

House District _____

Senate District _____

THE TWENTY-SEVENTH LEGISLATURE
APPLICATION FOR GRANTS & SUBSIDIES
CHAPTER 42F, HAWAII REVISED STATUTES

Log No: _____

For Legislature's Use Only

Type of Grant or Subsidy Request:

GRANT REQUEST - OPERATING

GRANT REQUEST - CAPITAL

SUBSIDY REQUEST

"Grant" means an award of state funds by the legislature, by an appropriation to a specified recipient, to support the activities of the recipient and permit the community to benefit from those activities.

"Subsidy" means an award of state funds by the legislature, by an appropriation to a recipient specified in the appropriation, to reduce the costs incurred by the organization or individual in providing a service available to some or all members of the public.

"Recipient" means any organization or person receiving a grant or subsidy.

STATE DEPARTMENT OR AGENCY RELATED TO THIS REQUEST (LEAVE BLANK IF UNKNOWN): _____

STATE PROGRAM I.D. NO. (LEAVE BLANK IF UNKNOWN): _____

1. APPLICANT INFORMATION:

Legal Name of Requesting Organization or Individual:
National Alliance on Mental Illness Hawaii
Dba: NAMI Hawaii
Street Address: 770 Kapiolani Blvd. Ste 613
Mailing Address: Honolulu, HI 96813
(same)

2. CONTACT PERSON FOR MATTERS INVOLVING THIS APPLICATION:

Name Kathleen Hasegawa
Title Executive Director
Phone # 808-591-1297
Fax # 808-591-2059
e-mail kathi@namihawaii.org

3. TYPE OF BUSINESS ENTITY:

- NON PROFIT CORPORATION
- FOR PROFIT CORPORATION
- LIMITED LIABILITY COMPANY
- SOLE PROPRIETORSHIP/INDIVIDUAL

6. DESCRIPTIVE TITLE OF APPLICANT'S REQUEST:

Homeless Prevention Through Educating + Strengthening Families of People with Severe Mental Illnesses Using NAMI's Family to Family Education Program

4. FEDERAL TAX ID #: _____

5. STATE TAX ID #: _____

7. AMOUNT OF STATE FUNDS REQUESTED:

FISCAL YEAR 2014: \$ 50,000.00

8. STATUS OF SERVICE DESCRIBED IN THIS REQUEST:

- NEW SERVICE (PRESENTLY DOES NOT EXIST)
- EXISTING SERVICE (PRESENTLY IN OPERATION)

SPECIFY THE AMOUNT BY SOURCES OF FUNDS AVAILABLE AT THE TIME OF THIS REQUEST:

STATE \$ _____
FEDERAL \$ _____
COUNTY \$ _____
PRIVATE/OTHER \$ 13,100.00 for 2013-2014

TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE:

Kathleen Hasegawa
NAME & TITLE

1/31/2013
DATE SIGNED

BUDGET REQUEST BY SOURCE OF FUNDS

(Period: July 1, 2013 to June 30, 2014)

Applicant: National Alliance on Mental Illness Hawaii

BUDGET CATEGORIES	Total State Funds Requested (a)	(b)	(c)	(d)
A. PERSONNEL COST				
1. Salaries	10,000			
2. Payroll Taxes & Assessments	1,000			
3. Fringe Benefits	1,000			
TOTAL PERSONNEL COST	12,000			
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island				
2. Insurance				
3. Lease/Rental of Equipment				
4. Lease/Rental of Space	4,500			
5. Staff Training (Vol. teachers + staff)	19,590			
6. Supplies	1,000			
7. Telecommunication	480			
8. Utilities				
9. Quarterly mtgs	25,590			
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
TOTAL OTHER CURRENT EXPENSES	51,160			
C. EQUIPMENT PURCHASES				
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL				
TOTAL (A+B+C+D+E)	63,160			
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested	50,000	Kathleen Hasegawa ⁵ 391-1297 		
(b) HMSA Found.	10,000			
(c) Crawford Idema Found.	2,500			
(d) Friends of HI Charities	660			
TOTAL BUDGET	63,160	Signature of Authorized Official: <u>Executive Director</u> Date: _____ Name and Title (Please type or print)		

National Alliance on Mental Illness Hawaii

Grants-In-Aid Grant Request: Family Strengthening and Homeless Prevention Through Family to Family Training

I. Background and Summary

1. A brief description of the applicant's background

NAMI Hawaii is the state affiliate of NAMI, The National Alliance on Mental illness. The mission of NAMI Hawaii is to improve the quality of life of all whose lives are affected by mental illnesses, through support, education, advocacy, and research. We serve our community by empowering consumers and families to confront the profound injustices brought by serious mental illnesses.

We serve persons afflicted with serious mental illness. In addition, NAMI Hawaii counts the families of these people- their first tier of support- to be affected as well. One in five families will be affected by a serious mental illness during a lifetime. **The estimated number of people afflicted with serious mental health conditions in the State of Hawaii is 1 in 17.** The illnesses are chronic and persistent, although controlled largely by new treatment advances since the 1990's. These illnesses include schizophrenia, major depression, bi-polar disorder, dissociative, schizo-affective, and anxiety disorders (panic, phobia, obsessive-compulsive disorder, and post-traumatic stress disorder).

NAMI Hawaii provides education to family members and caregivers through NAMI National's signature family to Family Education Program. It also provides Support Groups for families and for consumers. These programs are currently available on Oahu, Maui and Hawaii Islands. This year we are expanding programs to the island of Kauai.

NAMI Hawaii provides public education through presentations at colleges, civic groups, churches etc. We also set up displays at health fairs and other forums. Literature is available at all events.

In addition, NAMI Hawaii provides a telephone help line which services as a link to community resources, State services, and provides a listening ear. NAMI also provides public education in the form of advocacy for mental health parity and mental health treatment and services for all of those who need them.

The NAMI Hawaii board is comprised of mental health consumers, family members, service providers, and members of the community. NAMI Hawaii serves persons afflicted with serious mental illness and their families. NAMI Hawaii has had programs in Hawaii since 1994.

2. The goals and objectives related to the request (overview)

NAMI Hawaii is seeking funding to prevent homelessness by supporting wellness for both the concerned family and the person who is seriously mentally ill. The Family to Family Education Program is a NAMI National program that was developed in the early 1990's by a psychologist who was also a family member. The overarching goal of the Family to Family Education Program is to guide family members of those with mental illness to emotional understanding, healing, insight and action.

Family members of people with serious mental illnesses need information and support to cope with the many stresses they experience. As caregivers they face considerable challenges. They must provide informal case management, advocacy, crisis intervention, housing supervision and more, with limited resources and no professional guidance. They often are forced to cope with altered family patterns and expectations, increased financial demands, compilation of pressures, and altered social networks due to the illness and others' reactions to it.

While the focus of this program is on family caregivers of loved ones with mental illness, the family as a unit is affected. When family members gain understanding of what is happening to their loved one and what resources may be available they are in a much better situation to cope with supporting their loved one. Families who have not gained this understanding often must turn away the person they love because they are not able to cope with the situation. Therefore, educating and supporting these often beleaguered families is an essential step in preventing mentally ill persons from becoming homeless.

In the last year NAMI Hawaii has more than doubled the number of Family to Family Education Program classes and locations. The number of teachers has nearly tripled. In 2013/14 we need to recertify all of the teachers in a newly revised curriculum and we want increase our presence on the Neighbor Islands and Kauai.

We will do this by expanding NAMI Hawaii's Family to Family Education Program throughout the islands by increasing the number of ongoing teachers by at least 5 and by retaining existing and new teachers. In order to accomplish this NAMI will provide training and support for its volunteer Family to Family teachers by implementing a quarterly, statewide, support and training program for them. Teachers in this NAMI National Signature Program, are not paid to teach. In return for receiving their training they pledge to teach other parents and caregivers without financial compensation.

Every day our help line receives calls from family members desperate for the information this program provides.

NAMI Hawaii addresses the family needs for information and support through its Family to Family peer-led courses and support groups. The Family to Family Education Program is a free, community-based, structured, peer-led, 12-week informational support class for family members of people with serious neurobiological disorders. In these classes family members and care givers learn about the many serious mental illness, their causes, symptoms, and medications, recovery and community resources.

Another aspect of the classes is that they provide emotional support in addition to the educational foundation for people who have often felt isolated by their confusion and by the community response to the condition of their loved ones.

In Family to Family classes family members learn from a teacher who like them has a family member with a serious mental illness, who has been through the Family to Family Education Program and through an intensive teacher training. A unique aspect of the class is that being a family member with lived experience is a requirement for teaching the course. This fact makes the course experience especially meaningful and empowering for family members struggling to understand and cope with a mental illness diagnosis. With a dual focus on education and personal insight, family members in Hawaii and across the country testify that they have benefited greatly from this compassionate approach to their practical and personal concerns.

Family to Family Education Program teachers need the opportunity to work together to share experiences, fears, concerns, hopes and expectations. Networking, on a quarterly basis, provides support for information sharing, reassurance and confidence building. They also receive the latest curriculum information from NAMI National and will have opportunities to learn from each other. Meetings will take place in the areas that currently have teachers, Oahu, Maui and Hilo. This will also lead toward the building of a statewide presence and the eventually to NAMI chapters on each of the islands.

Providing increased access to the Family to Family Education Program will increase the number of programs which foster the ability of consumers, family members, and providers to provide direction for improvements in our system of mental health care. It will also give family members the tools they need to obtain the right care for their mentally ill family members and will provide the family with tools they can use to see that their loved ones are cared for at home or in community facilities rather than becoming homeless and hopeless in the parks and on the streets.

a. GOALS: Family Strengthening and Homeless Prevention

- Participation in the NAMI Hawaii Family to Family Education Program will improve the ability of families to cope with mental illness by reducing

subjective burden, increasing empowerment, increasing knowledge of mental illness and the mental health system, and increasing self-care among family members of people with serious mental illness.

- The number of Family to Family teachers will increase and be retained, so there will be greater opportunity for families on Oahu, Maui, the Big Island and Kauai who have a family member with mental illness to both find and to participate in course.
- With increased numbers of trained teachers, who offer this course that is free-of-charge, access to high quality health care will improve. The overarching goals of Family-to-Family is to guide family members of those with mental illness to emotional understanding, healing, insight, and action, thereby promoting health and disease prevention.
- General social welfare will be served by the goal of strengthening natural supports around a person dealing with mental illness, serving as a unifying theme in seeking ways to reduce costs and maximize existing resources. Joining forces to strengthen the ability of families to cope and provide support can be win-win solution that helps keep more families together while reducing the frequency of hospitalization, homelessness and incarceration.
- Teachers will be certified in and teach the following curriculum:
 1. Discuss the biological basis of brain disorders and treatment.
 2. Learn coping skills, and listening and communication techniques, gaining empathy by understanding the subjective, lived experience of a person with mental illness.
 3. Handle periods of crisis and relapse.
 4. Learn self-care; recognize normal emotional reactions to worry, stress, and overload.
 5. Find basic information about medications (and side effects) and strategies for medication adherence.
 6. Locate current research related to the biology of brain disorders and the evidence-based, most effective treatment to promote recovery.
 7. Discuss national, regional and local resources.
 8. Fight stigma and be an advocate for appropriate mental health policies-private and public.
 9. Work for recovery.

b. Objectives

- As a result of ongoing training and support for Family to Family teachers their retention rate will double to 8 active teachers on Oahu and 3 each on the Big Island and Maui.
- Classes will be taught on a regular basis on Oahu, Maui and the Big Island. A class will also begin on Kauai.
- At least 5 new family members will be trained to become teachers.
- A minimum of 16 classes will be taught between July 2013 and June 2014.
- 125 -150 family members will have participated in and completed a 12 week Family to Family course.
- From their course members teachers will recruit 10 or more family members to be trained to be teachers at the next annual training of teachers.
- The total number of teachers actively teaching will have increased from 16 - 21 in the course of the year and all teachers will be certified in the newly revised curriculum.

