NATIONAL ASSOCIATION OF CHRONIC DISEASE DIRECTORS
Promoting Health. Preventing Disease.

SUMMARY OF NACDD FORMS
Updated February 18 2016

Agreement Request Form (word and excel): Provides information for contractual agreements between a vendor/consultant and NACDD. Email completed form to legal@chronicdisease.org.

Annual Report Summary Submission (website online form): This form must be completed at the end of each grant year and must be submitted with your last invoice has been submitted to Finance. It also provides guidelines on the type of information needed for the program summary entries (i.e. impact numbers, partner call-outs, etc.)

Business Card Order Form- (pdf): This form is used to request NACDD business cards to promote NACDD branding and uniformity. This production is managed by Communications and Member Services.

Calendar Event Submission Form (website online form): This form must be completed in order to have an event or meeting placed on the CDC/NACDD Joint Chronic Disease Calendar.

Contractor Budget Template and Guidance Document (excel and pdf): The guidance document identifies what information is required for "contracts/grants" budget line item/category. Consultants should provide this template to institutions, companies, or organizations, etc. if they need to provide NACDD with a budget. This is the budget detail for amounts shown in the "contracts/grants" budget line item/category.

Carryforward, Redirect, and No Cost Extension Request FY2016 Submission Schedule (pdf): Provides a deadline date to submit carryforward, redirection, and no cost extension requests to ap.nacdd@chronicdisease.org for fiscal year 2016.

Carryforward/ Redirect/ No Cost Extension Request Form (word): Provides required information to complete carryforward request , redirection request and No Cost extension requests. Email completed form to ap.nacdd@chronicdisease.org. Based on experience, this process takes at least 30 days for PGO approval.
Carryforward Request- This is a request to spend funds from a prior year which were reported as unobligated (unspent and not encumbered) in a submitted federal financial report. PGO approval is required.
Redirect Request- This is a request to spend current year funds for a purpose that is contrary to what was initially approved. PGO approval is required.
No Cost Extension Request- This is a request for additional time to complete scope of work for vendor without providing additional funds. Requesting additional time for a vendor is also requesting additional time for the program. PGO approval is required.

Carryforward-Redirection budget template (excel): This form will help to prepare a budget for carryforward and redirect request funds. Email completed form to ap.nacdd@chronicdisease.org.

Consultant Completion Checklist (pdf): This checklist will help the Lead Consultant with project administration when another consultant will no longer be working on his/her project. The checklist is to ensure that all relevant information has been communicated and that all tasks have been completed prior to the last working day of the non-lead consultant.

Consultant Registration Notification (pdf type into): This form must be used when a consultant wants to be reimbursed for registration fees. Registration fees will not be reimbursed until after the event occurs. The event must also be explicitly stated in the approved budget.

Grant Application Budget Template (excel): This form will assist with preparing a budget for a federal grant application or a nonfederal grant application or proposals. Unless advised otherwise, please email completed information to the Director of Finance and Operations. Budgets for proposals and grant applications must be approved by the CEO and Director of Finance prior to submission.

Impact Brief article submission Form (website online form): Provides program updates, upcoming events, partner news or other relevant information to the Communications Department for publication in the Impact Brief/Monthly Publication. This is a program team effort, which should be led by the Program Lead Consultant. There might be various programs in a chronic disease, i.e. cancer, CVH, or diabetes. The Program Lead Consultant of the chronic disease will determine which program will report in the assigned month per the editorial calendar. Must log into website, go to consultant webpage, and click on appropriate link.

Indirect Rate/Management Fee Schedule (pdf): This document provides guidance about the indirect rate or management fee rate to include in budgets for grant applications and proposals to nonprofit organizations, states, or corporations. Please contact the CEO or the Director of Finance and Operations if you have any questions.

Internship Request Form (pdf-type into): A form to request the services of a compensated or non-compensated intern by consultant or staff for a period of time. We will post internship positions on website. CEO approval is required. The consultants must email the completed form to the Manager of Operations who will be responsible for obtaining the CEO's signature.

Invoice Template (excel) (word): Provides invoice template with required information. The invoice template may be in a different format, but it must have the required information (invoice date, description of service, period worked, amount, finance code, name and mailing address). This template may be given to speakers/facilitators or vendors for usage. Submission of a signed presenter's confirmation letter can be used in lieu of an invoice.

Meeting Request Form (website online form): Provides meeting planning information to the Lead Event Planner (LEP). This form must be completed for all events requiring the LEP's assistance. Upon submission, the form will be sent to the Lead Event Planner at (eventinfo@chronicdisease.org).The LEP will contact the submitter within three business days to setup a meeting time to discuss specifics.

Photo-Image Release Form (pdf-type into): Provides NACDD with authorization to use pictures or images in publications, including website.

