



# TEXAS DEPARTMENT OF AGRICULTURE COMMISSIONER SID MILLER

## 2026 RURAL HEALTH FACILITY CAPITAL IMPROVEMENT PROGRAM Request for Grant Applications (RFGA)

### Executive Summary

The Texas Department of Agriculture (TDA or the Department) is accepting grant applications for the fiscal year (FY) 2026 Rural Health Facility Capital Improvement Program (CIP). The purpose of this program is to provide funding for rural public and non-profit hospitals to make capital improvements to existing facilities, construct new health facilities, or to purchase capital equipment.

### Dates

Applications must be received before **Tuesday, June 2, 2026**, by 5:00 pm Central Time.

### Agency Division

Grants Office, [Grants@TexasAgriculture.gov](mailto:Grants@TexasAgriculture.gov)

### Assistance Listing Number

N/A – State Funded

### Key Elements

GRANT APPLICATION SYSTEM REQUIRMENTS	
<a href="#">Create a TDA-GO Profile</a> (see TDA-GO Access Instructions)	<b>48-72 hours before applying</b> Last-minute or day of application registrations are not guaranteed.
<b>UEI NUMBER</b>	<b>Not required for this grant (see new user instructions on PAGE 16)</b>
DEADLINES	
TDA Deadline to receive final application and all supporting materials through TDA-GO	<b>June 2, 2026, before 5:00 p.m. Central Time</b>
AFTER YOU APPLY	
Anticipated Award	July 2026 (or as soon thereafter as practical)
Anticipated Start Date of Project/Grant	August 1, 2026
End Date of Project	July 31, 2027

\* Text hyperlinks will direct you to applicable websites

**Note: Start early to ensure account setup and eligibility requirements are completed before the deadline.**

# 2026 RURAL HEALTH FACILITY CAPITAL IMPROVEMENT PROGRAM (CIP)

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**Please read all materials before preparing and submitting the application.** Failure to follow the instructions and requirements described in this RFGA may result in the disqualification of the application.

**Fraud Warning Disclaimer:** Please be aware that certain individuals might approach you by falsely presenting themselves as representatives of the Texas Department of Agriculture (TDA). Under this false pretense, they might try to gain access to your personal information or to acquire money by claiming that they are contacting you on TDA's behalf. Such fraudulent offers and claims are usually received via email, text message, phone, etc. These claims and offers are fraudulent and invalid, and you are strongly advised to exercise great caution and disregard such offers and invitations. You will not be contacted by TDA or the government to request payment before you receive a grant. Please report any attempts to TDA immediately. Fraud may be reported to the Office of the Texas Attorney General's Consumer Protection Division at <https://www.texasattorneygeneral.gov/consumer-protection/common-scams> or as directed in the "Reporting Fraud in State Government" section under General Information.

## Statement of Purpose

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The Rural Health Facility Capital Improvement Program (CIP) provides funding for rural public and non-profit hospitals to make capital improvements to existing facilities, construct new health facilities, or purchase capital equipment. The CIP Program is governed by Texas Government Code, Chapter 487, Subchapter H, and Texas Administrative Code (TAC), Title 4, Part 1, Chapter 30, Subchapter B, Division 5.

## Eligibility

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Eligible applicants for CIP include public and non-profit hospitals located in rural counties. For purposes of this program, the following definitions will apply:

(1) "Public hospital" means:

- (a) a general or special hospital licensed under Chapter 241 of the Texas Health and Safety Code;
- (b) that is owned or operated by a municipality, county, municipality and county, hospital district, or hospital authority;
- (c) that performs inpatient or outpatient services; **and**
- (d) that operates off government funding/public money (e.g., money collected from taxpayers and public contributions).

**Note:** A hospital or medical facility that is leased, licensed, managed, and funded by an individual, a group of people or a for-profit entity, or operated with private profit, is not considered a public hospital.

(2) "Rural County" means:

- (a) a county that has a population of 150,000 or less; or
- (b) a geographic area **not delineated as urbanized by the federal census bureau** that is located in a county with a population greater than 150,000

Per the 2020 Federal Census Bureau, Urban Area Criteria for the 2020 Census - Final Criteria - *An area will qualify as urban if it contains at least 2,000 housing units or has a population of at least 5,000.*

Link to check county census: [census.gov/quickfacts/table/PSTO45216/48](https://www.census.gov/quickfacts/table/PSTO45216/48)

In accordance with Texas Administrative Code, Title 4, Part 1, ch.30, subch. B, Div. 5, Section 30.201, a hospital that has received a grant under the Community Hospital Capital Improvement Fund from the Department of State Health Services (DSHS) may not also receive a grant under this program. This application is being submitted to TDA for Capital Improvement but comes from a different agency and source of funds.

## Funding Parameters

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Award amounts shall not exceed **\$100,000**.

Grant applicants are required to commit a minimum of **10% match of CIP funds requested**. For example, if requesting \$100,000 in CIP funding, an applicant must commit to a match of \$10,000 for a total project cost of \$110,000. Matching funds must be reflected within the grant application and must be associated with the same proposed grant project activities as the requested CIP funding.

Based on a Grant Recipient's request and justification, TDA may advance funds to the Grant Recipient in a **one-time payment** at the beginning of the grant term to meet working capital needs. An advance payment, if approved, will be limited to 25% of the grant award.

### Calculating CIP Grant Amount & Matching Funds

#### For total project costs less than \$110,000:

- Calculate by dividing the total project cost by 1.10. The resulting number will be the CIP grant amount. The difference between this number and the total project costs will be the amount of funds required to be matched.
- Example: Total Project Cost = \$95,000
- $\$95,000 / 1.10 = \$86,364$  (CIP Grant Amount)
- $\$95,000 - \$86,364 = \$8,636$  (Matching Funds)
- Note: 10% of \$86,364 (CIP grant amount) = \$8,636 matching funds

#### For total project costs equal to or more than \$110,000:

- Calculate by subtracting \$100,000 (the maximum CIP grant amount) from the total project costs. The resulting number will be the amount of funds required to be matched.
- Example: Total Project Cost = \$226,000
- CIP Grant Amount = \$100,000
- $\$226,000 - \$100,000 = \$126,000$  (Matching Funds)

### Certification of Project and Matching Funds

If awarded, CIP grantees receive funding on a cost-reimbursement basis for project costs incurred during the CIP grant period. On the Certification Page in the TDA-GO 2026 CIP application, the applicant will certify that the entire total grant project cost amount, both grant requested and matching funds, is secure and available by signing in the section provided.

## Proportionate Grant Reduction

The CIP grant requires matching expenditures in an amount equal to or greater than 10% of the grant amount awarded. When awarded, Grant Recipients will be held accountable for maintaining the required minimum 10% match of the grant amount awarded. In the event the Grant Recipient's match is reduced below 10%, the Department may proportionally reduce the amount of the CIP grant funds.

## Eligible Uses of Grant Funds

Allowable expenses include activities that further, or sustain, a hospital's ability to provide healthcare to include the following:

- a. **Life Safety Code Violation -**  
Violations may include: Unsafe flooring, food safety, new fire sprinkler system, upgrades to meet new code requirements. *Please include documentation of the safety code violation.*
- b. **Patient Care Project -**  
Must be nonexpendable personal property with a unit cost of more than \$10,000 and a useful life of more than one year. Ex: Mammography equipment, X-Ray machine, Lab equipment, ambulance, or community paramedicine van, etc.
- c. **Construction (Repairs/Remodeling/Maintenance) Project -**  
Includes, but is not limited to, contracts for any construction on the hospital or outbuildings, remodel projects, additions, etc. Ex: New roof, HVAC, clinic remodeling, window replacement, etc.
- d. **Other (contract for non-medical services) -**  
Designing, engineering, supervising, surveying, and other expenses incidental to the acquisition, construction, or improvements of new hospitals.

## Required Supporting Documentation (QUOTES)

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At the time of submission, each grant application must include documentation (such as quotes, estimates, or similar cost verification) that supports the costs associated with all proposed project activities. Applications that do not include this documentation will be disqualified from funding consideration.

