



How to Apply for O AFC's Community-based Opioid Recovery Effort (CORE) Short-term Grant Using O AFC's Grant Management System


Please email questions about the NOFA or grant application to oa fc.nofa@c pa.texas.gov by April 29, 2025. The deadline for submitting written questions regarding the NOFA is April 29 as outlined in the schedule of events. We estimate the answers to submitted questions will be posted around May 13. We will not be able to answer questions outside of this question-and-answer period.

Important Tips Before You Get Started

- Your username is your email with .opioid (For example, john.doe@gmail.com.opioid).
- All fields with a red asterisk are required.
- Your EIN number is very important. Make sure it is correct. This identifier is how we are ensuring each organization can only apply once in each region.
- Consider having all application materials ready before you start filling out the application.
- The deadline for applying for a 2025 Spring CORE Short-term grant is May 29, 2025, at 2:00 p.m. CT.

1. Please go to the Texas Opioid Grant Management System:

<https://txcomptroller.my.site.com/opioid/s/login/?ec=302&startURL=%2Fopioid%2Fs%2F>. Create an account by clicking on “Create Account.”


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Texas Opioid Grant Management System


Welcome!

If you are an existing user, please sign in by using the form provided. If you are new, please create a new account by clicking the Create Account button provided below to begin the registration process. Thank you.

Create Account


Sign In


 Username

 Password

Sign In

[Forgot your password?](#)


3. You will then receive a confirmation email with login instructions. Go to the email and click on the link to create a password in the Texas Grant Scoring Portal.

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Texas Grant Scoring Portal

Check the email account associated with your username for instructions on resetting your password. Remember to look in your junk and spam folder(s) where automated messages sometimes filter into. If you still can't log in, contact your administrator.



Please check your Email

[Back to Sign in](#)

WARNING - RESTRICTED GOVERNMENT SYSTEM

This system is restricted to authorized users only. Unauthorized access, use, or misuse or modification of this system, the data contained herein, or in transit to/from this system, may constitute a violation of federal, state and local laws and subject individual(s) to criminal and/or civil prosecution and penalties. This system and associated usage is subject to monitoring and security testing by authorized personnel. There is no expectation of privacy except as otherwise provided by applicable privacy laws.

- Once a password is created, sign into the scoring portal with username and password. **Please note:** Your username is your email address with “.opioid” at the end (john.doe@gmail.com.opioid).

The screenshot shows a web browser window with the URL `txcomptroller.my.site.com/opioid/s/login/?`. The page header includes the **COMPTROLLER.TEXAS.GOV** logo and the name **Glenn Hegar**, Texas Comptroller of Public Accounts. The main heading is **Texas Opioid Grant Management System**.

