**Statewide Safety Education and Enforcement Program**

**2018 Application for Prior Participants**

North Carolina Department of Transportation

Division of Bicycle & Pedestrian Transportation

**Application Instructions**

Combine the application and support letters in one file attachment (PDF is preferred) and email it to Kristin Blank, UNC Highway Safety Research Center at [blank@hsrc.unc.edu](mailto:blank@hsrc.unc.edu).

If email is not possible, mail the application and support letters in one envelope to:

Kristin Blank

UNC HSRC

730 Martin Luther King Jr. Blvd.

CB # 3430

Chapel Hill, NC 27599-3430

The application preparer will receive an email confirming receipt of the application.

**Applications must be received by** **5:00 pm, March 23, 2018.**

**If you have any questions about the application, please contact Kristin Blank at blank@hsrc.unc.edu or (919) 843-7007.**

**Lead and Supporting Agency Information**

Communities typically involve several local organizations to conduct the Watch for Me NC program. Because of the program’s goals and activities, the active involvement of local law enforcement is vital, often along with a partner who can lead education and outreach activities if the police department does not have the capacity to fill that role. The education/outreach program components can be led by law enforcement (especially Public Information Officers), a planning department, a public health department, or some other organization with experience in public education campaigns. Below, please indicate your primary enforcement and education/outreach leads that will manage these aspects of the program and report activities to NCDOT/HSRC.

1. **Law Enforcement Point of Contact:**

Name:

Title:

Agency:

Email:

Work Phone:

Alternate Phone:

Mailing Address:

1. **Education/Outreach Point of Contact:**

*Must be a local government or college/university; can be the same as the law enforcement POC.*

Name:

Title:

Agency:

Email:

Work Phone:

Alternate Phone:

Mailing Address:

1. **Region served / Reached (*city/cities and/or county/counties*):**
2. **University Point of Contact (OPTIONAL):**

*If a college/university is supporting your effort but is NOT leading it, please list a university contact below so that they can continue to receive information about the program directly.*

Name:

Title:

College/University:

Email:

Work Phone:

Alternate Phone:

Mailing Address:

1. **Please list any other partnering organizations that will help support the program. These could include local governments, colleges/universities, police departments, health departments, hospitals, schools or school districts, neighborhood groups, advocacy groups, or others (OPTIONAL):**

*For each organization, include the agency name and contact person’s name and title:*

**Application Preparer Information (if different than above):**

*Please provide information about the person who prepared this application if different than the person named in Lead and Supporting Agency Information section.*

Name:

Title:

Agency:

Email:

Work phone:

**2018 Program Description**

**Describe your plans for participating in the 2018 Watch for Me NC program, including any changes you will make in comparison to what your community has done in years past. In your response, you may want to include:**

1. Any new partners or members of your local coalition
2. Education/outreach strategies and ways you will distribute Watch for Me NC materials
3. Specific law enforcement operation plans
4. Plans to engage with public works/engineering staff
5. Plans to coordinate with schools or implement school-based programs
6. Any changes to the way you will manage the program or coordinate with new or prior partners
7. Any new funding sources to leverage or supplement what is provided by NCDOT

(*Approx. 1000 words; please use space on following page)*