All supporting documentation must meet the following criteria:

- Purchase or requisition orders are not acceptable as quotes.
- **Documentation must be no older than 6 mos. prior to the due date of the application.**

- Documentation containing an expiration date must have an expiration date that is past the application due date.
- Documentation must contain the Day/Month/Year.
- Documentation snipped from a website must contain a date the item was viewed on the website and be initialed by the hospital. A handwritten date and initial is acceptable.
- If using vendor, the quote must be on the vendor's form or letterhead. Anticipated project costs compiled by the hospital without an official vendor quote is not acceptable.
- For an in-house project done by the hospital's facility department estimated costs must contain dates within 6 months prior to the application due date and the facility manager's name and/or signature.
- Freight, shipping and installations costs are allowable expenses.
- Taxes are an allowable expense.
- Consumables such as test kits, reagents, etc. are **not allowable expenses**.
- Travel is **not an allowable expense**.
- Personnel time **is not an allowable** expense.
- Paid warranties, service agreements, service contracts, support contracts are only allowed to be funded for the length of the grant period of one year. If additional years are added the amount will be prorated to one year and subtracted from the application's submitted total project cost.
- Lease-to-own is not allowable unless guaranteed in writing that the purchase be completed within the grant year and the hospital will retain full ownership of the item purchased.

If awarded, CIP funds must be used only for the project activities described in the approved application. Any changes to the approved project scope, activities, or budget after an award has been made require prior written approval from the TDA. CIP utilizes funds from a permanent endowment established from the tobacco settlement for the State of Texas and authorized under Texas Government Code, Sections [487.558-.559](#). The CIP Program is governed by [Texas Government Code, Chapter 487, Subchapter H](#), and Texas Health & Safety Code, Chapter 241.

Requests for project changes must be submitted to TDA and approved through a formal amendment process in TDA-GO prior to implementing the change.

CIP funds **shall not** be utilized to reimburse an applicant for operating expenses, debt retirement, or recruitment/retention of providers.

In the event that available funding is not fully distributed, TDA may make upward adjustments to existing grant award amounts.

To utilize the maximum grant award amount, you may use the grant funds for more than one project. Ex. Project Type 1 - Replace Hallway flooring - \$35,000 + Project Type 2. Replace hospital beds -\$40,000 + Project Type 3. HVAC repair - \$25,000 = \$100,000. To choose Project Type for multiple projects in the application, select the project that is the most costly.

If a project is large and costly such as renovating or building a new facility, choose which portion of the project the grant will fund and submit supporting documentation for that portion. If no quotes are available, do not submit without contacting your Rural Health Liaison (RHL) or CIP Coordinator to discuss options.

If, during the process of completing the application, the hospital chooses to change the project type, verify that the project narrative and budget narrative describe the same project type prior to submission.

## Term of Funding or Duration of Projects

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A notice of grant award (NOGA) is anticipated to be made in July 2026. All approved grant projects have an anticipated start date of August 1, 2026 and must be completed by July 31, 2027.

## Program Contact Information

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Grant Management and Application Support - Monday – Friday 8:00 AM to 5:00 PM Central Time (CT). TDA staff are available to answer questions regarding this grant program and to provide clarifying information concerning this RFGA.

### Grant Management

Nicole Caston

Grants Specialist

Phone: (512) 463-7178

Email: [Grants@TexasAgriculture.gov](mailto:Grants@TexasAgriculture.gov)

### Technical Assistance – Rural Health Liaison (RHL)

- a. You may schedule time with your RHL to have them assist you in completing the application. Please try to do this as early as possible.
- b. Technical assistance for submitting the application is available from your RC until 5:00 pm on **June 2, 2026**.
- c. You may also contact the State Office of Rural Health (SORH) by email at [SORHTX@TexasAgriculture.gov](mailto:SORHTX@TexasAgriculture.gov).

## Application Requirements

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Applications will be accepted via TDA-GO, TDA's online Grant Application/Management system **and must be completed online** at <https://tda-go.intelligrants.com/>. Applications must be submitted by the deadline or the system will reject the grant application.

### *Form Requirements:*

1. **Application Contact Information**
  - a. Name of Authorized Official (must have a TDAGO Account) – **required**
  - b. Name of Application Preparer / Administrative Contact- **required**
  - c. Name of Additional Contact for Project – optional
  - d. County - **required**
  - e. Congressional Districts - **required**
2. **Application**
  - a. CIP Director – **required**
  - b. Eligibility Criteria – **required**
  - c. Application Questions 1-7 – **required**
  - d. Project Description – **required**
  - e. Project Personnel – **required**
3. **Budget**
  - a. Budget Table – **required**
4. **Support Documentation**
  - a. Vendor and/or Contractor Quotes/Estimates – **required**
  - b. Other Relevant Project Documents, if any
5. **Certification**
  - a. Certification by Authorized Official – **required**

See section entitled ***Application Form Guidance*** below for detailed instructions on each section of the application.

### **Commitment of Key Personnel**

To ensure the success of the project, key personnel directly impacted by the project should be included and involved with the planning and development of the project. This involvement is necessary to ensure the grant project is effectively implemented, that it will meet the identified needs, and guarantee its sustainability. For example, if an applicant has applied for grant funding to purchase infant warmers, the head of the nursery department would be consulted to certify the need of the equipment and its prolonged use.

*If a change in the scope of work is needed, please contact your regional coordinator immediately to discuss the change.*

## Budget Information

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1. **Payment.** To the extent funding has not been provided in advance, grant funds will be paid on a cost-reimbursement basis. Grant Recipient will be required to submit a **project completion report**, with required documentation, at the end of the grant period.

Payment requests must include sufficient documentation that details each expense. Acceptable documentation may include, but is not limited to invoices and receipts, as determined by TDA, in its sole discretion. Payment requests shall only be submitted by Grant Recipient to TDA for reimbursement after Grant Recipient purchases approved budget items.

All requests for reimbursement and documentation of expenditures shall be reported no later than 60 days after the completion of the grant project or after the expiration or termination of the grant agreement (Agreement), whichever occurs first.

2. **Matching.** The CIP grant requires matching expenditures in an amount equal to or greater than 10% of the grant amount awarded. For every expenditure documented, a Grant Recipient will be reimbursed a portion of the expense, ensuring the required match is always in compliance.
3. **Advanced Funding Payments:** This Grant Program may provide an advance of working capital to a Grant Recipient; however, the advance may **not exceed 25% of the total grant award**. Advanced funds must be used solely for eligible project costs and will require reporting and supporting documentation demonstrating that the funds were expended in accordance with the reimbursement eligibility requirements described in this “Budget Information” Section. Documentation must include sufficient expenditure records as detailed in Section 1.
4. **Pre-award Approval:** Pre-award approval allows an applicant or recipient to spend funds on allowable project activities before the grant agreement is fully executed, with the understanding that those costs may later be reimbursed once the award is finalized. Pre-award costs may be allowable for up to 90 days before the start date of the award and will be reviewed on a case-by-case basis. Pre-award spending is **at the applicant’s risk**. If the award is **not ultimately approved**, the applicant is responsible for those costs.

For pre-award costs to be allowable they must:

1. Be **necessary for the project**.
2. Be **allowable under the cost principles**.
3. Be **incurred during the approved pre-award period**.

4. Be **approved by the awarding agency if required.**
5. Be **included in the approved project budget.**

**5. Eligible Expenses.** Generally, expenses that are necessary and reasonable for proper and efficient performance and administration directly related to the grant project are eligible. Grant funds may not be used to supplant normal business costs, but instead must be used to cover the costs incurred for the approved proposed activities. The following are the only allowable expenses under this program:

- a. **Life Safety Code Violation Corrections** – Expenditures and actions necessary to address violations such as unsafe flooring, food safety, new fire sprinkler system, upgrades to meet new code requirements.
- b. **Patient Care Project** - Must be nonexpendable personal property with a unit cost of more than \$10,000 and a useful life of more than one year. Ex: Mammography equipment, X-Ray machine, Lab equipment, ambulance, or community paramedicine van, etc.
- c. **Construction (Repairs/Remodeling/Maintenance) Project** - Includes, but is not limited to, contracts for any construction on the hospital or outbuildings, remodel projects, additions, etc. Ex: New roof, HVAC, clinic remodeling, window replacement, etc.
- d. **Other (contract for non-medical services)** - Designing, engineering, supervising, surveying, and other expenses incidental to the acquisition, construction, or improvements of new hospitals.

