

## Instructions for Submitting Applications Using TCFOR

### Purpose



The purpose of the ***Tobacco Control Funding Opportunities and Resources*** (TCFOR) website is to consolidate access to information and resources about funding opportunities from the California Tobacco Control Program, California Department of Public Health into a single location. Type <http://tcfor.catcp.org> into the address line of your web browser to access the TCFOR website.

This website provides access to all procurements released by the California Tobacco Control Program including: Requests for Applications (RFA), Requests for Proposals (RFP), Local Lead Agency Guidelines, and funding renewal instructions for currently funded agencies. These procurements may be open and competitive or limited to local health departments or to currently funded agencies. Please read the eligibility requirements prior to submitting a "***Request to Apply***."

For the purpose of simplifying language and terminology throughout this website the following terms are defined as:

- Applicant: Refers to an agency seeking funding regardless of whether the agency is applying for funding from a RFA, RFP, Local Lead Agency Guidelines, or renewal procurement.
- Procurement: Refers to a funding opportunity and may include a RFA, RFP, Local Lead Agency Guidelines or renewal instructions.
- Local Lead Agency: Refers to the 61 local health departments.

This site provides:

- General information about the purpose and time lines of current and archived procurements.
- The ability to download RFA, RFP, Local Health Department funding guidelines, and renewal agency funding instructions.
- Access to websites, directories, and downloadable resource documents that may assist applicants in the preparation of their funding request.
- The ability to create a "***User Account***" in order to "***Request to Apply***" to a funding opportunity. (An agency that has an active or inactive Online Tobacco Information System (OTIS) login and password is to use their existing OTIS login and password. Only users who have never had an OTIS login and password are to create a new "***User Account***.")
- The ability to "***Request to Apply***" to a funding opportunity. Submitting a "***Request to Apply***" requires the user to state the anticipated funding amount to be requested.



- The ability to submit a "**Letter of Intent.**" Once the "**Request to Apply**" is approved by the California Tobacco Control Program, the requestor will receive an email verification of the request, or will be contacted for more information if there was a problem with the request. If the request is approved, an email will be sent to the requestor, which will provide the login name, password, and a website link to OTIS, which provides access to an online application.<sup>1</sup> From the "**My Agency**"<sup>2</sup> section of OTIS an agency can submit requests for multiple users within that agency to have access to the online application.

## Request to Apply Instructions

1. Fields in **Red** are required and must be completed to save information and move forward through the system.
2. A "**Request to Apply**" is only to be submitted by one individual per project/agency for which an application will be submitted (e.g., only one person from the *Stop Tobacco Use Now!* project at Coffee Health Clinic is to submit a "**Request to Apply.**") Once the initial request is approved by CALIFORNIA TOBACCO CONTROL PROGRAM, the original requestor can request that additional user accounts be created and linked to the application so that these additional users can assist in completing of the application.
3. To submit a "**Request to Apply**" click on "**Funding Opportunities.**"

Home	Title	Opening Date	Closing Date
Overview	CG 18-10064 California Tribal Grants to Reduce Tobacco – Related Disparities	February 27, 2019	April 25, 2019 5:00 PM
Program Background	<a href="#">View Upcoming Funding Opportunities</a> <a href="#">View Recently Awarded Funding</a> <a href="#">Sign-up for Email Alert Services</a> <a href="#">View Archive</a> <a href="#">Training Tutorials</a>		
FAQ			
Opportunities ▾			
Email Alert Services			
Archive			

OTIS is an interactive web-based system used by the California Tobacco Control Program to manage its contracts. The system includes a number of functions including maintenance of contact information, application submission, peer review processes, and submission of progress and cost reports.

<sup>2</sup>The link to *My Agency* is located in the footer of the OTIS Home page.



4. From the list of "**Current Funding Opportunities**" click on the title of the procurement for which your agency/project seeks to apply.