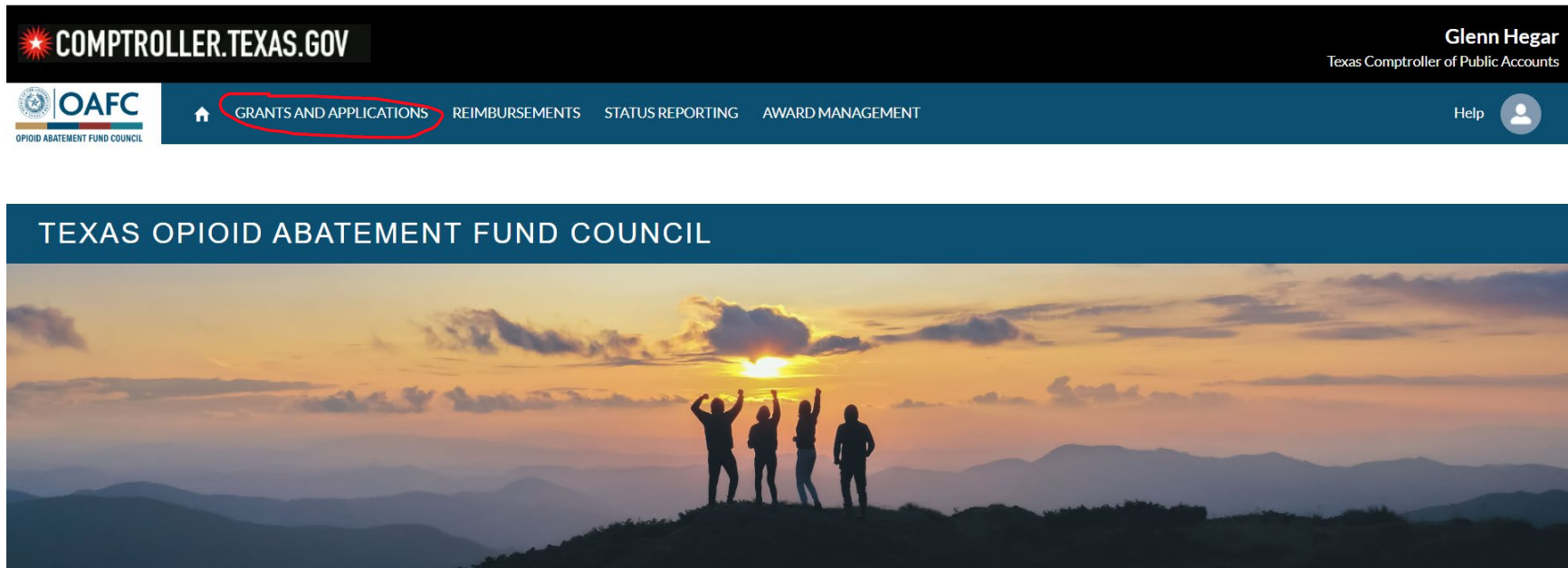
The login interface is divided into two main sections. On the left, a dark blue box contains a **Welcome!** message and instructions: "If you are an existing user, please sign in by using the form provided. If you are new, please create a new account by clicking the Create Account button provided below to begin the registration process. Thank you." Below this text is a white button labeled **Create Account**.

On the right, a light blue box contains a **Sign In** section. It features a user icon, a text input field with the placeholder `John.Doe@gmail.com.opioid`, a password input field with masked characters, and a dark blue **Sign In** button. A link for **Forgot your password?** is located below the password field.


At the bottom of the page, a **WARNING - RESTRICTED GOVERNMENT SYSTEM** box states: "This system is restricted to authorized users only. Unauthorized access, use, or misuse or modification of this system, the data contained herein, or in transit to/from this system, may constitute a violation of federal, state and local laws and subject individual(s) to criminal and/or civil prosecution and penalties. This system and associated usage is subject to monitoring and security testing by authorized personnel. There is no expectation of privacy except as otherwise provided by applicable privacy laws."

The footer contains a navigation bar with icons and labels for **Contact**, **Share/Connect**, **Subscribe**, **Policies**, and **Careers**.


5. After signing in, you will see the home page. Click on the “Grants and Applications” tab.





6. Choose the “Opioid CORE” funding opportunity by selecting the blue “Start” button.

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**OAFC**
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 GRANTS AND APPLICATIONS REIMBURSEMENTS STATUS REPORTING AWARD MANAGEMENT

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Funding Opportunity	Start Date	End Date	Action
Opioid Naloxone Distribution	4/10/2024 12:00 PM	12/31/2024 12:00 PM	Apply Now
Opioid K12	11/13/2024 12:00 PM	11/29/2024 12:00 PM	Apply Now
Opioid Peer to Peer	12/1/2024 12:00 PM	2/24/2025 12:00 PM	Apply Now
Opioid CORE			Start


No applications are in progress. To begin, please click the "Apply" button next to the grant listed above that you wish to apply for. Thank you.


7. This will bring you to a page with the 20 Texas regions available for the funding opportunity. Please refer to the Notice of Funding Availability (NOFA) for the map of the regions and the allocations available in each region. The dates in the image below will be updated.