**6. Ineligible Expenses.** All Grant awards are subject to the terms and conditions, cost principles, and other considerations described in the **Texas Grant Management standards. In addition, funds may not be used for the following:**

- a. Alcoholic beverages;
- b. Contributions, charitable or political;
- c. Depreciation;
- d. Entertainment;
- e. Expenses not listed in the project budget or that fail to meet the intent of the program;
- f. Gift Card/Certificates;
- g. Indirect expenses;
- h. Land;
- i. Payment of dividends, bonuses, or owner draws;
- j. Refinancing costs associated with existing debt;
- k. Tips/gratuities;
- l. Travel – including lodging, transportation, or meals; and
- m. Expenses that are not adequately documented during the payment request process, which would otherwise be eligible if properly documented.

## Deadline for Submission of Responses

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*Late or incomplete applications will not be accepted.*

Applicants must submit one complete, electronically signed grant application through the TDA-GO system to TDA by **5:00 p.m. on Tuesday, June 2, 2026** (see [submission instructions below](#)). Applications may not be supplemented after the submission deadline. It is the grant applicant's responsibility to ensure the timely receipt of the application and all required materials. The grant application must be submitted online through TDA-GO. Mailed, emailed, or faxed grant applications will not be accepted.

For questions regarding submission of the grant application and/or TDA requirements, please contact TDA's Grants Office by email at [Grants@TexasAgriculture.gov](mailto:Grants@TexasAgriculture.gov).

The online system will date and time stamp the submission for receipt documentation purposes. Click [here](#) for the submission link or copy and paste the following in your browser: <https://tda-go.intelligrants.com/>. An automated receipt email will be sent from the TDA-GO system indicating the grant application has been received.

## Late or Ineligible Applications

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- TDA will only consider grant applications received by the published due date, unless the deadline has been extended for all grant applicants.
- Applications submitted by ineligible grant applicants will not receive funding consideration.
- Applications that are not fully responsive to the RFGA will not be considered during the competitive review process.
- Determinations of late or ineligible grant applications are final and not subject to an appeal process.
- Problems with computer systems at the grant applicant organization, Adobe compatibility settings issues, failure to follow instructions in the RFGA, or failure to complete required registrations (e.g., Grants.gov, Sams.gov, UEI Number, etc.) by the submission deadline are NOT considered government system issues and do not constitute grounds for an appeal.
- The RFGA explains the time required to complete these registration requirements. It is the grant applicant's responsibility to ensure that enough time is committed to meet all registration and submission deadlines.
- All required letters and attachments must be appropriately attached to the TDA-GO application. Any supplemental information/files submitted outside TDA-GO (email, mail, hand delivered) will not be considered as eligible submissions.

- Failure to attach documents to the grant application package correctly are not considered system issues.

## Evaluation of Applications

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Following the grant application deadline, an administrative review will be conducted by TDA program staff to determine whether an applicant has adequately responded to this RFGA.

This is a competitive award. Not all applications will receive funding.

Complete grant applications will be reviewed by SORH pursuant to the factors outlined in Texas Administrative Code, Title 4, Part 1, Ch. 30, Section 30.202(a). Each grant application will be reviewed by the Department for completeness, relevance to the published RFGA, adherence to Department policies, general quality, technical merit, and budget appropriateness. Grant applications will also be scored and ranked utilizing the **scoring criteria listed below**.

### Scoring Criteria

All eligible grant applications received by the published deadline will be scored and ranked utilizing the following scoring criteria.

**1. The majority of CIP funding will be used for which type of project:**

- a. Life Safety Code Violation<sup>1</sup> – corrective actions- 4 pts.  
*Violations may include: Unsafe flooring, food safety, new fire sprinkler system, upgrades to meet new code requirements. Please include documentation of the safety code violation.*
- b. Patient Care Project - 3 pts.  
*Must be non-expendable personal property with a unit cost of more than \$10,000 and a useful life of more than one year. Ex. Mammography equipment, X-Ray machine, Lab equipment, ambulance, or community paramedicine van, etc.*
- c. Construction (Repairs/Remodeling/Maintenance) Project - 2 pts.  
*Includes, but is not limited to, contracts for any construction on the hospital or outbuildings, remodel projects, additions, etc. Ex: New roof, HVAC, clinic remodeling, window replacement, etc.*
- d. Other (contract for non-medical services) - 1pt.  
*Designing, engineering, supervising, surveying, and other expenses incidental to the acquisition, construction, or improvements of new hospitals.*

**2. Net revenue as a percentage of gross revenue<sup>2</sup>?**

- a. Less than 3% 5 pts.
- b. Greater than or equal to 3% 2 pts.

**3. Current days in net account receivables<sup>2</sup>:**

- a. Greater than 53 days 5 pts.
- b. Between 15-53 days 2 pts.
- c. Less than 15 days 0 pt.
- 4. **The hospital's current ratio of assets to liabilities<sup>2</sup>:**
  - a. Less than 1.25 5 pts.
  - b. Between 1.25 to 1.75 2 pts.
  - c. Greater than 1.75 0 pt.
- 5. **Current days cash on hand for hospital<sup>2</sup>:**
  - a. Less than 15 days 5 pts.
  - b. Between 15-60 days 2 pts.
  - c. Greater than 60 days 0 pt.
- 6. **Hospital's Operating Margin (operating income/total revenue)<sup>2</sup>:**
  - a. Less than 2% 5 pts.
  - b. Greater than or equal to 2% 2 pts.
- 7. **Previous CIP funding:**
  - a. Facility not awarded in 3 previous cycles -2025, 2024, 2023 25 pts.
  - b. Facility awarded in 2023, completed project 10 pts.
  - c. Facility awarded in 2024, completed project 1 pt.
  - d. Facility awarded in 2025 0 pt.

**Footnotes:**

1. **Life Safety Code Violation Corrective Actions** - To receive funding points in the “Life Safety Code Violation” category, the applicant must currently be in a code violation, must cite the code violation, and must provide actual violation documentation from the agency issuing the violation. If no safety code citation has been given but will be imminent if the issue is not corrected, then cite the code, and provide documentation and photographic evidence, if possible, that the facility will be placed in violation during the grant award period. If supporting documentation for the code violation or potential code violation is not provided, no points will be awarded for the life safety code category.
2. **Financial Data Certification** – In *Section I: Certifications and Authorizing Official Signature* of the CIP application, the applicant will certify that the financial data (Net Revenue as a Percent of Gross Revenue %, Current Days in Net Account Receivables, Current Ratio of Assets to Liabilities %, Current Days Cash on Hand, Operating Margin) provided in the application is correct and accurate by signing in the section provided.

**NOTE:** If a tiebreaker is required when awarding funds, SORH will use the county poverty rate of the county where the facility is located to determine the ranking order for these applications, with a higher poverty rate taking priority.

## Grant Recipient Responsibilities and Accountability

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Selected grant applicant(s) (Grant Recipient(s)), if any, will be responsible for the performance of the grant project supported by the Grant Program and for the results achieved. Each Grant Recipient shall monitor the day-to-day performance of the Grant Project to assure adherence to statutes, regulations, and grant terms and conditions. Grant Recipient(s) must carry out the grant activities described in the approved scope of work.

Grant Recipient(s) will be accountable for documenting the use of grant funds and must ensure funds are used solely for authorized purposes. Grant Recipient(s) must ensure:

- Funds are used only for activities covered by the approved grant project;
- Funds are not used in violation of the restrictions and prohibitions of the grant agreement or applicable law; and
- All budget and performance reports are completed in a timely manner.

Each Grant Recipient must ensure he or she has an adequate accounting system in place and good internal controls to ensure expenditures and reimbursements are properly reported to TDA. Complete records relating to the grant project, including accounting records, financial records, progress reports and other documentation, must be maintained for four (4) years after the conclusion of the grant project or longer if required by TDA.

## Reporting Requirement

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Grant Recipients will be required to submit a Project Completion Report (PCR) at the completion of the project, but no later than 60 days upon the termination date of the grant agreement. **Grant Recipients who complete their project at any time during the grant year may submit their project completion report at any time prior to the PCR due date.**

As part of TDA's ongoing monitoring of grant funds, Grant Recipients must regularly demonstrate progress toward achieving grant project goals. Failure to comply with reporting requirements may result in the withholding of requests for reimbursement and/or termination of the grant award.

A PCR will be submitted in the TDA-GO system. Selected grant applicants will be provided with guidance in post-award instructions.

## General Information

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Selected applicants will receive an electronic NOGA and a grant agreement from TDA (Agreement). The NOGA is not legally binding until the Agreement is fully executed.

### Applications

TDA reserves the right to negotiate individual elements of any grant application and to reject any and all grant applications. TDA is not liable for costs incurred by a grant applicant in the development, submission, or review of the grant application; or costs incurred by a grant applicant prior to the effective date of the Agreement unless prior approval is given by TDA, see Pre-award approval, page 7.

