

Climate Ready Tribes Initiative 2025-2026

REQUEST FOR APPLICATIONS (RFA)

FUNDING OPPORTUNITY OVERVIEW

The National Indian Health Board (NIHB) is offering a funding opportunity for Tribal governments engaging in climate adaptation work, including Tribal health departments, and Tribal health care facilities or health systems that have capacity and leadership roles in emergency preparedness, health surveillance, and public health outreach, and seek to build or strengthen their role in climate and health resilience. The intended outcomes are:

- Strengthen Tribal resilience and preparedness to anticipate, respond to, and recover from climate-related health and environmental challenges. Activities may include organizing simulation exercises or preparedness drills focused on climate-related emergencies such as extreme heat, flooding, or wildfires.
- Develop and implement climate-informed health and environmental strategies, such as creating a climate and health action plan or establishing programs and policies that integrate climate change considerations into Tribal health and environmental services.

NIHB will fund up to three (3) **Tribal governments, Tribal health departments, and/or Tribal health care facilities/health systems** in amounts of up to **\$20,000** each. Sub awardees can use these funds to support climate and health adaptation activities.

This RFA is supported by the CDC's National Center for State, Tribal, Local, and Territorial Public Health Infrastructure and Workforce (NCSTLTPHIW) as part of financial assistance awards totaling \$200,000, CDC PW24-0080 Category A: Tribal Health Department, with 100 percent funded by NCSTLTPHIW. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by NCSTLTPHIW, or the U.S. Government.

The completed application (Appendix A) is due at **11:59 PM Alaska Time on Friday, December 19, 2025**. The project period will run from approximately January 1, 2026 – July 10, 2026.

NIHB staff will host a

Pre-Application Webinar

Thursday, December 4 from 4:00 – 5:00 PM Eastern Time

[Register](https://us02web.zoom.us/meeting/register/g1ygtm9GTk2HeM4ZR7XChw) for the Pre-Application Webinar or copy and paste this address into your browser:
<https://us02web.zoom.us/meeting/register/g1ygtm9GTk2HeM4ZR7XChw>

Additional questions about this RFA may be directed to environmentalhealth@nihb.org.

NIHB will not answer any questions or provide any information that may provide an unfair advantage to any applicants. Responses to questions received after the webinar will be addressed on the FAQs on the NIHB website.

ELIGIBILITY

In order to be considered eligible for this funding opportunity the following two criteria must be met:

- Applicants must be a federally recognized Tribe or Tribal organization as defined in the Indian Self-Determination and Education Assistance Act, as amended.
- Applicants demonstrate a strong interest in, or a commitment to, at least one of the following climate-related activities:
 - Running prevention campaigns focused on climate-related health risks.
 - Integrating climate-related data into Electronic Health Records (EHRs) to track health trends.
 - Conducting preparedness drills for climate-related emergencies.
 - Developing or implementing climate and health adaptation plans.
 - Updating infrastructure to improve climate resilience (e.g., backup power for heatwaves or storms).
- Applicants are welcome to apply for other funding opportunities offered by NIHB.

PROJECT REQUIREMENTS

Selected sub awardees must:

- Sign and return a contract with NIHB that stipulates the amount of funds to be distributed, a schedule of funds distribution, Tribal points of contact, and deliverables. NIHB will furnish the contract after funding decisions are made and announced.
- Designate one main point of contact to serve as the project coordinator. Even if this person will not be leading all project activities, the Tribal partner must designate one individual with whom NIHB will directly communicate on all matters related to this project. This person will be responsible for submitting all deliverables, participating in conference calls, and completing evaluation activities.
- Permit NIHB to share project success, lessons learned and deliverables as part of a broader information dissemination strategy.
- Participate in monthly peer learning webinars or awardee conference calls, as well as scheduled individual phone calls with NIHB and possibly CDC staff to discuss progress, barriers, or any technical assistance that may be needed.
- Participate in project evaluation and technical assistance activities,

NIHB will provide selected sites with:

- Specified amount of funds.
- Technical assistance from NIHB for identified areas of need.
- Hosted webinars/conference calls, as appropriate, to support peer learning among Tribal partners.
- Connection to learning communities, national networks, existing technical assistance resources, and activities.
- Structured technical assistance events.

APPLICATION PROCESS

- 1) Participate in the [optional](#) pre-application webinar on Thursday, December 4, 2025.
- 2) Complete the application package (Appendix A). The following will comprise a complete application package:
 - Application, Section A: Tribe and Contact Information
 - Application, Section B: Application Narrative and Scope of Work
 - Signed letter of support from Tribal official
 - Other Supporting Documentation (optional)
- 3) Submit all sections of the project application (as a single Microsoft Word document), the letter of support, and all other additional materials to environmentalhealth@nihb.org, by Friday, **December 19, 2025, by 11:59 PM Alaska Time**. The subject line of the e-mail should read: **‘Climate Ready Tribes Application’**. No applications will be accepted by fax or postal mail. NIHB shall confirm the receipt of all applications.