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All CORE Funding Opportunities

Name	Start Date	End Date	Action
CORE ST Region 1 NE	3/31/2025 12:00 PM	4/4/2025 12:00 PM	Apply
CORE ST Region 2 SE	3/31/2025 12:00 PM	4/4/2025 12:00 PM	Apply
CORE ST Region 3 Houston	3/31/2025 12:00 PM	4/4/2025 12:00 PM	Apply
CORE ST Region 4 Corpus Christi	3/31/2025 12:00 PM	4/4/2025 12:00 PM	Apply
CORE ST Region 5 Brownsville	3/31/2025 12:00 PM	4/4/2025 12:00 PM	Apply
CORE ST Region 6 San Antonio	3/31/2025 12:00 PM	4/4/2025 12:00 PM	Apply
CORE ST Region 7 Austin	3/31/2025 12:00 PM	4/4/2025 12:00 PM	Apply
CORE ST Region 8 Round Rock	3/31/2025 12:00 PM	4/4/2025 12:00 PM	Apply
CORE ST Region 9 Dallas	3/31/2025 12:00 PM	4/4/2025 12:00 PM	Apply
CORE ST Region 10 Fort Worth	3/31/2025 12:00 PM	4/4/2025 12:00 PM	Apply

8. After clicking “Apply” for your chosen region, it will bring you to a page with text. To register and apply for funding you will need to read the terms and check the box. Then, click the “Save & Continue” button in the bottom right corner.

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Fiscal Year 2025 Community-Based Opioid Recovery Effort (CORE) Grants Application

The Texas Legislature created the Opioid Abatement Fund Council (OAF) to ensure that money recovered by this state through statewide opioid settlement agreements is allocated fairly and spent to remediate the opioid crisis in this state by using efficient and cost-effective methods that are directed to regions of this state experiencing opioid-related harms. From these settlement agreements, a portion of the distribution for Texas is deposited in the Opioid Abatement Trust Fund and is allocated to OAF to fund strategies in response to the opioid crisis.


The purpose of this application is to award funds for opioid abatement and recovery efforts. Proposed projects must be designed to deliver, upon completion, evidence-based programs and services at no cost to the recipient and tailored to meet community demand.

To register and apply for funding, Grant Applicants must complete the following application, including fully developed and detailed proposals and budgets. Grant Applicants will not be permitted to edit an application after submission but for minor administrative errors to be determined by CPA. All grant funding is contingent upon the availability of funds and upon approval of a grant application by the OAF. An application in no way constitutes a commitment by CPA or OAF to issue any grant award or enter into a grant agreement with a particular grant applicant or other interested person or party.


☒ By checking this box, I confirm that I understand and have read the above.

Save & Continue


9. After checking the box agreeing to the terms, the next page in the application is where you will fill out all required information. First, it will ask for the grant amount requested and a "strategy code." This "strategy code" field will open up a dropdown with letter and numbers. These are associated with the strategies outlined in the NOFA Appendix A. So, you will need to refer to this list to be able to select the correct strategy code. Once you have done so, you will then need to enter a justification in the box below. This should be detailed, and the text box will expand to allow for more text.

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Applicant Organization Information

If you plan on continuing later, please click "Save & Exit" to ensure your progress is not lost.

Grant Request information

Maximum Funding Amount	* Grant Amount Requested	Amount Awarded	* Strategy Code
\$ 250,000.00	\$ 200,000.00		<div>▼</div>

* Justify how the proposed use of funds meets the selected strategy and provides a benefit to the community or improve

* Organization Legal Name

Organization AKA or DBA

* Mailing Address

* Tax Identification Number

* City

* State

* Zip Code

* Organization Web Address

* County

* Organization Type

A01

A02

A03

B01

B02


B03

C01


10. Here is an example. If applying for a grant in Region 7 which is the Austin area, the request can be up to \$250,000. This request is for \$200,000 and “I02” is selected as the strategy code. As outlined in Appendix A of the NOFA, section I is “Supporting People in Treatment and Recovery” and #2 is “Provide the full continuum of care of treatment and recovery services for OUD and any co-occurring SUD/MH conditions, including supportive housing, peer support services and counseling, community navigators, case management, and connections to community-based services.” After filling in the “strategy code” box, fill in the justification text box, which does expand to accept more text. The example includes a justification that is several paragraphs explaining how an organization would meet that strategy with grant funding through this opportunity. This justification is part of the evaluation criteria and will impact your score. It is recommended that the justification should contain more detail than the below example contains.