### Funding

TDA reserves the right to fund grant projects partially or fully. Where more than one grant application is acceptable for funding, TDA may request cooperation between Grant Recipients or revisions/adjustments to a grant application in order to avoid duplication and to realize the maximum benefit to the state.

### Right to Amend or Terminate Grant Program

TDA reserves the right to alter, amend, or clarify any provisions, terms, or conditions of the Grant Program or any grant awarded as a result thereof, or to terminate this Grant Program at any time prior to the execution of an Agreement, if TDA deems any such action to be in the best interest of TDA and of the State of Texas. The decision of TDA will be administratively final in this regard.

### Proprietary Information/Public Information

In the event that a public information request for the grant application is received, TDA shall process such request in accordance with Texas Government Code, Section 552.305. Applicants are advised to consult with their legal counsel regarding disclosure issues and to take appropriate precautions to safeguard trade secrets or any other proprietary information.

All grant applications submitted under the Grant Program are subject to release as public information, unless the grant application or specific parts of any such grant application can be shown to be exempt from disclosure under the Texas Public Information Act, Texas Government Code, Chapter 552.

### Conflict of Interest

The grant applicant is required to disclose any existing or potential conflicts of interest relative to this Grant Program. Failure to disclose any such relationship may result in the grant applicant's disqualification or termination of any resulting grant agreement.

### Additional Information

- Assistance is available in English and Spanish. Please call (512) 463-7448 to request assistance.
- Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.), should contact TDA. Individuals who are deaf, hard of hearing or have speech disabilities may contact TDA through the Federal Relay Service at (800) 877-8339 or Texas Relay 7-1-1. Additionally, program information may be made available in languages other than English.

### **Reporting Fraud in State Government**

- TDA is committed to promoting a culture of integrity within the agency. As part of the agency’s commitment, TDA has instituted a Fraud, Waste, and Abuse Prevention Program to provide its employees with the necessary guidance and support to prevent, detect, and eliminate fraud, waste, and abuse within the agency. TDA’s Fraud, Waste, and Abuse Prevention Program complies with Executive Order RP-36 of July 12, 2004.
- Reports of suspected fraud or illegal activities involving state resources may be made by:
  - contacting the Texas State Auditor's Office (SAO) Hotline by calling (800) TX-AUDIT (892-8348);
  - visiting the SAO’s website at (<https://sao.fraud.texas.gov/ReportFraud/>);
  - contacting TDA by calling the TDA Fraud Prevention Hotline at (512) 475-3423 or (866) 5-FRAUD-4 (866) 537-2834; or
  - sending a written complaint to:
    - by mail: Texas Department of Agriculture  
1700 N. Congress Avenue  
Austin, TX 78701
    - by email: [fraud@texasagriculture.gov](mailto:fraud@texasagriculture.gov).

### **Compliance Information**

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1. Grant Recipients must comply with TDA’s reporting requirements and financial procedures outlined in the grant agreement. Any delegation by a Grant Recipient to a subcontractor regarding any duties and responsibilities imposed by the grant award must be approved in advance by TDA and shall not relieve the Grant Recipient of his/her responsibilities to TDA for performance of those duties.
2. Grant Recipients must remain in full compliance with state and federal laws and regulations. Non-compliance may result in termination of the grant award or ineligibility for reimbursement of expenses.
3. Grant Recipient must keep separate records and a bookkeeping account (with a complete record of all expenditures) for a grant project. Records shall be maintained

for a minimum of four (4) years after the completion of the grant project, or as otherwise agreed upon with TDA. If any litigation, claim, negotiation, audit or other action is initiated prior to the expiration of the four-year retention period, then all records and accounts must be retained until their destruction is authorized in writing by TDA. TDA and SAO reserve the right to examine all books, documents, records, and accounts relating to the grant project, including all electronic records, at any time throughout the duration of the grant agreement until all litigation, claims, negotiations, audits or other action pertaining to a grant is resolved, or until the expiration of the four-year retention period or a final judgment in litigation, whichever is longer. TDA and SAO shall have access to all electronic data or records pertaining to the grant project; paper or other tangible documents or records, including the physical location where records are stored; and all locations related to grant project activities.

4. If a Grant Recipient has a financial audit performed during the time Grant Recipient is receiving grant funds from TDA, upon request, TDA shall have access to information about the audit, including the audit transmittal letter, management letter, any schedules, and the final report or result of such audit.
5. Grant Recipients must comply with Texas Government Code, Chapter 783 (Uniform Grant and Contract Management Act) and the Texas Grant Management Standards.

(left blank intentionally)

## TDA-GO New User Instructions

---

Click here to access the TDA-GO website or copy and paste the following in your browser:  
<https://tda-go.intelligrants.com/>

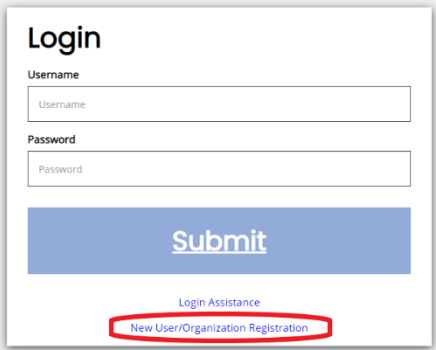
- **Log in assistance for forgotten username or password – see page 22**
- **Returning users may log in with your current username and password and move to page 21 of these instructions.**

### Step 1: Registering a New User in TDA-GO

The following describes how to access the TDA-GO online grant system by setting up a new user. The applicant must set up a new user account to access the Grant application. **THIS MUST BE DONE 48-72 HOURS PRIOR TO SUBMITTING AN APPLICATION!**

#### Overall Steps to Getting Access:

- Complete New User Registration
- TDA will approve New User Registration
- New User will receive email of approval
- Once approved, New User can access and complete grant application



The screenshot shows a login form with the following elements:

- Title: Login
- Username field: A text input box labeled 'Username'.
- Password field: A text input box labeled 'Password'.
- Submit button: A blue button with the text 'Submit'.
- Links: Two links at the bottom: 'Login Assistance' and 'New User/Organization Registration'. The 'New User/Organization Registration' link is circled in red.

To register a New User, complete the following steps:

- 1) Go to the TDA-GO website: <https://tda-go.intelligrants.com/>
- 2) Click on the **New User/Organization Registration** link found in the Login box on the right side of the webpage.
- 3) Fill in the required fields and any optional fields desired. See Legend below for specific field instructions. Click on the **Register** button.

## Legend

**First Name (Required)**

**Last Name (Required)**

**SAM Number/ UEI (Required)** – Enter all zeros (e.g. 000000000000) in this box. **DO NOT CLICK SEARCH**

**Organization (Required)** – Enter Hospital Name

**Title** – Enter your Job Title

**Street Address (Required)**

**State (Required)**

**County (Required)**

**City (Required)**

**Zip Code (Required)**

**Email (Required)**

**Phone (Required)**

**Username (Required)** – the username the registering user wishes to register for. **Use your email address.**

**Password/Verify Password (Required)** – the password the registering user (applicant) wishes to register for.

**Notes** – Enter **“CIP Applicant”**

The screenshot shows a 'New User Registration' form with the following fields and labels:

- Page Instructions for the registration modal
- First Name
- Middle Name
- Last Name
- Prefix
- Suffix
- Title (Example: Young Farmer Grant)
- SAM Number (UEI Number) with a Search button
- FEIN
- Organization
- Address
- Address 2
- City
- State
- Zip Code
- County
- Email
- Phone
- Phone 2
- Fax
- Cell Phone
- Website
- Username
- Password
- Verify Password
- Notes (Example: Young Farmer Grant)
- Register button

Red arrows point from the legend to the SAM Number (UEI Number) field and the Username field.

4) **Click Register.** The registration for the New User will be sent to TDA staff for approval. You will receive an email indicating approval within 24-48 hours. After approval, the New User can log on and access the TDA-GO platform.

**NOTE: If a user attempts to access the system before they have been approved, the system will show their password as invalid.**

You will receive an email confirming registration approval. Once for the organization and another for the user.

## Mindy Fryer TDA GO! Registration Approved

TDA-GO@IntelliGrants.com(TDA-GO@IntelliGrants.com via ama

Reply Reply All Forward

To Mindy Weth Fryer

Retention Policy Inbox (30 days)

Expires 1/12/2022

Mon 12/13/2021 10:12 AM

The actual sender of this message is different than the normal sender. Click here to learn more.

