

The following application below can be accessed at <https://forms.gle/TfLU5UtGbCQqkD9s7>. Please fill out the online application which includes the following questions. The document cannot be saved so please have your answers ready when you access the online application. Email Patty Olmsted at [palmsted@morpc.org](mailto:palmsted@morpc.org) if you have any questions.

## ORGANIZATION FACT SHEET

Company name.

Company address.

Project authorizing agent name and title.

How many people does your company employ in MORPC's 15-county region?

How many employees will have the opportunity to benefit from the proposed project?

How many company sites are in MORPC's 15-county region?

If multiple locations, then please list the worksite locations with the number of employees included in the proposed project at each site.

Will your company be requesting an analysis of your employee data for sustainable commute recommendations?

## PROJECT NARRATIVE

Project name.

Describe the case for change, program design, and eligible participants.

Explain how the program will be administered (e.g., Gohio Commute tracking, HR tracking, benefits deployment, etc).

Total project budget amount.

Requested MORPC Commute Action Fund amount.

Detail the budget for this project. How will you be spending the funds?

Promotional advertising start date.

Program launch date.

Completion date.

What does success look like? Please explain the metric you will be using to consider your program a success.

How will your project fit into your company's internal communication activities?

How will this opportunity be communicated prior to roll-out?

How will this opportunity be communicated during the timeframe?

How will your leadership show support for the program?

What is the action plan after the pilot phase to continue the reduction of single occupancy vehicles (SOV) and/or increased mobility?

Project lead name and contact information.