



TB Elimination Alliance 2026-2027 Mini-Grant Program Request for Proposal (RFP) Application FAQs

1. Who is eligible to apply?

Applicants must be from or working directly with organizations that serve communities at increased risk for TB. Community-based organizations and community health centers will receive higher priority. High priority will also be given to organizations that have the capacity and existing relationships to provide services to these populations.

2. Is it required or preferred for an applicant who is currently or previously been working in the field of TB?

No, it is not required or preferred for an applicant who is currently or previously been working in the field of TB. We encourage applicants to describe their experience and familiarity with serving populations at increased risk and how they plan to incorporate TB in their efforts.

3. How many mini-grant awards will be provided?

The number of awards will depend on the quality and scope of applications received, as well as available funding. Individual award amounts will range from \$10,000–\$15,000.

4. What is the specific time frame for mini-grant activities, and when does this project period start?

The time frame for mini-grant activities is eight (8) months. Awardee announcements will be made in August 2026 and funds will be distributed in September 2026. The project period will start in October 2026 and end in May 2027.

5. What should the proposal address?

The proposal should address one or more of the five TB Elimination Alliance (TEA)'s priority areas and develop related activities to support community engagement and education, provider education, and/or quality improvement to increase or facilitate access to LTBI/TB testing and treatment.

6. What are TEA's priority areas?

- a. Raise awareness about the link between LTBI and TB disease, address misperceptions, decrease stigma, and encourage and facilitate testing and treatment for LTBI and TB;
- b. Increase awareness of the recommended shorter treatment regimen for LTBI;
- c. Encourage providers to test and treat LTBI among populations at increased risk;
- d. Create culturally and linguistically responsive LTBI and TB education, training and community engagement resources and activities that resonate with communities; and
- e. Develop and implement a comprehensive outreach and education campaign focused on reducing the rates of TB disease among communities at increased risk.

7. What are some example activities that an organization could do to fulfill the requirements of this grant?

Example activities are listed in Table 1, as well as on page 3 of the Request for Proposal (RFP) instructions. For Provider Education proposals, one example activity is to launch a provider education campaign. Please refer to the Centers for Disease Control and Prevention's (CDC) [Latent TB Infection Testing and Treatment: Summary of U.S. Recommendations](#), as well as their [Latent TB Infection Resource Hub](#). For Community Engagement and Education proposals, one example activity is to translate LTBI resources from English to different languages. Please refer to the CDC's [General Public Communication and Education Resources](#) to explore and adapt existing translations.

Table 1. Example mini-grant activities

<u>Community Engagement and Education</u>	<u>Provider Education</u>	<u>Quality Improvement</u>
<ul style="list-style-type: none"> ● Conducting culturally and linguistically appropriate public education/outreach on LTBI/TB risk, testing and treatment (e.g., traditional and non-traditional outreach methods) ● Developing local partnerships to increase visibility and dissemination of messages regarding stigma related to LTBI/TB in the 	<ul style="list-style-type: none"> ● Training clinical and/or non-clinical staff on testing and treating of LTBI and the shorter courses of LTBI treatment ● Addressing misconceptions of TB blood test versus TB skin tests ● Raising awareness of local populations at increased risk for LTBI/TB 	<ul style="list-style-type: none"> ● For community health centers: Developing or modifying Electronic Health Record system templates to identify high risk patients that require LTBI/TB screening ● For community health centers and/or community-based organizations: Standardizing data collection for LTBI/TB testing and treatment

community		<ul style="list-style-type: none"> • For community-based organizations: Developing databases, policies, and procedures for outreach
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8. Is the focus on widespread community outreach?

No, the focus for the mini-grants proposal is of the applicants' choosing. Please refer to the priority areas in the [RFP instructions](#).

9. Is this open to collaboration between academia and community partners?

Yes, we encourage collaboration between academic and community partners. Please indicate this in your application.

10. If a state program and community based program are partnering on activities, is it okay to have the state program be the fiscal agent, or is it preferable to have the community organization be the fiscal agent?

Yes, it is okay for the state program to serve as the fiscal agent. Partnerships are encouraged for proposed activities.

11. If we have a local TB grant, can we apply for the mini-grant to cover a different activity?

Yes, applicants are still encouraged to apply and focus on unique activities that align with the mini-grant program's priority areas.