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Applicant Organization Information

If you plan on continuing later, please click "Save & Exit" to ensure your progress is not lost.

Grant Request information

Maximum Funding Amount

Grant Amount Requested

Amount Awarded

Strategy Code

\$ 250,000.00

\$ 200,000.00

I02

Justify how the proposed use of funds meets the selected strategy and provides a benefit to the community or improves available services

Our organization provides intensive outpatient substance use disorder services along with recovery housing options. We are a 501(c)(3) who focuses on providing affordable housing, quality treatment, meaningful employment, and transportation to an from services. This very much falls under Strategy I. SUPPORT PEOPLE IN TREATMENT AND RECOVERY. Item 2. Provide the full continuum of care of treatment and recovery services for OUD and any co-occurring SUD/MH conditions, including supportive housing, peer support services and counseling, community navigators, case management, and connections to community-based services. These grant funds would help cover costs of these services for individuals who not insurance or money especially when they first enter our program.

Many of our clients come to us directly after incarceration and often do not have money to pay for services. We have several sober-living homes where they pay \$500 a month for a bed and must follow all house rules which includes period drug testing, adhere to a curfew, and attending house meetings. Because we focus on clients becoming self-sufficient, we help clients to get employment to be able to pay for rent each month.

We then help them with transportation to intensive outpatient treatment from 6-9pm on Mondays, Tuesdays, and Thursdays to accommodate normal working hours. At treatment, each client has the following services: assessments, case management to utilize all resources available to them in the community, group therapy that never has a group larger than 14 people in each group, and individual therapy sessions to address the underlying issue of addiction.

11. Farther down on this webpage, you will need to input all of your organization's information. Please note the Tax Identification Number field. This is a required field, so make sure you can provide one of these identification numbers for your organization. If your organization does not have a website, please put something in that field even if it is google.com. The web address will require "http://" to be included to avoid getting an error message. Then, there is a place for you to list individuals (up to 4) who may own 25 percent or more of the entity. We require their contact information, so that we are able to follow up with them for compliance.

* Organization Legal Name		Organization AKA or DBA Name, if applicable	
<input type="text"/>		<input type="text"/>	
* Mailing Address		* Tax Identification Number (VIN, TIN, EIN, or UEI)	
<input type="text"/>		<input type="text"/>	
* City	* State	* Zip Code	* Organization Web Address
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="https://google.com"/>
* County		* Organization Type	
<input type="text"/>		<input type="text"/>	
* Organization (Entity) Phone		* Contact Email Address	
<input type="text"/>		<input type="text"/>	
If any one individual owns 25 percent or more of the entity, please provide their name(s) ; their compliance with Section 231.006(c) and Section 231.302(c)(3) of the Texas Family C required if no one person owns 25 percent or more of the entity:			
v Individual 1			
Name		Phone	
<input type="text"/>		<input type="text"/>	
> Individual2			
> Individual 3			
> Individual 4			
Applicant Contact Information			

12. Once you finish filling that information, as you scroll to the bottom of the page you will be required to provide applicant contact information for the Authorized Official, Grant Manager, and Financial Manager. If an individual will be fulfilling multiple of these roles, please reenter their contact information in the applicable sections. Once all required information is complete on this page. Please click “Save & Continue.”

> Individual 4

Applicant Contact Information

Authorized Official (Signatory Authority)

Salutation

* First Name

* Last Name

* Title

* Telephone Number

* Email Address

Grant Manager (Primary Grant Contact)

Salutation

* First Name

* Last Name

* Title

* Telephone Number

* Email Address

Financial Manager (Primary Grant Contact)

Salutation

* First Name

* Last Name

* Title

* Telephone Number


* Email Address

Save & Exit


Back

Save & Continue

13. The next page will require you to read the application certifications and check the box at the bottom. Click “Save & Continue” to proceed to the next page.

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Application Certifications

Application Certifications

- **Legal Authority.** Applicant represents that it possesses legal authority to apply for the grant. Applicant's governing body has authorized the filing of the application, understands these certifications, and has directed and authorized the person identified as the authorized official to act in connection with the application and to provide such additional information as may be required.
- **Dealings with Public Servants.** Applicant has not given, offered to give, nor intends to give at any time hereafter any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor, or service to a public servant in connection with the submitted application.
- **Executive Head of a State Agency.** Under Section 669.003 of the Texas Government Code, relating to contracting with an executive head of a state agency, Applicant represents that no person who, in the past four years, served as an executive of CPA, was involved with or has any interest in the grant. If Applicant employs or has used the services of a former executive of CPA, then Applicant shall provide the following information in the application: name of the former executive, name of the state agency, the date of separation from state agency, the position held with Applicant, and the date of employment with Applicant.
- **Public Camping Ban.** If Applicant is a local entity under Section 364.001 of the Local Government Code, Applicant certifies that it has not received a final judicial determination finding it intentionally adopted or enforced a policy that prohibited or discouraged the enforcement of a public camping ban under Section 364.003 of the Local Government Code. If Applicant is currently being sued under the provisions of Section 364.003 of the Local Government Code, or is sued at any point during the duration of any grant, Applicant must immediately disclose the lawsuit and its current posture to CPA.
- **Additional Certifications in Sample Grant Agreement.** Applicant acknowledges that as a condition of any grant award, it will be required to make the additional certifications set out in Section XX. (Certifications, Representations, and Warranties) of the Sample Grant Agreement that is attached to and incorporated into the Notice of Funding Availability.

Application Certification Confirmation


☒ By checking this box, I represent and certify each of the above applicable statements.

[Save & Exit](#) [Back](#) [Save & Continue](#)

14. It will bring you to the page where you will upload all of your application materials. Each item has a description and will have a red asterisk next to it if it is required. We highly encourage you to use the evaluation criteria as a guide for your application materials. Make sure your application is responsive to everything that will be evaluated. Additionally, please read and refer to the NOFA when completing these required documents. The NOFA provides all the details needed for each document required on this page.


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Application Requirements and Submit

If you plan on continuing later, please click "Save & Exit" to ensure your progress and uploads are not lost.

Authorized Official and Resolution from Applicant's Governing Body

Applicant must designate an authorized official and provide the authorized official's title, mailing address, telephone number and email address. Applicant must also submit a written resolution from the Applicant's governing body that authorizes the designated official to act on Applicant's behalf and authorizes the authorized official to submit the grant application.

Upload Files

Or drop files

Applicant's Qualifications, Experience and Past Performance

In its application, Applicant must provide a profile that contains the following information:

- Applicant's physical address in the geographic boundary of the applicable RHP region, or if Applicant does not have such a physical address, a description of the services provided by Applicant in the applicable region prior to application submission.
- A description of Applicant's organization and previous experience related to the activities in the proposed project, particularly any such experience in the last three (3) years. Applicant should cite work products produced by the Applicant and attach reference letters as necessary. See Section IV.B.7, below. Applicant should further include any other information Applicant believes is pertinent to this NOFA.
- A description of the Applicant's technical and financial management capabilities and resources. This description should explain (a) how the Applicant will ensure successful management of projects and meet performance measures, and (b) how grant funds will be managed and accounted for to ensure compliance with appropriate grant requirements.

Upload Files

Or drop files





Resumes of Key Project Staff

In its application, Applicant must provide one-page resumes of key project staff. If needed, Applicant should further describe qualifications and expertise of key project staff in specific activities (technical, budgetary, grant and contract management, other), including work on related or similar projects.