SELECTION PROCESS

- All complete applications will be reviewed by a team of qualified public health professionals with experience working in Indian Country, public health, and/or tobacco control.
- Incomplete application packages will not be reviewed, nor considered for selection.
- NIHB shall notify all applicants of the status of their application by **December 23, 2025**.

Climate Ready Tribes Initiative 2025-2026

APPLICATION

Instructions: Fill out this application in its entirety by typing directly onto this document. Submit all sections of the application package (as a single Microsoft Word document), the letter of support, and additional materials, such as letter of support from a consultant or outside contractor to environmentalhealth@nihb.org, by **December 19, 2025, by 11:59 PM AKST**. The subject line of the e-mail should read: “Climate Ready Tribes Application”. No applications will be accepted by fax or postal mail.

SECTION A (required): TRIBE/ORGANIZATION AND CONTACT INFORMATION

Name of Tribe:	Click here to enter text.
Point of Contact Contact information for the individual to be contacted for notification of application status:	Name: Click here to enter text.
	Title: Click here to enter text.
	E-mail Address: Click here to enter text.
	Phone Number: Click here to enter text.
	Mailing Street Address: Click here to enter text.
	City, State, Zip Code: Click here to enter text.
Contact information for the Tribal Health official/director	Name: Click here to enter text.
	Title: Click here to enter text.
	E-mail Address: Click here to enter text.
	Phone Number: Click here to enter text.
Tribal health department/organization:	Name: Click here to enter text.
	Mailing Street Address: Click here to enter text.
	City, State, Zip Code: Click here to enter text.
Total Tribal Enrollment: Click here to enter text.	Resident population Click here to enter text.
Size of reservation (sq. mi.): Click here to enter text.	Approximate population size served by health department or organization(number): Click here to enter text. individuals
Name and Address where funding check should be sent should Tribe receive the funding	Pay the order of: Click here to enter text.
	Mailing Street Address: Click here to enter text.
	City, State, Zip Code: Click here to enter text.

Electronic signature of health official (typed is permissible):	Click here to enter text.
PROJECT COORDINATOR CONTACT INFORMATION	
Contact information for the individual to serve as Project Coordinator (if the same as above, then leave all fields blank). This person will be the main point of contact and be responsible for submitting all deliverables, participating in conference calls, and completing evaluation activities.	Name: Click here to enter text.
	Title: Click here to enter text.
	E-mail Address: Click here to enter text.
	Phone Number: Click here to enter text.
	Mailing Street Address: Click here to enter text.
	City, State, Zip Code: Click here to enter text.
Electronic signature of health official (typed is permissible):	Click here to enter text.

SECTION B (required): APPLICATION NARRATIVE AND SUPPORTING DOCUMENTATION

PROJECT SUMMARY (300 words maximum)

Select all activities your organization is currently engaged in or is interested in pursuing as part of this project:

- ☐ Conducting climate-related surveillance, prevention, or education campaigns.
- ☐ Integrating climate-related data into Electronic Health Records (EHRs).
- ☐ Conducting preparedness drills related to climate risks (e.g., heatwaves, floods, wildfires).
- ☐ Developing or implementing a climate and health adaptation plan.
- ☐ Updating health-related infrastructure to improve climate resilience (e.g., installing backup power).
- ☐ Other (*please specify*): _____

Please add a brief description of your project and how it will build or strengthen your Tribe's climate and health resilience.

[Click here to enter text.](#)

SUPPORTING DOCUMENTATION

Please select the corresponding box for all supporting materials being submitted with the application package (they can be added as additional pages to this document or as a separate PDF).

☐ Letter of Support from Tribal Health Official/Leader (mandatory). The signed letter of support must be from the Tribal health department's director or CEO, the chair of the Tribal Health committee, Tribal chairperson, or other Tribal official that oversees all or a portion of the public health activities. The letter should include the governing body's awareness of and/or commitment to the project's activities and support for completion of all deliverables.

☐ Letter(s) of Support from Other Entities (optional)

If the Tribal government, Tribal health department, or Tribal health care facilities/health system plans to use consultants or outside contractors for the completion of the work plan, a letter of support from that entity is highly encouraged.

☐ Indirect Cost Rate Agreement (if applicable)

☐ Copy of most recent audit with schedule of findings (can be submitted upon acceptance- however, this is required prior to signing a Memorandum of Agreement). Additional information may be requested by NIHB if the Audit is out-of-date or to address findings within the audit.

☐ Other (please identify: [Click here to enter text.](#))

The applicant may submit additional material to demonstrate their commitment and experience with this topic or existence of external collaborators, etc. However, these are not required for a complete application package.

SECTION C (required): AWARD BUDGET

The requested award amount should be appropriate to the level of effort required to engage in the proposed scope of work and produce the deliverables outlined in the next table.

