life

Use this space for any responses longer than allowed by the form input area: