

health principles to past trainings with practitioners.

(b) The extent to which the applicant has experience in planning, implementing and evaluating training programs. The applicant has included, as attachment A, a sample curriculum from a past training.

(c) The extent to which the applicant has experience in providing trainings or other related activities on the prevention of violence.

(d) The extent to which the applicant has experience providing consultation to supplement the knowledge and skills taught through the training modules.

(e) The extent to which the applicant has experience developing and disseminating written tools and other products, such as CD-ROMs or web-based tools, on public health principles.

(f) The extent to which the applicant documents the ability to provide CEU or CME credit.

2. Plan To Develop and Implement the Training Program—(25 Points)

(a) The extent to which the applicant has provided a plan that responds to the funding preferences indicated and includes (1) a clear description of the role and involvement of the steering committee; (2) the recruitment of expert faculty; (3) the steps to develop and implement individual training modules; (4) the process of selecting participants with priority given to CDC-funded grantees; (5) the overall objectives and evaluation plan of the project and (6) an adequate description of how it will provide logistical and administrative support for trainings including plans for conference facilities, staffing, travel arrangements and technical arrangements such as conference call lines and satellite and web capabilities.

(b) The extent to which the applicant provides a realistic plan given the available resources. The plan should include an estimated number of trainings the applicant can provide per year and the number of participants the applicant can serve through the various modes of delivery including but not limited to half-day to week-long workshops, seminars at conferences and Internet or audio conference-based series.

(c) The extent to which the applicant demonstrates creativity, flexibility and responsiveness to participant needs and CDC in planning the training modules. The applicant presents a training plan that is practical, relevant and considerate of the needs and resources in the field.

(d) The extent to which the applicant adequately addresses methods to be employed to provide feedback to CDC

on (1) needs and challenges expressed by the participants and (2) successes and lessons learned in developing, implementing and evaluating training modules.

(e) The extent to which the applicant adequately addresses methods to be employed to provide consultation to participants on the implementation of strategies that promote evidence based practice.

(f) The extent to which the applicant fully and adequately describes how it will develop and disseminate written tools and other useable products such as CD-ROMs or web-based tools to the field.

(g) The extent to which the applicant includes a plan that covers the three-year project period with a detailed timeline for year one. The timeline for year one should include plans for the development of the first training module in the first six months and implementation in the first nine months.

(h) The extent to which the applicant describes how it will incorporate public health principles with the prevention of violence against women, youth violence and suicide in the development and implementation of the training modules.

3. Plan To Integrate Public Health Principles and Theory into the Training Program—(25 Points)

(a) The extent to which the applicant has provided a training plan that reflects a clear understanding of public health principles, such as: Evidence-based program planning and development (*i.e.*, using data to drive program decisions); the ecological framework or other multi-level approaches to prevention; designing programs with a focus on primary prevention; population-based approaches; program evaluation; and the feedback process from practice to research (*i.e.*, using findings “from the field” to shape future research activities).

(b) The extent to which the applicant's training plan demonstrates a clear theoretical framework that guides the use of public health principles. Various theoretical models that can guide the training include but are not limited to diffusion of innovation, stages of change or social justice.

(c) The extent to which the applicant provides a clear description on how they will integrate public health principles and a theoretical framework to the development of the training program.

(d) The extent to which the applicant has provided a plan that: (1) Demonstrates an understanding of the principles of adult learning and skill mastery/adoption; and (2) applies these

principles to the development of the training modules.

4. Applicant's Capacity and Staffing—(15 Points)

(a) The extent to which the applicant demonstrates an existing capacity and infrastructure (including institutional experience, evidence of leadership, and current activities in the field) to manage the training program and carry out the required activities in the cooperative agreement. The applicant has included an organizational chart as Attachment B.

(b) The extent to which the applicant provides evidence that personnel assigned to key roles and having direct contact with participants have a proven track record of successfully conducting trainings for practitioners. The applicant has included, as Attachment C, curriculum vitae (CV) for each of the professional staff and faculty who will be involved in the project. This document should minimally include the person's name, educational background, work experience, relevant publications and awards, and percentage of time devoted to the project. Additionally, the applicant has included, as Attachment D, letters of support from faculty and consultants that the applicant has indicated will be utilized during the duration of the project. CVs and letter of support should also include if the person has expertise in prevention of violence against women, youth violence or suicide.

(c) The extent to which the applicant provides evidence that other assigned staff have appropriate technical and logistical skills to support the completion of the trainings and the continuation of training support. The applicant has included, as Attachment E, names and CVs of other staff who will be assigned to the project.

5. Collaboration—(10 Points)

(a) The extent to which the applicant demonstrates a willingness to collaborate with CDC in the planning, implementation and evaluation of the training program, and the development of training tools.

(b) The extent to which the applicant demonstrates experience in collaborating effectively with other organizations at the national, state, and local levels. Additionally, the applicant has included, as Attachment F, letters of commitment from organizations collaborating with the applicant on the activities in the cooperative agreement.

(c) The extent to which the applicant demonstrates an understanding of the impediments and facilitators of effective collaboration between organizations.