## Current Funding Opportunities

[Home](#)

[Overview](#)

[Program Background](#)

[FAQ](#)

Opportunities ▾

[Email Alert Services](#)

[Archive](#)

Title	Opening Date	Closing Date
CG 18-10064 California Tribal Grants to Reduce Tobacco – Related Disparities	Feb 27, 2019	Apr 25, 2019

If you are looking for information pertaining to a previous Funding Opportunity, please check the [Archive](#)

5. Click on "**Start Here.**"



6. If you already have either an active or inactive OTIS login name or password, fill in the fields identified below and click the "**Sign In**" button. If you have never had an OTIS login name and password, click on the "**Need an OTIS account**" link. Skip to #12 for instructions on how to register for a new Login Name and Password.

### Registration Login or Account Creation

OTIS Login Name:

OTIS Password:

Sign In

[Forgot Your Login?](#)

[Forgot Your Password?](#)

[Need an OTIS account?](#)



7. **Agency Selection:** After you "**Sign In**", click on the button that lists your agency's name and its 10-digit Federal Identification (FEID) number. If the agency which is applying is not listed, then click on the "**Create New Agency**" button and you will be prompted to provide official information about the agency.

Click on "**Next**" to move to the next screen.

## Select Agency

Select or add your agency to begin the request process.

**Agency Name:** ☐ CTCP (FEID 000-000-00)  
☐ Create New Agency

8. **Additional Information:**

- **Anticipated Funding Request:** Complete this field by stating the amount of money you anticipate requesting in your application. Please review the procurement instructions for information about the amount of awards to be made. Do not enter a (\$) dollar sign or any commas. This is an estimate and is used by the California Tobacco Control Program for planning purposes only. When you submit the final application, you may request more or fewer funds.
- **Letter of Intent:** If the procurement for which you are applying for requests a letter of intent, review the RFA/RFP for instructions about the information to be provided in the letter. The letter of intent is a very important document to the California Tobacco Control Program because it helps us to calculate the number of peer reviewers to be recruited and the areas of peer reviewer expertise needed. The information provided in the letter of intent is not binding. It is only used by the California Tobacco Control Program to aid our planning of the peer review.

Prepare the letter using word processing software and save the document to your computer as a word document or PDF. To upload the letter of intent, click on "**Browse**" and search your computer files for the correct electronic file. Click on the name of the file and then click on "**Open**." The name of the file uploaded will appear in "**Letter of Intent**" field. If you have uploaded the correct file, click on "**Next**."

## Local Lead Agency Procurement / Competitive Grantee Procurement

### Additional Information

Fields in **RED** are required.

**Title:** Local Lead Agency Procurement / Competitive Grantee Procurement  
**Agency Name:** California Tobacco Control Program, California Department of Public Health  
**Letter of Intent:**  No file chosen

Continue



9. **Verification:** Following the successful submission of your request, you will receive the following notice.

## Local Lead Agency Procurement / Competitive Grantee Procurement

### Applicant Registration Submitted

Thank you for registering for this funding opportunity. You will receive the following:

1. An email confirming your registration
2. Notification from CTCP (within 5 business days) of the approval of your registration
3. A link to OTIS to start developing your application

### 10. **Create a New Agency:**

- **Agency FEID:** Enter your agency's official 10-digit Federal Identification Number.
- **Agency Full Name:** Enter the full and official name of your agency.
- **Agency Short Name:** Enter a shortened version of your agency's full name that can be used on reports and screens, which have space limitations.
- **Agency Type:** Select the one agency type that best describes your agency
  - CityHealth Jurisdiction (i.e., city health department)
  - County Health Jurisdiction (i.e., county health department)
  - For-profit Agency
  - Non-profit Agency (e.g., private or public non-profit agency such as a 501- 3C, public school, tribe, etc.)
  - State Agency (i.e., a state government agency other than a university, college or community college)
  - University (e.g., a public or private state or private university, college or community college)

## Local Lead Agency Procurement / Competitive Grantee Procurement

Agency information is required to request to apply for this funding opportunity.

Use the form below to provide basic identifying information about the applying agency.

### Create New Agency

Fields in **RED** are required.

**Agency FEID:**

**Agency Full Name:**

**Agency Short Name:**

Brief version of the name of the agency.