Presenter's Confirmation Letter Template (word): Serves as a template for preparing a confirmation letter for speakers/facilitators. Consultant must update letter as appropriate and provide to Lead Event Planner who will obtain the CEO's signature, retain a copy, and mail/email signed letters to the consultants.

Progress Reports: Consultant will provide updates as directed by the Program Evaluator using the provided evaluation tool. Contractors who are not NACDD consultants will provide quarterly or periodic progress reports as stated in their agreement and must submit it to ap.nacdd@chronicdisease.org. The contractor's agreement will indicate what must be included in the quarterly progress reports.

Project Closure Report (PCR) (word document): This document should be completed when the program will not be funded in the next fiscal year. We recommend that you review this document 90 days prior to the end of the grant year.

Project Closure Report Overview (pdf): Provides a step by step documentation of what is required to close out the program which will not be funded in the next grant year.

Quote Release Form (pdf-type into): Provides NACDD with authorization to use quote in publications, including website.

Shared Conference number calendar (link): This link should be used to reserve a day and time to use the NACDD conference number.

Stipend-Honoraria Form (pdf-type into): Provides notification to Finance of who will receive the funds. The form must be submitted 30 days prior to **each** event. You must allow time for CEO approval. The staff accountant will submit for CEO approval. Consultant must email completed form to ap.nacdd@chronicdisease.org. Note that the recipient must submit a completed W9 form to ap.nacdd@chornicdisease.org before payment will be made.

Stipend Payment Confirmation (pdf-type into): This form should be given to an individual whose stipend is being funded by the same federal program/project in which their employer is receiving funds. This form should be completed at least 30 days prior to each event. The individual and their employer must complete this document to confirm that payment of the stipend/honorarium is allowable and in compliance of federal regulations. The completed form should be submitted to ap.nacdd@chronicdisease.org.

Survey Request Form (website online form): Use this form to submit any survey request for review and distribution to members. NACDD wants to have a coordinated approach of managing surveys.

Travel Guidelines (pdf): Communicates NACDD travel policies and procedures for all individuals to support the organization's goals to provide effective, efficient, and economical means of travel. Consultants should provide this document to individuals who are traveling for their respective meeting/events to avoid any misunderstandings.

Travel Reimbursement Form (excel): Requests for reimbursement of travel expenses for approved NACDD event. Consultants should provide this to individuals who are traveling for their respective meeting/events with the appropriate 8 digit finance code (Program#, Project#, and Grant Year). If it is

funded by a nonfederal program, the grant year is "0". This completed form and supporting required documents should be emailed to ap.nacdd@chronicdisease.org or mailed to the NACDD address.

Travel Reimbursement Checklist (pdf): Highlights "key" travel policies and procedures for travelers. This checklist does not preclude a traveler's review of the NACDD's detail travel policies. Consultants should provide this to individuals who are traveling for their respective meeting/event.

Travel Approval Form (website online form): Requests for permission to travel using the NACDD travel agent; Must identify individuals, date, location, finance code, and purpose. Upon submission, the form goes to email address, travelinfo@chronicdisease.org. If approved, NACDD will contact the consultant and the travel agent so that the booking process can begin. If not approved, NACDD will contact the consultant to explain the reason for disapproval. (Updated 2/18/2016)

Travel Encumbrance Calculation Worksheet (excel): Helps consultants determine the amount of travel related funds needed for an event that will occur three months after the grant year if it is not the last year of the grant. This calculation is to be submitted in the last month of a grant year and primarily will be used for federally funded programs. Note these funds will be communicated as "obligated" to PGO. The form should be sent to ap.nacdd@chronicdisease.org.

Webinar Forms (website online forms): Provides relevant information to reserve a date and time to use NACDD's webinar license by emailing Stephanie Mathews at smathews@chronicdisease.org. The NACDD Consultant is responsible for managing all aspects of the webinar. Stephanie Mathews will provide training opportunities to consultants each fiscal year at the beginning of the fiscal year.

Webpage Major Update (website online form): Provides notification to the Communications and Member Services Department of significant updates. Examples of significant updates are contact information, publication changes to the website or inclusion of additional publications, or content updates. Upon submission, the information is sent to the Communications and Member Services Department (info@chronicdisease.org).

Webpage Wrap-up/Archive Checklist (website online form): This checklist includes housekeeping items that each program team needs to address when programs are no longer being funded. It is included as a task in the Program Closure Report. This allows for a more manageable web area and easy navigation for the members.

W9 Tax Form (pdf-type into): Provides information to Finance so that taxable income can be reported to the IRS. All vendors/consultants must complete this form and send to ap.nacdd@chronicdisease.org. Vendors must ensure that a signed W9 is on file with NACDD. This must be provided before payment can occur.