Upload Files

Or drop files

15. Scrolling further down the page you can see everything that is required to submit your application. One thing to point out is the “Project Narrative.” Applicants must submit a narrative explanation that describes in detail their proposed program and how the requested grant funding will be used to deliver or support evidence-based community-focused opioid efforts. The NOFA provides more detail about this document.

	<p>Description of Prior Experience with Federal and State Grants Applicants must describe its prior experience with federal or state grants, including the amount of funding awarded, the scope of the projects, the current status of the projects, and the Applicant's compliance with monitoring and oversight activities associated with those grants. Applicant must disclose whether it has received any negative compliance findings or cancellations or terminations of a grant or subaward for cause and, if so, provide an explanation of the finding and detail how the issue was resolved.</p> <p>•</p> <div> Upload Files Or drop files</div>
	<p>Financial Statements Applicant must provide evidence of financial stability by providing audited financial statements for each of the last two (2) years of Applicant's operations or, in the alternative, financial statements compiled, reviewed and attested by an independent certified public accountant or certified public accounting firm.</p> <p>In lieu of providing financial statements as described in the preceding sentence, Applicant may provide a statement regarding their financial stability and viability to perform under any resulting grant agreement. If this approach is elected rather than financial statements described above, a statement must be submitted with appropriate supporting documentation, sufficiently detailed to demonstrate financial solvency, and to verify the capacity to fulfill the requirements of this NOFA.</p> <p>•</p> <div> Upload Files Or drop files</div>
	<p>Letters of Commitment (if applicable) Each participating entity, whether a subcontractor, subgrantee, or entity otherwise involved in grantee's project, will provide a letter of commitment clearly stating its role, contributions, and responsibilities associated with the project. If multiple project partners are involved, letters should be individually written and should not be form letters (i.e., identical).</p> <div> Upload Files Or drop files</div>
	<p>Executive Summary Applicant must provide a narrative summary not to exceed one (1) page that provides an abridged view of its proposed project.</p> <p>•</p> <div> Upload Files Or drop files</div>
	<p>Project Narrative Applicant must submit a narrative explanation that describes in detail how the proposed project will meet the requirements of each grant objective set forth in Section III.C. Applicant must describe the proposed program and how the requested grant funding will be used to deliver or support evidence-based community-based opioid recovery efforts. Applicants should describe the local need for opioid recovery efforts and describe how the proposed program addresses local needs.</p> <p>If the proposed program is a new project, Applicant must fully describe how the new program will impact evidence-based opioid recovery efforts in the community. If the funding is requested to support an existing program, Applicant must fully explain how the request will supplement existing funding and improve the capacity or ability of the organization to deliver evidence-based opioid recovery efforts, with particular attention to describing how the current program impacts opioid recovery efforts in the community and the results the Applicant expects to achieve with additional funding.</p> <p>In its narrative, the Applicant should also provide details of any partners, subcontractors, or subgrantees that will be utilized or existing relationships it intends to leverage to meet the goals of the proposed project. Additionally, Applicant should explain long-term strategies, if any, for sustaining the proposed project beyond the</p>

16. As you continue to scroll, you will see that a few items allow you to download a template file for you to fill out. For instance, the Budget file template can be downloaded. Applicants must fully complete and upload this required excel sheet for the “Project Budget” and a “Budget Narrative” in word format for this section.