**WARNING:** This email originated from outside of the Texas Department of Agriculture email system. DO NOT click links or open attachments unless you expect them from the sender and know the content is safe.

The user Mindy Fryer has been approved for TDA GO! To access the system please navigate to <https://tda-go.intelligrants.com>.

### **TDA-GO User Roles:**

#### **Authorized Official (AO) for Applicant Organizations**

- Who: Person authorized to enter into legal agreements on behalf of the organization
- Created By: Initially, the AO is created when the Organization account is established. Additional AO's may be added once Organization account is approved.
- TDA-GO tasks:
- Create new user accounts for organization members
  - Initiate an application
  - Complete all required application fields
  - Certify and Submit an application
  - Execute Grant Agreements
  - Initiate/Complete/Submit Payment request/Performance reports

#### **Project Director (PD) for Applicant Organizations**

- Who: Personnel involved in grant administration
- Created By: The organization's AO creates and manages PD users
- TDA-GO tasks:
- Create new user accounts for organization members
  - Initiate an application
  - Complete all required application fields
  - Initiate/Complete/Submit Payment request/Performance reports

### **Step 2: Adding Users and Assigning Roles**

Once the Authorized Official has completed set up of the organization in TDA-GO, additional personnel may be added to the organization and be granted access to TDA-GO. Carefully review the role definitions below and refer to the appropriate instructions for each role. See [TDA-GO roles](#) below:

#### **Authorized Official (AO) for Applicant Organizations**

- Who: Person authorized to enter into legal agreements on behalf of the organization.
- Created By: Initially, the AO is created when the Organization account is established. Additional AO's may be added once Organization account is approved.

- TDA-GO tasks:
- Create new user accounts for organization members
  - Initiate an application
  - Complete all required application fields
  - Certify and submit an application
  - Execute Grant Agreements
  - Initiate/Complete/Submit Payment request/Performance reports/Amendments

### **Project Director (PD) for Applicant Organizations**

Who: Personnel involved in grant administration

Created By: The organization's AO creates and manages PD users

- TDA-GO tasks:
- Create new user accounts for organization members
  - Initiate an application
  - Complete all required application fields
  - Initiate/Complete/Submit Payment request/Performance reports

### **Consultant/Researcher (C/R)**

Who:

- A third-party person assisting with a grant application; or
- Employee/researcher/staff/PIs/professors assisting with a grant application/proposal that does not need to see every grant application for the organization

Created By: The C/R registers individually as a New User. The AO ***DOES NOT*** create C/R users. TDA will assign this user to the organizations documents once an AO or PD starts the application

- TDA-GO tasks:
- Complete all required application fields
  - Initiate/Complete Payment request/Performance reports

NOTE: This role cannot submit an application on behalf of the applying organization.

## TDA-GO Login Assistance

---

The TDA-GO portal allows the user to request a password reset be generated and sent to their email address. To do so, complete the following steps:

- 1) Click on the Login Assistance link.
- 2) Enter the username and email address. Click on the Email button. A reset link will be sent to the email address supplied.



The screenshot shows a web form titled "Forgot Password". It contains two text input fields: "Email" and "Username". Below the "Username" field, there is a link labeled "Forgot Username". At the bottom right of the form, there are two buttons: a white "Clear" button and a green "Email" button.

- 3) An email like the following will be sent to reset your password:

---

**From:** [TDA-GO@IntelliGrants.com](mailto:TDA-GO@IntelliGrants.com) <[TDA-GO@IntelliGrants.com](mailto:TDA-GO@IntelliGrants.com)>  
**Sent:** Monday, June 26, 2023 1:01 PM  
**To:** Mindy Weth Fryer <[Mindy.Fryer@TexasAgriculture.gov](mailto:Mindy.Fryer@TexasAgriculture.gov)>  
**Subject:** Password Reset

**WARNING:** This email originated from outside of the Texas Department of Agriculture email system. DO NOT click links or open attachments unless you expect them from the sender and know the content is safe.

You have requested a password reset. Please use the link below reset your password. It will expire in 15 minutes.  
[Reset Password](#)

If you did not request this reset and would like to invalidate and cancel the request, please click [here](#).

- 4) At that point, the user will be brought directly to the Profile page and requested to create a new password into the Password and Confirm Password fields are available.

**NOTE:** The password field is case sensitive and will not recognize characters of the wrong case. Precision when entering the password into the password field will decrease the risk of error messages being generated by the system.

# TDA-GO Access Instructions

## Step 1: Accessing Grant Opportunity

Log in with your set username and password. After logging in, your organization’s Dashboard will appear (Figure 1).

- **My Tasks** are documents/applications that are in progress.

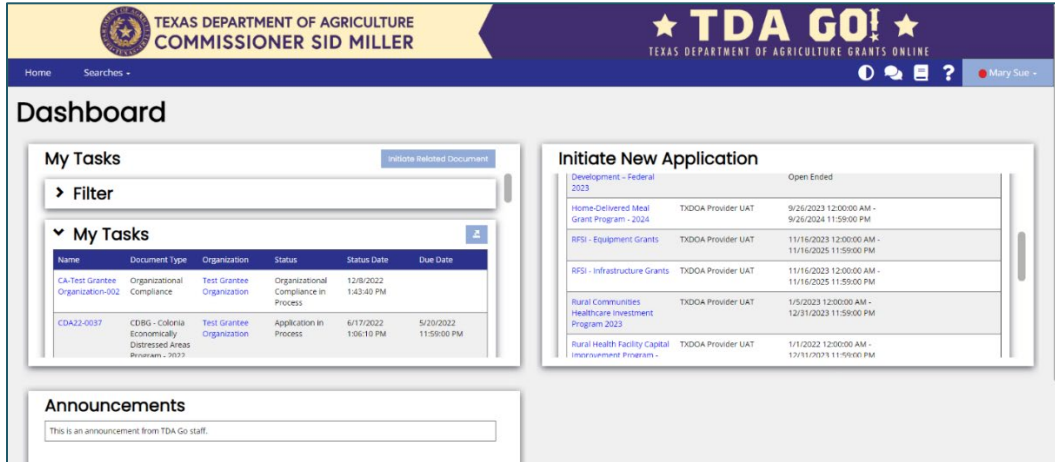


Figure 1. Landing page after logging in

When you get to the dashboard, please **DO NOT** initiate a new application. An application has already been started for you—it is located under “My Tasks” on the left-hand side (Figure 2).

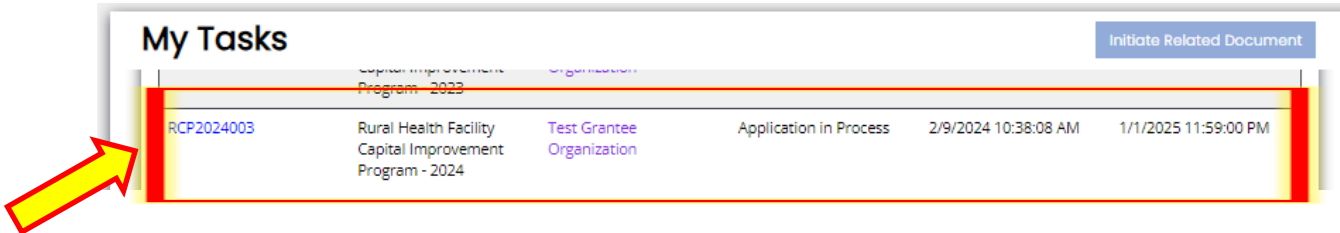


Figure 2. CIP Application located under “My Tasks”

## Actions you can take

### Checking Organization Profile Information

On the landing page, you can check your profile by clicking on your name in the top right corner. Under My Tasks, you can also view your Organization's Profile by clicking on its name.

- o Much of the information in BOTH of these profiles have been prefilled for you.  
**Please click through ALL fields of EACH profile to check for accuracy. (Figure 3).**

**Organization Information**

Instructions:

- From this page, you can edit the organization's General Information, Contact Information, and Business Address.
- To view current organization members or add a new organization member, click the option for "Organization Members" in the left side navigation.
- To edit a organization's currently designated category, click the option for "Organization Categories" in the left side navigation.

**Information**

**General Information**

Name	Identifier
Test Grantee Organization	TGO
EIN/TIN	SAM Number
12-3456789	
DUNS #	Search
12-345-6789	

Contact Information

TEXAS DEPARTMENT OF AGRICULTURE  
COMMISSIONER SID MILLER

IDA GO! TEXAS DEPARTMENT OF AGRICULTURE GRANTS ONLINE

Home Searches - Mary Sue - Profile Messages Log Out

**Person Information**

**Profile**

Basic Information

First Name	Middle Name	
Mary	A	
Last Name	Prefix	Suffix
Sue	Mrs.	Jr.
Title	Authorized Official	

Primary Phone: (817) 111-1234 ext. 1 Secondary Phone:

Figure 3. Person and Organization Profile

When you have finished, click on **HOME** to navigate back to "My Tasks."

## To Access Grant Application for your Organization

Click on the 2026 Rural Health Facility Capital Improvement Program Application grant number.

## Document Landing Page

After the application is selected, the Document Landing Page will appear ([Figure 4](#)).

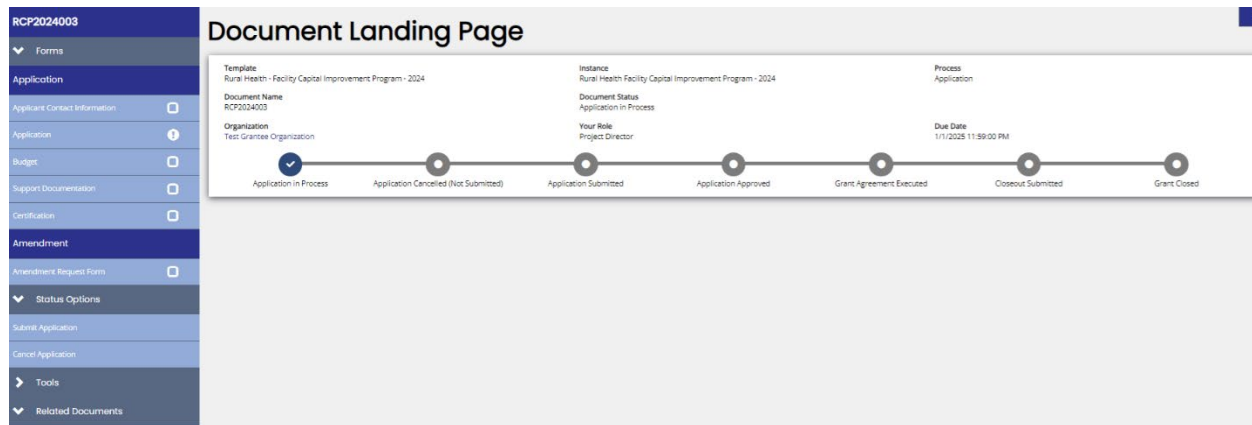


Figure 4. Document Landing Page

The left column has your unique Grant Project Number at the top, then four drop down menus: **Forms**, **Status Options**, **Tools**, and **Related Documents**.

- **Forms** is a list of required information including Applicant Contact Information and CIP Application.
- **Status Options** is where the application can be submitted or cancelled.
- **Tools** include Add/Edit People who can access the application, Status History, Attachment Repository, Modification Summary, Document Validation, Notes, and Print Document ability.
- **Related Documents** is not applicable to the application submission process. You will not need this function to submit your application.

(Left blank intentionally, see next page for Application Specific Instructions)

# Application Form Guidance

The following section provides additional guidance regarding sections of the application. As a reminder, this is a **competitive grant application**; TDA staff are available to answer questions regarding the program and to provide clarifying information concerning this RFGA.

However, TDA staff will not perform reviews of any grant proposals prior to the application deadline.

## Step 1: Complete Application Contact Information

Expand the **Forms** drop down menu and select **Application Contact Information** ([Figure 5](#)).

Figure 5. Application Contact Information location

**As with your profile, much of this section has been prefilled.** Please check for accuracy. There are additional blank fields where you may add other staff contacts. See Appendix (page 25) for definitions of roles.

- NOTE: When you are completing this section, some fields may autofill. Please make sure any of this information is accurate.

**NOTE:** All required fields are marked with a \*. An error message will appear and the application may not be submitted if these required fields are not filled out ([Figure 6](#)).

Figure 6. Example of Required Fields

After completing the form, click the **Save** button in the top right hand corner (Figure 7). After clicking the **Save** button, if any required sections are missing, an error message will appear (Figure 8).

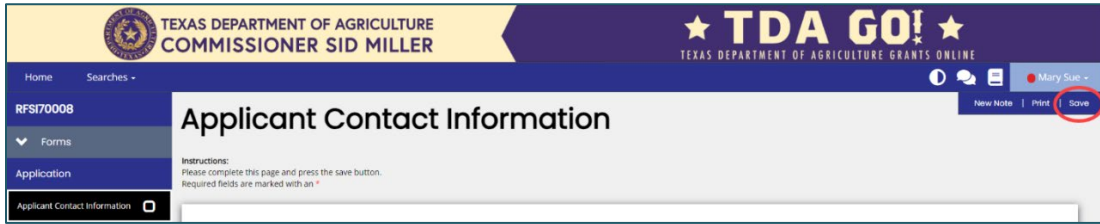


Figure 7. Regularly save your work by clicking the save button in the upper right hand corner

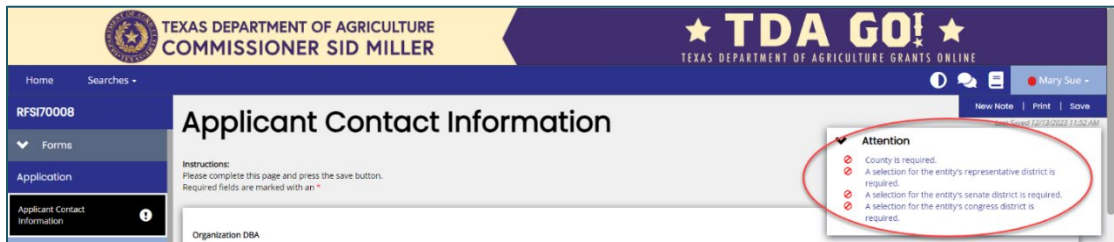


Figure 8. Error Message of missing required information

After you have clicked Save, toggle to the “Application” tab.

---

## Step 2: Application

---

This is the main body of the application (Figure 9). Fill out the required fields. Once again, some information may be prefilled for you, but please verify its accuracy. If there are any errors, please notify your RC immediately.

Figure 9. CIP application page

Please complete all required sections. If you do not, you will not be able to certify and submit your application.

- **NOTE:** if there is a field that requires text, and you have none to enter, please put N/A.

### Application Questions:

Review the eligibility criteria carefully (see page 1) to answer the following questions in this section. If you have any questions, contact your rural health coordinator (see page 13).

**QUESTION 1:** Select the type of project for which you are requesting funding.

- Select only one type.
- To utilize the maximum grant award amount, you may use the grant funds for more than one project.
- **If your project is composed of more than one type, select the type in which the majority of the funds are being requested.** (Example: Patient Care Project Including Equipment or Patient Transportation = \$27,000, Construction = \$45,000: select Construction.) See for “Eligible Use of Grant Funds” for additional clarification.
- If a large and costly project such renovating or building a new facility, choose which portion of the project the grant will fund and submit supporting documentation for that portion.

- If during the process of completing the application the hospital chooses to change the project type, verify that the project narrative and budget narrative in the application describe the same project.

**QUESTION 2:** Provide the applicant's financial information based on the **most recent** fully completed audit/financial report (may be done by third party or in-house).

- If a negative number, enter a negative sign.

**QUESTION 2:** Net Revenue as Percent of Gross Income

- **Net revenue** is the combined actual revenue (patient services and non-patient care revenue such as supplemental funds and tax subsidies, grants, etc.)
- **Net revenue as a percent of gross** is calculated by taking net revenue (numerator), divided by gross revenue (denominator), and multiplying by 100.
- **Gross revenue** is all income accounted for on the income statement without consideration for any expenditures from any source.