12. TB and Hepatitis B often go hand in hand and we address both diseases in our organization. Should we talk about both in the two applications or only focus on one issue per application?

You may talk about both or other diseases addressed in your organization (e.g., question 13 of the application); however, we encourage you to focus on your plan for TB activities and efforts throughout your application.

13. Can we use literature for research and to validate findings?

Yes, applicants may use literature in their narrative to validate findings, demonstrate needs of communities at increased risk.

14. What are project site requirements?

- a. Designate a lead point of contact to provide ongoing communication with the Association of Asian Pacific Community Health Organizations (AAPCHO), including quarterly briefing calls (schedule will be determined at a mutually convenient, regular date) with all grantees.

- b. Participate in the Mini-Grant Program orientation training, which will cover key information about TEA, program grantees and expectations, and important dates.
- c. Participate in a spotlight/feature on the TEA website.
- d. Participate in monthly TEA Network meetings (if applicable) and trainings/webinars.
- e. Establish and maintain a system for tracking activities, outreach, and project outcomes and submit regular progress reports to TEA and AAPCHO throughout the grant period at both the midpoint and end of the grant period.
- f. Provide a “lessons learned” presentation on a TEA Network meeting.
- g. Ensure availability and willingness to attend in-person conferences, summits, and other national outreach and educational campaigns hosted or sponsored by TEA, if invited or if such events are scheduled during the grant period.
- h. Engage local/state TB program officials on activities for awareness and support as needed.

15. How long is the Mini-Grant Program orientation training?

The training webinar should be no longer than 90 minutes. It will be held via Zoom, however the date and time is TBD.

16. How often should an applicant spend time working on their mini-grant activity (i.e. daily, once a week, once a month, more frequently, etc.)?

There is no expectation for applicants to spend a certain number of hours on a daily, weekly or monthly basis as that will depend on the project. As long as all of the requirements as listed above are met, applicants may spend as much time as they need.

17. Which costs are not allowed; e.g., is Overhead allowable?

Overhead, or indirect costs, are allowable, but there is a limit. Please see question 18 below.

18. Is there a limit or restriction to the indirect cost rate an applicant can request for this project (i.e. should we use our federally negotiated rate or some other sponsor-prescribed rate)?

Mini-grant recipients may use the 15% de minimis rate or can submit their federally approved indirect rate. If requesting above 15% and the recipient does not have a federally approved indirect rate, the recipient will be asked to submit a detailed summary of how the proposed indirect rate was calculated. This summary is not required in the grant proposal, but will be requested upon award and may be negotiated, if necessary. Mini-grants will be selected based on the criteria outlined in the RFP instructions; the proposed indirect rate will not impact the selection of proposals.

19. Are there restrictions to what money can be used for?

Mini-grant recipients will need to adhere to federal guidelines for allowable and unallowable expenditures. A few notable *unallowable* expenditures include: alcohol,

food, entertainment, donations, lobbying, or clinical. For more information on other allowable and unallowable expenditures, please see [here](#).

20. Can we use mini-grant funds to support TB blood and/or skin test resources?

Yes, applicants may use mini-grant funds to support TB blood and/or skin test resources. For recommendations, please refer to the Centers for Disease Control and Prevention's [Latent TB Infection Testing and Treatment: Summary of U.S. Recommendations](#).

21. In the budget template, what is the unit type?

The unit type is the basis for which you calculate the cost for an item or resource. One example of a unit type is “FTE” when determining the amount of personnel required to implement the proposed Mini-Grant activities.

22. What should be covered in Section 3: Budget of the RFP?

Applicants must submit an itemized budget for the program period with a detailed justification. Applicants must demonstrate activities that can be realistically accomplished within the budget of up to \$15,000 from October 1, 2026 to May 31, 2027.

23. When is the deadline and where should applicants submit their application?

The deadline is Friday, July 24, 2026 at 5:00pm local time. Applicants must submit their application at bit.ly/2026-27tmgprfp. We recommend applicants to review the detailed [RFP instructions](#) and type out responses for each section on a separate document before submitting online.

24. When our application is submitted and reviewed, are we given the chance to make corrections and revisions in our application?

Yes, there will be time for selected proposals to edit and revise their proposals after the review period.