These funds will be provided as agreements for goods and services, and will be paid as follows:

50% of the award will be paid at the beginning of the award cycle to begin activities included in the workplan. The balance of the award will be paid upon successful completion of all milestones and NIHB's receipt of the project deliverables and final report.

Funding should be assigned to each deliverable based on the estimated costs of completing that deliverable under the "Assigned Funding" column. Funds assigned to the "funding assigned" section of the work-plan proposal should add up to the requested total funding for the grant. Not all activities need to be assigned funds. Awardees will receive funds conditionally upon completing the deliverable.

Awards may not be used to: provide direct support to external individuals (e.g., delivery of patient care); construction projects, purchase large equipment; pay for food or beverages; support ongoing general operating expenses or existing deficits, endowment or capital costs; or support lobbying of any kind. Due to the size of the award, funds are not eligible to support indirect costs.

Awards can be used for: salaries and wages, contractors, equipment, supplies, educational materials, implementing training(s), or to complete other activities in the workplan and indirect costs (to claim indirect costs, the applicant organization must have a current approved indirect cost rate agreement established with the cognizant federal agency. If you are claiming indirect costs, a copy of the most recent indirect cost rate agreement must be provided with the application.

Expense Category	Item Description	Justification	Estimated Cost
Personal Salaries			
Fringe Benefits			
Equipment			
Travel			
Supplies			
Consultant Costs			
		Total Direct Cost:	
		Total Indirect Cost (10% max):	

	Total Cost:	\$20,000
The award is up to \$20,000 to complete the deliverables outlined in the work plan.		

SECTION D (required): PROPOSED SCOPE OF WORK

PROPOSED SCOPE OF WORK

Please complete the proposed workplan on the next page.

All sub awardees will have some aspects of their workplan and timeline the same and have been pre-filled in the workplan (in beige). There are blank fields available for the addition of activities specific to individual project needs.

Use one table per objective and number for each objective accordingly. Each outcome and activity for that objective will be listed in the same table. Add additional tables for additional objectives.

Add additional rows to the tables below as needed to list more activities. Be sure to represent the full scope of your proposed work.

Please note that selected sub awardees will have the following activities added to their MOA as requirements for this project:

- Activity 2.1: Enter into a memorandum of agreement with NIHB.
- Activity 2.2: Participate in regular check-in calls or meetings with NIHB staff.
- Activity 2.3: Submit a mid-year progress report to NIHB. The template will be provided.
- Activity 2.4: Submit a year-end report to NIHB that will include evaluation data.

CONTINUE TO WORK PLAN TABLES ON NEXT PAGE

TABLE 1. PROPOSED SCOPE OF WORK (some portions of the workplan are pre-filled, there are blank rows for additional activities to be added)

Objective 1:				
Expected Outcome 1:				
Activities	Deadlines	Deliverables	Person(s) Responsible	Assigned Funding
Activity 1.1:				
Activity 1.2:				
Activity 1.3				

Objective 2: Will participate in processes and evaluation to ensure effective and successful project implementation.				
Expected Outcome 2: Receive necessary support to ensure successful project implementation				
Activities	Deadlines	Deliverables	Person(s) Responsible	Assigned Funding
Activity 2.1: Enter into a memorandum of agreement with NIHB.	January 9, 2026	1 signed MOA	Click here to enter text.	
Activity 2.2: Participate in regular check-in calls or meetings with NIHB staff.	Monthly	Monthly calls	Click here to enter text.	
Activity 2.3: Submit a mid-year progress report to NIHB. The template will be provided.	April 24, 2026	1 mid-project report	Click here to enter text.	
Activity 2.4: Submit a year-end report to NIHB that will include evaluation data. The template will be provided.	July 24, 2026	1 final report	Click here to enter text.	

END OF APPLICATION

Before submitting, ensure that you have included the following sections and attachments:

<input type="checkbox"/> Application (As a single Word Document containing the Sections below) <ul style="list-style-type: none"> • Section A: Tribe/Organization and Contact Information • Section B: Application Narrative and Supporting Documentation • Section C: Award Budget (completed within workplan) • Section D: Proposed Scope of Work
<input type="checkbox"/> Signed letter of support from Tribal official (required- attachment)
<input type="checkbox"/> Indirect Cost Rate Agreement (if applicable- attachment)
<input type="checkbox"/> Financial Audit with schedule of findings (required- can be submitted following acceptance)
<input type="checkbox"/> Other Supporting Documentation (optional- attachment)

Submit all sections of the project application (as a single Microsoft Word document or pdf), the letter of support, and all other additional materials to environmentalhealth@nihb.org, **December 19, 2025, by 11:59 PM AKST**. The subject line of the e-mail should read: ‘**Climate Ready Tribes Application**’. No applications will be accepted by fax or postal mail. NIHB shall confirm receipt of all applications.