It should be under 40 characters in length and still distinguish your agency from others.

**Agency Type:**

Continue



- Click on "**Next**" to move to the next screen and complete additional contact information.
- County this Agency resides in:** From the drop down menu, select the county in which the agency's headquarters office resides. If the agency is located outside of California, select, "**Not Applicable**."

Agency Full Name: Test Agency  
 Agency Short Name: test agency  
 Agency Type: City Health Jurisdiction  
 Agency FEID: 111111111  
 County this Agency resides in: -- Select One --

- Contact Information:** Enter the phone, fax, and email address for the agency. If the agency has a website, please provide the website address.
- Physical Address:** Enter the physical address, which identifies where the agency is located.
- Mailing Address:** Enter the address that the agency uses to receive U.S. mail.

#### Contact Information

Phone:   
 Fax:   
 Website:   
 Email:   
 Confirm Email Address:

#### Physical Address

Address 1:   
 Address 2:   
 City:   
 State:   
 Zip Code:

#### Mailing Address

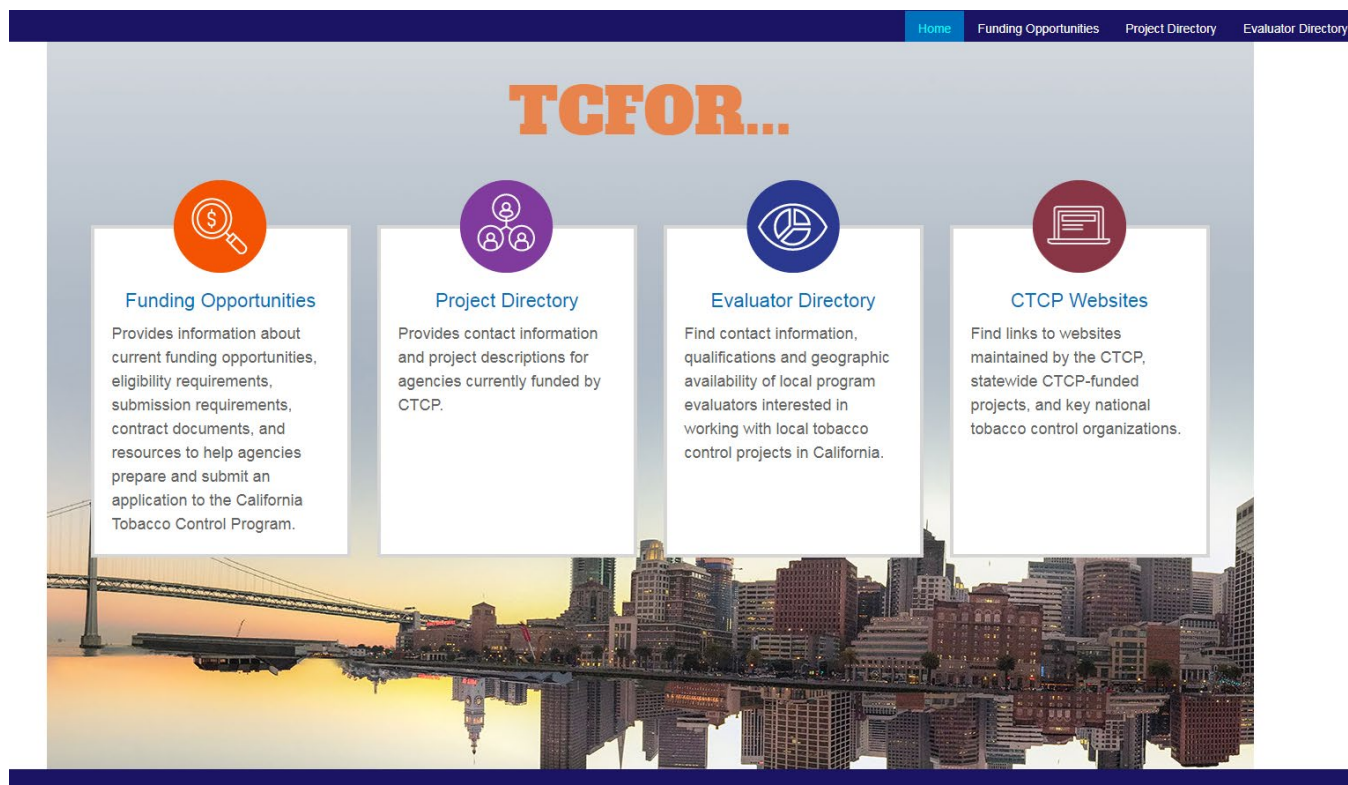
[Copy Physical Address](#)  
 Address 1:   
 Address 2:   
 City:   
 State:   
 Zip Code:

Next



## Navigating the Tobacco Control Funding Opportunities and Resources Website

Click on "**Funding Opportunities**" to access a list of current procurements released by the California Tobacco Control Program, California Department of Public Health.



## Funding Opportunities Overview

### Purpose

The purpose of the "**Funding Opportunities Overview**" is to provide links to:

- "**Program Background**" which describes the history and structure of the California Tobacco Control Program.
- "**Opportunities**" which includes information about currently open procurements, instructions on how to apply for funding, and upcoming funding opportunities.
- "**FAQ**" which is a list of frequently asked questions and responses.
- "**Email Alert Services**" which provides the ability to sign-up for an email alert whenever new opportunities are posted or there are amendments to current funding opportunities; and
- "**Archive**" which provides links to past procurements.



## Opportunities

The "**Opportunities**" section of the website provides links to all currently open funding opportunities and descriptions of funding opportunities anticipated in the near future.

### General Instructions

Click on the *Title* of a procurement to:

- Download a copy of the procurement
- Download forms that need to be completed and submitted with the application or proposal
- Obtain information and instructions about an information meeting and/or training conducted to assist agencies applying for funds
- Create a "**User Account**"
- Submit a "**Request to Apply**" for funds
- Find links to websites, directories, and download resource documents that will help you prepare your submission for funding.

### Specific Instructions

- **Deadline**: Indicates the final date to submit a completed application.
- **Purpose**: Describes the general purpose for the use of the funds being made available.
- **Application Information**: Provides links to download a copy of the funding alert, which announced the availability of the funds, and to the procurement instructions.
- **Contract Documents**: Provides links to any documents that are to be downloaded, completed and submitted as part of the application submission.
- **Meeting/Training**: Provides information and access instructions for any meeting that will be conducted for potential applicants prior to the submission of the application.
- **How to Apply**: Provides a login screen for users who already have a "**Login Name**" name and "**Password**"
- **Eligibility and Selection Criteria**: Describes requirements about the basic qualifications of potential applicants.
- **Key Dates**: Summarizes key dates associated with the procurement, which may include the submission, award announcement, appeal deadline, etc.
- **Total Award**: Describes the total funds available for the entire procurement.
- **Contact Information**: Identifies the California Tobacco Control Program staff who may be contacted with questions about the procurement.



California Tobacco Control Program

Funding Opportunities and Resources

Press F11 to exit full screen

Home

Funding Opportunities

Project Directory

Evaluator Directory

CTCP Websites

Contact

FAQ

Home

Overview

Program Background

FAQ

Opportunities +

Email Alert Services

Archive

Local Lead Agency Procurement / Competitive Grantee Procurement

Start Here

▼ Closing Date

March 25, 2016 - 5:00 PM

▼ Purpose

Nulla sit quam massa elit amet. Lacreet dictum torquent diam elit vestibulum pharetra et pretium. Risus donec ut aenean mauris nostra sodales amet ac leo ante turpis. Diam a tristique suspendisse scelerisque libero sit aptent massa. Morles condimentum mauris

▼ General Updates

Nulla sit quam massa elit amet. Lacreet dictum torquent diam elit vestibulum pharetra et pretium. Risus donec ut aenean mauris nostra sodales amet ac leo ante turpis. Diam a tristique suspendisse scelerisque libero sit aptent massa. Morles condimentum mauris

▼ Funding Alert

[Funding Alert Sample Documentation \(PDF - 28.93 Kb\)](#)