In summary, the output will result in an increase in the number of trained teachers who commit to teaching a minimum of two courses each. Classes normally are co-lead by two teachers. It is anticipated that the number of courses will increase to at least 16 and the number of trained teachers will increase from 16 - 21. Most importantly the number of family members who will have the knowledge and support to enable their loved one to remain in a supportive home environment will have increased from 60 a year to 125-150 a year in one year.

3. State the public purpose and need to be served

Of Hawaii's 1.3 million residents, about 32,000 adults live with serious mental illness and about 12,000 children live with serious mental health conditions. Many of these seriously ill residents become homeless each year when family members give up because they do not know what is wrong with their loved one and they cannot deal with the situation any longer. Family members of people with serious mental illness need information and support to cope with the many stresses they experience. Caregivers face considerable challenges: in addition to acting as informal case managers and providing supervision with limited resources and professional guidance, they often are forced to cope with changed family patterns and expectations, financial demands, a compilation of pressures, and altered social networks due to the illness and others' reactions to it.

In the best of times, having a member of the family suffering from mental illness can and frequently does strain and tear the fabric of the family. Family members are often as much in need of information and services as the person who has a diagnosed or diagnosable mental illness. However, since people with mental illness are so widely discriminated against, their illnesses tend to be very private, and are frequently hidden from others to the extent that the person with the illness or the family is capable.

The recession of recent years has greatly strained the support and treatment system for both the ill and their families. Nationally over \$1.6 billion has been cut from mental health services. In Hawaii, State funding for the Adult Mental Health Division was cut 45% and treatment was drastically reduced. Until very recently State supported case management services to mental health consumers was limited to a maximum of three and one half hours a month which, is equal to one appointment a month when the time that the psychiatrist, social worker or other provider spends preparing for and writing up the case. There are many mental health consumers who need several hours of treatment a week or even a day. State hospitalization is almost impossible to access unless the commits a crime for which the court sends them to the hospital. Other hospitals require that the ill consumer must be an imminent danger to self or others.

One result is that family members are stressed, isolated, frustrated, confused and often depressed. Without information and support many family members feel that they just can't handle it any longer and their husband, wife, brother, sister, son or daughter becomes homeless.

4. Describe the target population to be served

One in five families in Hawaii will be touched by mental illness. The ability to successfully understand what their loved one is experiencing and to effectively cope with the stresses that care giving requires is at large part linked to the education and support the family members receive. When family members of those with mental illness receive help the relationship with the individual with mental illness also improves.

5. Describe the geographic coverage

NAMI Hawaii offers classes in 4 locations on Honolulu, 2 on Maui and 2 on the Big Island. We are anticipating expansion to North Shore Oahu, and to Kauai. Classes are taught by two certified, peer instructors, who are graduates of the program. Classes are comprised of twelve 1/2 day sessions, staffed by volunteer teachers, posing a rigorous commitment by participants. Yet the class attendance often exceeds capacity (but none are turned away). Since its inception in Hawaii in 2001, the Family to Family Education Program has had over 700 participants.

