**2023 Gambling Harm Research Grant Application**

**Bid No. BD-23-1068-1068C-1068L-81256**

All completed applications must be sent by January 31st to be considered for funding for the 2023 Grant Round. Please submit this completed form as well as any relevant attachments to [MGCCMF@Massgaming.gov](mailto:MGCCMF@Massgaming.gov).

For more detailed instructions as well as the 2023 Application Guidelines please visit <https://massgaming.com/about/community-mitigation-fund/>

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| 1. **Project Summary** |
| **Legal Name of Applicant:** |
| **Project Name (Please limit to 5 words):** |
| **Amount Requested:** |
| **Brief Project Description (approx. 50 words):** *Please use this space to provide a high-level overview of what your project entails.* |

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| 1. **Applicant Contact Information**   Please provide below the manager for this grant and any other individuals you would like to be copied on all correspondence. |
| **Grant Manager:** |
| **Email Address:** |
| **Telephone Number:** |
| **Address:** |
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| **Contact II:** |
| **Role:** |
| **Email Address:** |
| **Telephone Number:** |
| **Address:** |
|  |
| **Contact III:** |
| **Role:** |
| **Email Address:** |
| **Telephone Number:** |
| **Address:** |
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| 1. **Detailed Project Description & Mitigation** |
| 1. PleasPlease describe in as much detail as you can the potential impact that may be attributed to the operation of a gaming facility that you would like to study. Is there any preliminary evidence that this issue exists. 2. Explain the importance of the topic or question that the proposed project addresses. State concisely the aims of the proposed study. |
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| 1. Explain the importance of the topic or question that the proposed project addresses. State concisely the aims of the proposed study. Describe the overall strategy, methodology, and analyses to be used to accomplish the specific aims of the project. |
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| 1. *(If applicable)* Please explain how this impact was not anticipated in the Applicant’s Host or Surrounding Community Agreement. |
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| 1. The Project Summary must contain a summary of the proposed activity suitable for dissemination to the public. It should be a self-contained description of the project and should contain a statement of objectives and methods to be employed. It should be informative to other persons working in the same or related fields and insofar as possible understandable to a scientifically or technically literate lay reader. This Summary must not include any proprietary/confidential information. |
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| 1. Research Strategy   Describe the research strategy considering the instructions provided below. Cite published experimental details in the Research Strategy section and provide the full reference in the Bibliography.   * Approach: Describe the overall strategy, methodology, and analyses to be used to accomplish the specific aims of the project. * Significance: Explain the importance of the topic or question that the proposed project addresses. * Innovation: Describe any new or novel theoretical concepts, approaches or methodologies to be used. |
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| 1. State concisely the goals of the proposed research. Summarize the potential impacts that the results of the proposed project will exert on Massachusetts and the research field(s) involved. Describe how an answer to the question or insight on the topic may impact or influence policy or practice. Describe a plan to share information with the community and or use it to inform policy or practice. |
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| 1. Please outline your team composition and how you will engage with community partners. The Commission encourages a collaborative approach with cross-sectional representation, multi-disciplinary approach. Applicants should seek to build a research team that includes representation from the following: Community members/residents; Community-based service providers; agencies, or assemblies of people with a common focus; local public health agencies or institutes, and academic researchers. |
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| 1. **Scope, Budget, and Timeline** | |
| **Applicant:** | **Vendor Code:** |
| **Total Grant Amount Requested:** | **Estimated Total Project Cost:** |

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| **Scope of Work**  Please include below a breakdown of the proposed work. The project scope should be sufficiently detailed to allow the review team to understand the steps required for project completion. |
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| **Proposed MGC Grant Budget**  Please use the following table to outline the budget of your project. Include any requests for proposals, quotes, or estimates that would quantify the costs associated with the mitigation. In determining the funding request, please round up to the nearest hundred dollars. | | | |
| **Timeline** | **Description of Purchase/Work** | **QTY** | **Budget** |
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|  | **TOTAL:** |  |  |
| **Funding Source** | **Description of Purchase/Work** | **QTY** |  |
| In Kind Services |  |  |  |
| Federal | . |  |  |
| State |  |  |  |
| Local Match |  |  |  |

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| 1. **Waiver**   If you are applying for a waiver, please submit the Waiver Form with your application. The form can be found at [www.massgaming.com/about/community-mitigation-fund/forms/](http://www.massgaming.com/about/community-mitigation-fund/forms/) | |
| **Are you applying for a waiver?** | |
| **\_\_\_ Yes** | **\_\_\_ No** |

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| 1. **Please provide a brief description of each attachment.** |
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| 1. **Applicant Certification** |
| |  |  |  | | --- | --- | --- | | **On behalf of the aforementioned Applicant/municipality/governmental entity I hereby certify that the funds that are requested in this application will be used solely for the purposes articulated in this Application.** | | | |  |  |  | | | **Signature of Responsible Municipal Official/Governmental Entity** |  | **Date:** | | |  |  |  | | | (print name) |  |  | | |  |  |  | | | Title: |  |  | | |