Proposed Project Work Plan Applicant must submit a proposed Project Work Plan with any necessary milestones and deadlines for performing the grant activities. The Project Work Plan should be broken down by each grant objective and must include a proposed schedule for completing all activities, identification of potential milestones, deliverables and tasks to be performed by Applicant. Proposed roles and responsibilities of OAFIC or CPA, beyond those stated in this NOFA, shall be clearly described by Applicant in the Project Work Plan.	
<div>Upload Files Or drop files</div>	
Detailed Project Budget and Budget Narrative Applicants must fully complete and submit the required Excel Budget spreadsheet (Project Budget), which can be accessed below, as well as a Budget Narrative in the form of a word document. The Budget Narrative must clearly describe how funds will be allocated for each grant objective. Funds should be allocated based on the expected period of performance, no more than one year. The Budget Narrative must clearly explain the necessity and basis for all costs and correspond with the information included in the Project Budget and reflect only allowable costs that are consistent with the grant activities.	
<div>Click Here To Download Budget File Template</div>	
<div>Upload Files Or drop files</div>	
Reference Letters Applicant may provide additional evidence of its demonstrated ability to perform the proposed services under the agreement by submitting up to three (3) reference letters from stakeholders or other persons with knowledge of Applicant's ability and past experience in performing the same or similar work. Reference letters are separate from the Letters of Commitment described in Section IV.B.1.g.	
<div>Upload Files Or drop files</div>	
Upload Required Form, if applicable	Document
<div>Upload Files Or drop files</div>	U.S. Internal Revenue Service Form 990, Return of Organization Exempt from Income Tax, if applicable
<div>Upload Files Or drop files</div>	Organization's annual budget for the current year, including income and expenses
<div>Upload Files Or drop files</div>	Organization's annual budget for the previous year, including income and expenses

17. In the image below, you can see what it looks like when you successfully upload a document. A screen will pop up and then you can click “Done” when the file is successfully uploaded. Please note that uploads can take a second, and please make sure to click the “Done” button once the upload is complete.

Applicant must submit a proposed Project Work Plan with any necessary milestones and deadlines for performing the grant activities. The Project Work Plan should be broken down by each grant objective and must include a proposed schedule for completing all activities, identification of potential milestones, deliverables and tasks to be performed by Applicant. Proposed roles and responsibilities of OAFC or CPA, beyond those stated in this NOFA, shall be clearly described by Applicant in the Project Work Plan.

Upload Files Or drop files

Detailed Project Budget and Budget Narrative
Applicants must fully complete and submit the required Excel Budget spreadsheet (Project Budget), which can be accessed below, as well as a Budget Narrative in the form of a word document. The Budget Narrative must clearly describe how funds will be allocated for each grant objective. Funds should be allocated based on the expected period of performance, no more than one year. The Budget Narrative must clearly explain the necessity and basis for all costs and correspond with the information included in the Project Budget and reflect only allowable costs that are consistent with the grant activities.

[Click Here To Download Budget File Template](#)

Upload Files Or drop files

Upload Files

Or drop files

oaafc_budget_template.xlsx

9 KB

1 of 1 file uploaded

Done

Upload Required Form, if applicable

Document

U.S. Internal Revenue Service Form 990, Return of Organization Exempt from Income Tax, if applicable

Organization's annual budget for the current year, including income and expenses

18. After you upload the file, it will be listed under the “Upload File” button. The image below shows what it looks like after you upload a file.

Proposed Project Work Plan
Applicant must submit a proposed Project Work Plan with any necessary milestones and deadlines for performing the grant activities. The Project Work Plan should be broken down by each grant objective and must include a proposed schedule for completing all activities, identification of potential milestones, deliverables and tasks to be performed by Applicant. Proposed roles and responsibilities of OAFc or CPA, beyond those stated in this NOFA, shall be clearly described by Applicant in the Project Work Plan.

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Upload Files

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Detailed Project Budget and Budget Narrative
Applicants must fully complete and submit the required Excel Budget spreadsheet (Project Budget), which can be accessed below, as well as a Budget Narrative in the form of a word document. The Budget Narrative must clearly describe how funds will be allocated for each grant objective. Funds should be allocated based on the expected period of performance, no more than one year. The Budget Narrative must clearly explain the necessity and basis for all costs and correspond with the information included in the Project Budget and reflect only allowable costs that are consistent with the grant activities.