II. Service Summary and Outcomes

1. Describe the scope of work, tasks and responsibilities

We are seeking funding for program expansion by recertification training of Family to Family teachers, training of new teachers, quarterly networking meetings for all teachers and expansion to Kauai for the Family to Family

Education Program, a NAMI National Signature Program. Family to Family is a leading, ongoing program offered by NAMI Hawaii. The Family to Family Education Program is a free, community based, structured, peer-led, 12 week informational support class for family members of people with serious mental illnesses, such as schizophrenia, major depression, bipolar disorder, panic disorder, obsessive-compulsive disorder, borderline personality disorder, and co-occurring brain disorders and addiction disorders. **Of Hawaii's 1.3 million residents, about 32,000 adults live with serious mental illness and about 12,000 children live with serious mental health conditions.** (Ref1) The Family to Family Education Program recognizes the need of caregivers to foster learning, healing, and empowerment among families of individuals with serious brain disorders. With a dual focus on education and personal insight, family members in Hawaii and across the country testify that they have benefited greatly from a compassionate approach to their practical and personal concerns.

- a. Teachers must take a 2 ½ day intensive training instructing them in how to teach the twelve lecture and interactive workshop classes in the course. This training prepares them to handle both the didactic information and the emotional content in the course.
- b. As a condition of training, teachers must agree to teach a minimum of two classes.
- c. Teaching in pairs, Family-to-Family teachers are responsible for each 2 ½ hour class, for working together in preparation for the class, and for remaining faithful to the content of the lectures and discussions for each class in the manual.
- d. Teachers are responsible for forming an outreach committee made up of NAMI affiliate members in their community to secure a course site and to plan and conduct outreach to fill the class.
- e. Teachers conduct interviews with interested participants prior to the start of the class, and they are responsible for following up with any class member in need of support during the time between classes.
- f. Teachers give out and collect the final evaluations of the class from class participants and report that data through a survey to NAMI and to their state or affiliate program director.

g. Teachers are required to submit their own teacher evaluation at the close of the 12-week course.

2. The applicant shall provide a projected annual timeline for accomplishing the results of outcomes of the service.

The proposed timeline for these activities and outputs is as follows:

July 2013 – Sept. 2013 Family to Family Education Program Teacher Training

July 2013 – June 2014 Sixteen Family to Family Classes taught with 125 participants.

May 2013 – July 2013 First Family to Family Class taught on Kauai

August 2013 First quarterly meeting of the Teacher Support Network

November 2013 Second quarterly meeting of the Teacher Support Network

February 2014 Third quarterly meeting of the Teacher Support Network

June 2014 Fourth quarterly meeting of Teacher Support Network

3. The applicant shall describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results.

Course participants complete an anonymous evaluation in which they discuss themselves in relation to the mentally ill relative, the instructors, and how they feel about the class. All questionnaires are reviewed locally and then forwarded to both the state NAMI Hawaii and National NAMI offices. Each comment is reviewed carefully to look for modifications and ways to improve the educational services. Desired outcomes include increased sense of hope, resiliency, knowledge, and coping skills. In addition, we anticipate a reduction in the frequency of hospitalizations, emergency room visits, police intervention, and incarcerations.

We also anticipate that four fundamental conditions will be met, which will lead to improved changes at the individual and system level: dissemination of knowledge, evaluation of programmatic impact, availability of resources, and efforts to address the human dynamics of resisting change. Implementation strategies will encompass clear, widespread communication of the model and of its benefits to all stakeholders, ultimately including families, consumers,

providers, administrators, and policymakers. While NAMI Hawaii's Family to Family Education Program is limited to 12 sessions of formal education, it offers continuity in the NAMI support and educational group structure.

4. **The applicant shall list the measure(s) of effectiveness that will be reported to the State agency through which grant funds are appropriated (the expending agency). The measure(s) will provide a standard and objective way for the State to assess the program's achievement or accomplishment. Please note that if the level of appropriation differs from the amount included in this application that the measure(s) of effectiveness will need to be updated and transmitted to the expending agency.**

The measures of effectiveness for the Family-to-Family Education Program training will include:

- a. Reaction- We will gather feedback from the trainers about how they felt about the training program. This will evaluate the engagement level and the receptivity of the audience.
- b. Learning- We will evaluate the extent of change in the competency of the trainers in knowledge and increase in skills as a result of attending the training.
- c. Behavior- To evaluate behavioral changes, we will note whether: 1) the person has the desire to change; 2) the person knows what to do and how to do it; 3) person working in right climate; 4) person rewarded for changing
- d. Results- The qualitative results of the evaluation will be summarized and shared. In addition, the number of trainers who successfully complete the training will be noted and submitted.