**QUESTION 3:** Current Days in Net Account Receivables

**QUESTION 4:** Current Ratio of Assets to Liabilities

- current assets/current liabilities

**QUESTION 5:** Current Days Cash on Hand

**QUESTION 6:** Operating Margin

- Operating Income/Total Revenue

**QUESTION 7:** Select the answer that describes previous CIP funding for the applicant facility.

- Facility was not awarded in 2025, 2024, 2023
- Facility was awarded in 2023, completed project
- Facility was awarded in 2024, completed project
- Facility was awarded in 2025

# Complete the Project Narrative Section

## Project Narrative

### Project Description/Project Need \*

Provide a brief project summary that includes the following:

- Item(s) to be purchased: Identify the Equipment, Contract for Non-medical Services, Patient Transportation, or Construction included in the project that meet the goals of the Project Type in Question1.
- Project need: Explain why the purchase is necessary and the issue or gap it will address.
- Implementation activities: Describe the steps the hospital will take to acquire, install, or implement the item(s) during the project period.

0 of 2000

### Project Personnel

Provide a brief summary of hospital personnel who will be directly involved in the implementation the project and their roles. If applicable, support from other organizations may also be included. \*

0 of 2000

---

### Step 3: Budget

---

#### **STEP 1 - Enter the Total Project Costs**

In the first field, please enter the total project cost and hit “**Save.**” The table will calculate your match amount.

**Step 1 Enter the Total Project Costs**

Click **Save** to calculate Capital Improvement Program Maximum Grant Amount and Match Amount

Total Project Cost	<input type="text" value="\$"/>
Maximum Requested Grant Amount	\$
Match Amount	\$

#### **Step 2 Assign Costs to Budget Categories**

Enter the appropriate figures in each field. Place a 0 (zero) in each field you do not use. **There must be a digit in each field**, or the application will show an error and you will not be able to submit.

##### Step 2 Assign Costs to Budget Categories

Based on the Maximum Grant Amount and Match Amount calculated above, assign costs to the requested category(ies). For the form to save properly each field must contain a digit.

Project Type	Grant Funds Requested	Match Amount	Total
Equipment	<input type="text" value="\$ 0.00"/>	<input type="text" value="\$ 0.00"/>	\$
Contract for Non-medical Services	<input type="text" value="\$ 0.00"/>	<input type="text" value="\$ 0.00"/>	\$
Patient Transportation	<input type="text" value="\$ 0.00"/>	<input type="text" value="\$ 0.00"/>	\$
Construction	<input type="text" value="\$ 0.00"/>	<input type="text" value="\$ 0.00"/>	\$
<b>Total Direct Costs:</b>	\$	\$	\$

### **Step 3: Enter Budget Narrative**

- In the table below provide line-itemed information for the **quoted amount** and reflect the quotes/estimates provided by vendors and/or contractors associated with the Capital Improvement Program project.

#### **Budget Narrative**

- In the table below provide line-itemed information for the **quoted amount** and reflect the quotes/estimates provided by vendors and/or contractors associated with the Capital Improvement Program project.
- **Vendor and equipment quotes, and/or contractor estimates, etc. MUST be uploaded in the Support Documentation Section of this application.**
- **Quotes must be less than 6 months old as of the application due date. Purchase Orders are not acceptable as quotes. \***

Item	Project Type (Drop Down)	Total Quote Amount
<input type="text"/>	<input type="text" value="v"/>	\$ <input type="text"/>

- **Vendor and equipment quotes, and/or contractor estimates, etc. MUST be uploaded in the Support Documentation Section of this application.**
- **Quotes must be less than 6 months old as of the application due date and must not expire before the application deadline. Purchase Orders are not acceptable as quotes. \***

### **Step 4: Enter Justification for need of partial advance of funds**

Does this project require a partial advance of funds? If yes, provide a justification. If no, enter N/A. See Application Guide for maximum amount details.

Click **Save** and the **Next Form** button to be taken to the Supporting Documentation page, or click the Certification navigation tab on the left side of the screen.

---

## Step 4: Supporting Documentation

---

It is **required** that an applicant provides supporting documentation of project costs (i.e. equipment/construction quotes, estimates, and other relevant supporting documentation).

- Purchase or requisition orders are not acceptable as quotes.
- **Documentation must be no older than 6 mos. prior to the due date of the application.**
- Documentation containing an expiration date must have an expiration date that is past the application due date.
- Documentation must contain the Day/Month/Year.
- Documentation snipped from a website must contain a date the item was viewed on the website and be initialed by the hospital. A handwritten date and initial is acceptable.
- If using vendor, the quote must be on the vendor's form or letterhead. Anticipated project costs compiled by the hospital without an official vendor quote is not acceptable.
- For an in-house project done by the hospital's facility department estimated costs must contain dates within 6 months prior to the application due date and the facility manager's name and/or signature.
- Freight, shipping and installations costs are allowable expenses.
- Taxes are an allowable expense.
- Consumables such as test kits, reagents, etc. are **not allowable expenses**.
- Travel is **not an allowable expense**.
- Personnel time **is not an allowable** expense.
- Paid warranties, service agreements, service contracts, support contracts are only allowed to be funded for the length of the grant period of one year. If additional years are added the amount will be prorated to one year and subtracted from the application's submitted total project cost.
- Lease-to-own is not allowable unless guaranteed in writing that the purchase be completed within the grant year and the hospital will retain full ownership of the item purchased.

To add these documents, click on Support Documents tab and click **Select** (Figure 11). Search for the document you want and upload it to this section.

**Supporting Documentation** New Note | Save

**Instructions:**  
Please upload the following documents and click save.  
If there is more than one upload, use the plus button to add additional upload fields.  
Required fields are marked with an \*.

**Required Uploads**

Vendor and/or Contractor Quotes/Estimates \*  Drag Files Here

Other Relevant Project Documents, if any  Drag Files Here

*Figure 11: Supporting documentation upload*

Click **Save** and the **Next Form** button to be taken to the Certification page, or click the Certification navigation tab on the left side of the screen.

## Step 5: Certification

Once the application is complete, you **MUST ESIGN** the application within the TDA-GO system.

Toggle to the **Certification Page**. This is where the Authorized Official of the hospital electronically signs the document ([Figure 12](#)).

RCP2023003

Forms

Application

Application contact information

Application

Budget

Support Documentation

Certification

Closeout

Project Completion report

Status Options

Submit Application

Cancel Application

Tools

Landing Page

### Certification

New Note

By signing below, the Applicant:

1. Certifies all information provided in connection with this application is true and correct to the best of Applicant's knowledge;
2. Acknowledges any misrepresentation or false statement made by Applicant, or an authorized agent of Applicant, in connection with this application, whether intentional or not, will constitute grounds for denial of this application;
3. Acknowledges acceptance of funds in connection with this application acts as an acceptance of the authority of the Texas Department of Agriculture (TDA) and the State Auditor's Office (SAO) or any successor agency to conduct an investigation in connection with those funds, and Applicant further agrees to cooperate fully with TDA and/or SAO or its successor in the conduct of the audit or investigation, including allowing TDA and/or SAO to inspect Applicant's premises and providing all records requested;
4. Acknowledges this application and any payments owed to Applicant in connection with this application may be reduced or denied because of Applicant's owing any debt to the State of Texas, and if Applicant is an individual, that this application and any payments owed to Applicant in connection with this application may be denied because of delinquency in payment of a guarantee student loan and for failure to pay OIG support; and
5. By submission of this application, Applicant acknowledges as a condition of receipt of grant funds under this program the Applicant will be required to execute a grant agreement with the Texas Department of Agriculture, and further acknowledges that failure to timely execute the grant agreement will result in withdrawal of any grant funds awarded, and those funds will be redistributed to other qualified applicants in accordance with state law and TDA rules.

**Notice of Penalties:** The penalty for knowingly making false statements or false entries, or attempts to secure money through fraudulent means, may include fines and/or incarceration and/or forfeiture of funds under applicable state or federal law.

This application becomes public record and is subject to disclosure. With few exceptions, you have the right to request and be informed about the information that the State of Texas collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. (Reference: Texas Government Code, Sections 552.021, 552.023, and 555.004.)

**Certification of Applicant Financial Data**  
As Authorized Official, I hereby certify that the financial data exhibited in this application is correct, accurate, and based on the most recent data (audit, financials, etc.).

**Certification of Applicant Project and Matching Funds**  
As Authorized Official, I hereby certify that the entire total project amounts, including matching funds, is secured and is available if our facility receives CIP funding for this project. If awarded, our facility will maintain the funds.

Authorized Official      Date

Figure 12: Certification screen

After the Authorized Official has completed the Certification Page, **click the Save button** on the top righthand side of the page.

The final step is for the Authorized official to submit the application within the TDA-GO System (see next page).