Click Here To Download Budget File Template

•

Upload Files

Or drop files

oafc_budget_template.xlsx

Budget Narrative.docx

Reference Letters
Applicant may provide additional evidence of its demonstrated ability to perform the proposed services under the agreement by submitting up to three (3) reference letters from stakeholders or other persons with knowledge of Applicant's ability and past experience in performing the same or similar work. Reference letters are separate from the Letters of Commitment described in Section IV.B.1.g.

Upload Files

Or drop files

Upload Required Form, if applicable

Document

Upload Files

Or drop files

U.S. Internal Revenue Service Form 990, Return of Organization Exempt from Income Tax, if applicable

Upload Files

Or drop files

Organization's annual budget for the current year, including income and expenses

19. As you scroll farther down the page, you will see more of the required documents. Again, please refer to the NOFA for more details on how to complete each document.

	<div>Upload Files Or drop files</div>
Upload Required Form, if applicable	Document
<div>Upload Files Or drop files</div>	U.S. Internal Revenue Service Form 990, Return of Organization Exempt from Income Tax, if applicable
<div>Upload Files Or drop files</div>	Organization's annual budget for the current year, including income and expenses
<div>Upload Files Or drop files</div>	Organization's annual budget for the previous year, including income and expenses
<div>Upload Files Or drop files</div>	501 c3
<div>Upload Files Or drop files</div>	Criminal Certification: Applicants must download, complete, and sign and date the form, and then submit the form (and any attachments, if applicable) here.
	<div>Click Here To Download Criminal Conviction Certification form</div>
<div>Upload Files Or drop files</div>	Other

20. Eventually, you will see the Criminal Conviction Certification Form and the Conflict-of-Interest form. There is a downloadable template for you to use for both. Then, once you have uploaded all the required documents and forms, please review everything in the application before checking the box at the bottom. When you are ready, you can then submit the application by clicking “Submit” in the bottom right-hand corner. Once you click the “Submit” button, you will not be able to go back into the application to edit anything.

Upload Files

Or drop files

Criminal Conviction Certification Form.docx

Click Here To Download Criminal Conviction Certification form

Upload Files

Or drop files

Other

Conflict of Interest Form

Please download and upload the Conflict of Interest Disclosure Form found in the appendix of the NOFA which can be downloaded by clicking the button below.

Click Here To Download Conflict of Interest Form

Upload Files

Or drop files

Conflict of Interest Form.docx

Review and Submit

Please review all sections before submitting your application, ensuring all information has been provided and necessary attachments have been included. Grant Applicants will not be permitted to edit an application after submission but for minor administrative errors to be determined by CPA.


☒ I HEREBY CERTIFY that the information provided and uploaded in this form is complete, true and correct to the best of my knowledge.

Save & Exit


Back


Submit


21. Once you successfully submit your application it will bring you to the home page. This is also the page it will bring you to if you choose to save and exit and come back at a later time. It shows your completed applications as well as in-progress applications at the bottom of the screen and you can simply click “Continue” to start where you left off if you haven't yet submitted the application.

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Glenn Hegar
Texas Comptroller of Public Accounts

 **OAF**
OPIOID ABATEMENT FUND COUNCIL

 **GRANTS AND APPLICATIONS** REIMBURSEMENTS STATUS REPORTING AWARD MANAGEMENT

Help 

Funding Opportunity	Start Date	End Date	Action
Opioid Naloxone Distribution	4/10/2024 12:00 PM	12/31/2024 12:00 PM	Apply Now
Opioid K12	11/13/2024 12:00 PM	11/29/2024 12:00 PM	Apply Now
Opioid Peer to Peer	12/1/2024 12:00 PM	2/24/2025 12:00 PM	Apply Now
Opioid CORE	3/20/2025 12:00 PM	5/20/2025 5:00 PM	Start

Application Number	Category	Funding Opportunity	Status	Form Completion %	Last Updated	Action
IA-0000000938	CORE		In Progress	25%	4/2/2025 10:43 AM	Continue
IA-0000000936	CORE	CORE ST Region 7 Austin	Submitted	100%	4/2/2025 12:05 PM	View