III. Financial Budget

1. **The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request.**
 - A. See Attached budget forms with anticipated quarterly funding requests for fiscal year 2013-2014.
2. **The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2013-2014.**

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
	HMSA Foundation Crawford Idema Foundation	Friends of Hawaii Charities Grant In Aid		HMSA 30,000 GIA 50,000 Friends 5,000 Crawford 10,000

These funding requests overlap 2 funding cycles. Currently we have \$30,000 from the HMSA Foundation for Jan. – December 2013 and \$10,000 from Crawford Idema Foundation. We are currently applying to the Friends of Hawaii’s Charities for \$5,000 and to the State for a GIA of \$50,000 for the 2013-2014 year.

3. **The applicant shall provide a listing of all other sources of funding that they are trying to obtain for fiscal year 2013-2014.** These figures cover all of the programs of NAMI Hawaii.

- A. NAMI Hawaii Walk – \$ 90,000
- B. NAMI Memberships - \$ 2,500
- C. NAMI Fundraising Letter - \$2,000
- D. Small fundraising events \$ 2,500
- E. Other Donations - \$10,000
- F. Atherton Foundation
- G. First Hawaiian Bank Foundation
- H. Bank of Hawaii Foundation
- I. Wilcox Foundation

4. **State and Federal Tax Credits - None**

IV. Experience and Capability

A. Necessary Skills and Capabilities

The executive director of NAMI Hawaii, Kathleen Hasegawa, has over 40 years of experience working in non-profit organizations with more than 30 years spent as the executive director or a comparable position.

The operations and program manager has 20 years of experience in administrative and grants management in higher education in Oregon and Hawaii.

Sponsored and disseminated by the National Alliance on Mental Illness, the Family-to-Family Education Program was developed in the early 1990s by a psychologist and family member. The overarching goal of Family-to-Family is to guide family members of those with mental illness to emotional understanding, healing, insight, and action.

NAMI Hawaii has been teaching Family to Family classes since 1994.

Family-to-Family teachers are graduates of the Family-to-Family Education Program. They go on to attend a 3 day training sponsored by NAMI National and take an exam to become certified as a Family-to-Family teacher. Also, teachers make a commitment to teach two 12-week sessions of Family-to-Family. Each class is co-facilitated by two Family-to-Family graduates. They provide a good role model for participants as they have experienced the trials and tribulations of being a family member of one living with mental illness.

B. Facilities

NAMI Hawaii has a 2 room office at 770 Kapiolani Blvd. Suite 613, one of the rooms is reserved for use of Family to Family classes and support groups. In addition we utilize space in other non-profits, schools, community centers, churches, offices and hospitals for our classes. All locations are accessible to the handicapped and meet ADA requirements.

V. Personnel: Project Organization and Staffing

A. Proposed Staffing, Staff Qualifications, Supervision and Training

NAMI's executive director has a Master's Degree in Community Economic Development. She has been working in the non-profit sector since 1965 and has been the executive director of several agencies including 2 in Hawaii. Her focus has been primarily related to homelessness, housing and mental health.