► Eligibility & Selection

▼ Application Information

[Funding Guidelines Sample Documentation \(PDF - 26.63 Kb\)](#)  
[APPENDIX Sample Documentation \(PDF - 29.93 Kb\)](#)  
[APPENDIX Sample Documentation \(PDF - 28.98 Kb\)](#)  
[APPENDIX Sample Documentation \(PDF - 28.98 Kb\)](#)

▼ Contract Documents

[Exhibit Sample Documentation \(PDF - 28.98 Kb\)](#)  
[Exhibit Sample Documentation \(PDF - 28.98 Kb\)](#)  
[Exhibit Sample Documentation \(PDF - 29.93 Kb\)](#)

▼ Meetings/Trainings

[Go-to-Training](#)

▼ Key Dates

ACTIVITY	ACTION DATE
Funding Alert Release	MM/DD/YYYY
RFP Release Date	MM/DD/YYYY
First Day to Request to Apply	MM/DD/YYYY
OTIS Open for Proposal Input	MM/DD/YYYY
RFP Informational Webinar	MM/DD/YYYY
Last Day to Submit Questions	MM/DD/YYYY
Mandatory Letter of Intent Deadline	MM/DD/YYYY, 5:00 PM PST
Proposal Submission Deadline	MM/DD/YYYY, 5:00 PM PST
Notice of Intent to Award	MM/DD/YYYY
Appeal Deadline	MM/DD/YYYY
Dispute Hearing(s)	MM/DD/YYYY
Dispute Decision(s) Announced	MM/DD/YYYY
Proposed Award Date	MM/DD/YYYY
Contract Start Date	MM/DD/YYYY
Contract End Date	MM/DD/YYYY

▼ Total Award

Nulla sit quam massa elit amet. Lacreet dictum \$600,000.00 torquent diam elit vestibulum pharetra et pretium. Risus donec ut aenean mauris nostra sodales amet ac leo ante turpis. Diam a tristique suspendisse scelerisque libero sit aptent massa. Morles condimentum mauris

▼ Contact

Jack Frost, Information Assistant  
 CTCPinfo@cdph.ca.gov  
 Office: 916-445-6474  
 Fax: 916-449-5517

► Related Materials

Sign up for Email Alerts

Start Here

TCFOR Home

Contact Us

Site Map

Privacy Policy

FAQ

California Department of Public Health, California Tobacco Control Program

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## **View Upcoming Funding Opportunities**

### **Purpose**

The purpose of the **"View Upcoming Funding Opportunities"** section of the website is to provide general information about procurements that are anticipated for release in the future.

### **General Instructions**

Click on **"View Upcoming Funding Opportunities"** for general information about procurements that are anticipated to be released in the future.

### **Specific Instructions**

1. From the list of **"Upcoming Funding Opportunities"** click the title of a procurement.
2. View general information about the upcoming funding opportunity.

## **Sign-up for Email Alerts**

### **Purpose**

The purpose of signing up for email alerts is to receive electronic notification of new funding opportunities and amendments to current procurements.

### **General Instructions**

Click on **"Sign Up for Email Alerts"** to sign-up for electronic notification of new funding opportunities and amendments to current procurements. After you submit the request you will receive an online confirmation and an email confirmation. You must respond to the email confirmation to verify that the email address is a real address. If you do not verify the email address, your request will be purged from the system.

### **Specific Instructions**

Fields identified in red are required fields. All others are optional.

1. **First Name**: Type in your first name.
2. **Last Name**: Type in your last name
3. **Organization Name**: Type in the name of your organization
4. **Email Address**: Type in your email address
5. **Re-enter Email Address**: Type in your email address a second time to verify that it is correct.
6. Click on **"Submit"** to save the information and send your contact information to the California Tobacco Control Program. Click on **"Cancel"** to clear the information from the form.
7. You will receive an online verification of your submission.
8. You will receive an email verification of your submission. You must click on the link in the email to verify the request within 5 days. If you do not, the request will be purged from the system and you will not receive email alerts.