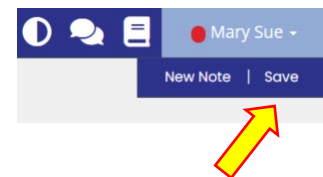


Figure 13: Click Save

NOTE: Project Director, DO NOT SUBMIT WITHOUT THE CHECK BOX BEING CHECKED BY AN AUTHORIZED OFFICIAL.

## Step 6: Application Submission

Once the application is certified, the Authorizing Official **MUST SUBMIT** the application within the TDA-GO system.

Expand the **Status Options** drop down menu ([Figure 14](#)). Select **Submit Application**.

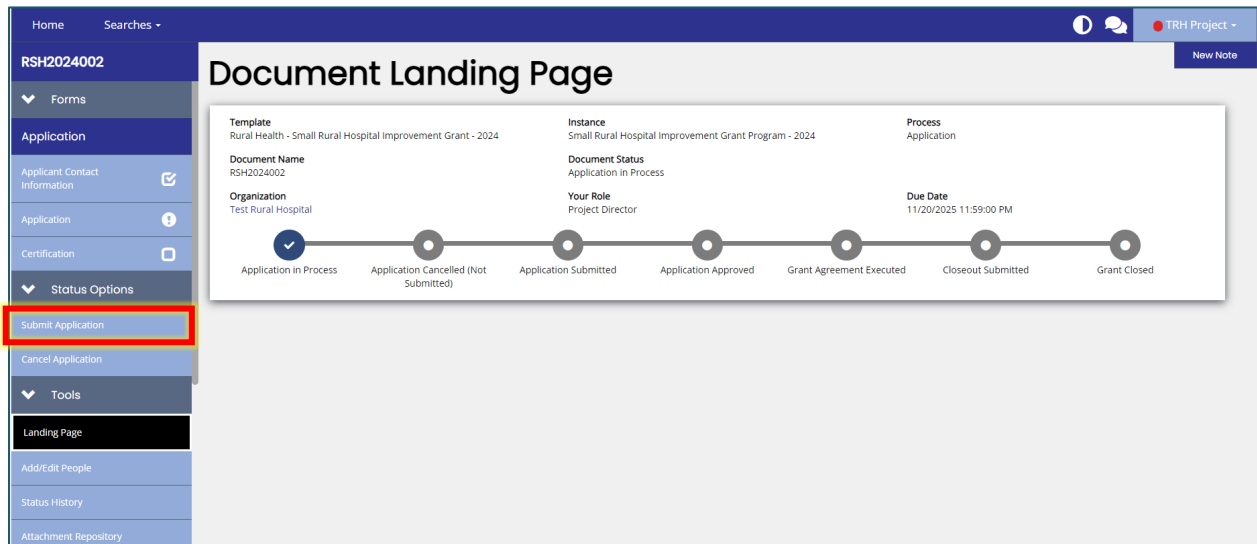


Figure 14. Status Options drop down menu and Application Submitted button location

**NOTE:** If errors remain, a **Document Validation** message will pop up noting what sections still have errors ([Figure 15](#)). You may click on each section name to be directed to the errors.

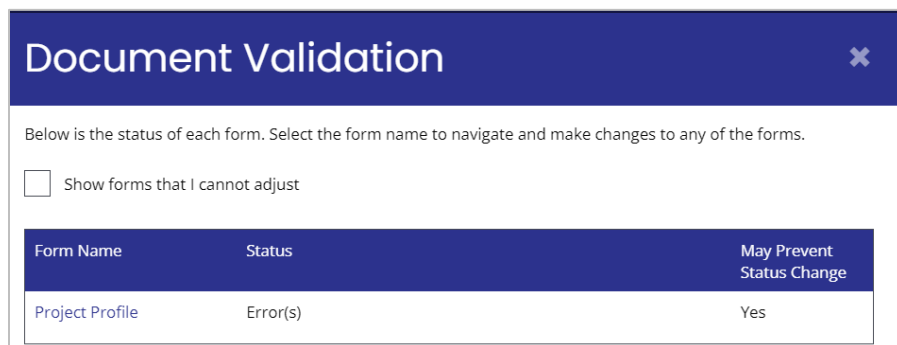


Figure 15. Document Validation message will appear if you try to submit application with errors

If no errors are detected, the system will ask if you are sure. Once you select submit, you will then be taken back to the **Landing Page** ([Figure 16](#)).

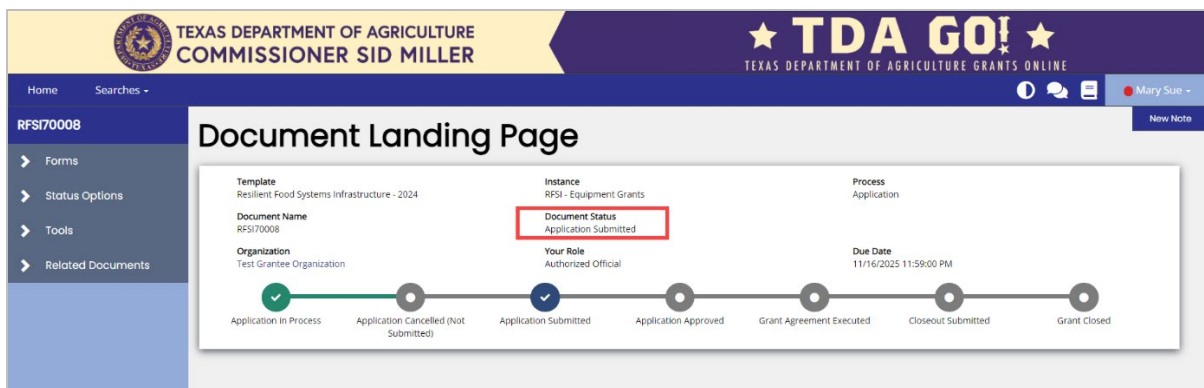


Figure 16. After application submission, you will return to the Document Landing Page.

**NOTE:** Applications must be submitted by the opportunity deadline. The online application will no longer be available after that time. Times identified are based on TDA headquarters (Central Time Zone) and are displayed on your TDA-GO home screen.

### Confirmation Email

Once the application is submitted, you'll receive a confirmation email (Figure 17). SORH will review and score your application using the parameters previously mentioned in this document. You will receive notice of whether or not you were awarded the CIP award in June 2025.

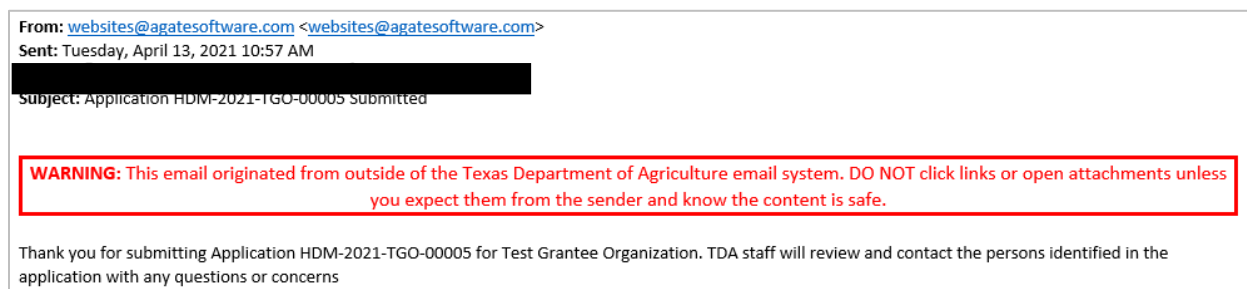


Figure 17. Example of confirmation email

## Appendix

### Hospital Roles within the TDA-GO system

- **Authorized Official (AO)** – This role is normally filled by the Hospital CEO/Administrator who prepares an application. The AO is the only person who can certify and submit an application, and they can also change or assign roles for Project Director. An AO may also appoint a designee to certify and submit on their behalf, but this designee can only do so under the AO's login credentials.
- **Project Director (PD)** – This role refers to the individual who will complete the application, manage the grant award, submit payment requests, etc. They cannot

certify or submit applications (unless appointed as a designee by the AO and signed in under the AO's login credentials). An AO may assign more than one PD.

- **Secondary Contact** – This role refers to an optional additional staff member. After we set up the organizational profile and login information, if you deem it necessary, you may assign a secondary contact role in the system. They can be given a specific role, such as PD or AO, or left solely as a secondary contact.
  
- **Please note:** if necessary, the same staff person can be assigned both the AO and PD roles.