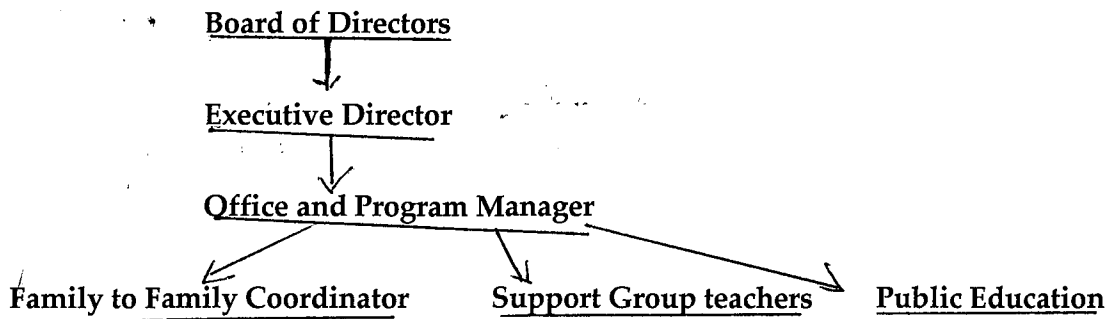
NAMI's Operations and Program Manager has more than 20 years of experience working in higher education administration and program and grant

management. She is also a trained teacher of the Family to Family Education Program.

Working under the auspices of the Executive Director, a Family-to-Family Coordinator performs the administrative duties, etc. The current Family-to-Family Coordinator is a family member of a loved one with mental illness and is a certified Family-to-Family teacher. All of the teachers are also certified teachers in the Family to Family Education Program.

A part of the funding we are requesting is for a trainer to come from NAMI National to carry out a training program for new teachers. We are also requesting funding to have one of our teachers attend a NAMI trainer program on the mainland so that we do not, in the future, need to pay a mainland trainer to come to Hawaii.

B. Organization Chart



VI. Other

- A. **Litigation** – Not applicable
- B. **Licensure or Accreditation**- Not applicable

**DECLARATION STATEMENT OF
APPLICANTS FOR GRANTS AND SUBSIDIES PURSUANT TO
CHAPTER 42F, HAWAI'I REVISED STATUTES**

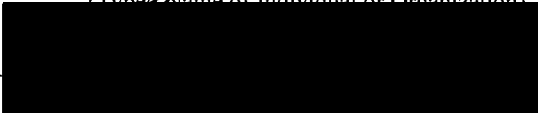
The undersigned authorized representative of the applicant certifies the following:

- 1) The applicant meets and will comply with all of the following standards for the award of grants and subsidies pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is licensed or accredited, in accordance with federal, state, or county statutes, rules, or ordinances, to conduct the activities or provide the services for which a grant or subsidy is awarded;
 - b) Complies with all applicable federal and state laws prohibiting discrimination against any person on the basis of race, color, national origin, religion, creed, sex, age, sexual orientation, or disability;
 - c) Agrees not to use state funds for entertainment or lobbying activities; and
 - d) Allows the state agency to which funds for the grant or subsidy were appropriated for expenditure, legislative committees and their staff, and the auditor full access to their records, reports, files, and other related documents and information for purposes of monitoring, measuring the effectiveness, and ensuring the proper expenditure of the grant or subsidy.
- 2) The applicant meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is incorporated under the laws of the State; and
 - b) Has bylaws or policies that describe the manner in which the activities or services for which a grant or subsidy is awarded shall be conducted or provided.
- 3) If the applicant is a non-profit organization, it meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is determined and designated to be a non-profit organization by the Internal Revenue Service; and
 - b) Has a governing board whose members have no material conflict of interest and serve without compensation.

Pursuant to Section 42F-103, Hawai'i Revised Statutes, for grants or subsidies used for the acquisition of land, when the organization discontinues the activities or services on the land acquired for which the grant or subsidy was awarded and disposes of the land in fee simple or by lease, the organization shall negotiate with the expending agency for a lump sum or installment repayment to the State of the amount of the grant or subsidy used for the acquisition of the land.

Further, the undersigned authorized representative certifies that this statement is true and correct to the best of the applicant's knowledge.

National Alliance on Mental Illness Hawaii
(Typed Name of Individual or Organization)



1/31/2013
(Date)

Kathleen E. Hasegawa
(Typed Name)

Executive Director
(Title)