**STEP 1 – SHIP RTW GRANT ELIGIBILITY: ARE YOU ELIGIBLE TO APPLY?**

**Are you a Washington State Employer covered through the Washington State Department of Labor and Industries’ Worker’s Compensation Insurance?**

- If **No**, Self-Insured employers must work collaboratively with an employer covered through Washington State Department of Labor and Industries’ Worker’s Compensation.

- If **No**, are you a (n):
  - Trade association;
  - Business association;
  - Employee;
  - Labor union;
  - Employee organization;
  - Joint labor and management group?

- If **NO**, are you a (n):
  - Educational institution
  - Training organization
  - External consulting firm
  - Or similar type organization

- If **No**, contact the SHIP program for eligibility determination.

- If **YES**, are you addressing the Return to Work needs of your own workplace for your own employees?

- If **YES**, are you addressing the needs of Return to Work issues in your own workplace for employers/employees that you represent that are covered by Department of Labor and Industries Worker’s Compensation Insurance?

- If **YES**, go to Step 2.

- If **NO**, you must have a partner to be eligible.

- If **YES**, you must partner with an eligible organization in a collaborative relationship which provides partners with the responsibility to perform significant activities under the project and share in decision making.

- If **NO**, contact the SHIP program for eligibility determination.

- If **YES**, go to Step 2.

If **YES**, are you addressing the Occupational Safety & Health needs of your own workplace for your own employees?

**If your organization is required to have a partner/collaborator in order to be eligible to receive a grant, the partner you choose must be eligible on their own without a partner/collaborator. Applicant Organizations who do not need a partner include those entities that are seeking to address solutions to problems for those they represent.**

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**NOTE:** All products produced, whether by the grantee or a subcontractor to the grantee, as a result of a SHIP grant are in the public domain and cannot be copyrighted, patented, claimed as trade secrets, or otherwise restricted in anyway.
When determining the **type of organization** to check on your application, consider the following:

<table>
<thead>
<tr>
<th>TYPE OF ORGANIZATION</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trade Association</td>
<td>Organizations that represent businesses/employers in a specific industry</td>
</tr>
<tr>
<td>Business Association</td>
<td>Organizations that represent businesses/employers more broadly and may include businesses/employers across multiple industries</td>
</tr>
<tr>
<td>Employer</td>
<td>For the purpose of SHIP grants, Employers are those entities that are seeking funding for projects that would benefit their own workplace and employees</td>
</tr>
<tr>
<td>Labor Union</td>
<td>Organizations that represent employees – these tend to be industry specific</td>
</tr>
<tr>
<td>Employee Organizations</td>
<td>Less formalized organizations that represent a group of employees <em>employee organizations, associations, cooperatives, and similar groups whose primary purpose is to serve the welfare of employees or to provide services to employees</em></td>
</tr>
<tr>
<td>Group of Employees</td>
<td>One or more employees from the same employer</td>
</tr>
<tr>
<td>Joint Business/ Labor Group</td>
<td>A collaborative group that is both made up of business and labor groups and/or their representatives addressing needs in specific industries</td>
</tr>
<tr>
<td>Other</td>
<td>Any entity or group that is not seeking to address the needs in their own workplace, industry, trade, etc; or those not seeking to address the needs of their own employees, business or of those they represent.</td>
</tr>
<tr>
<td>-Third Party Organizations</td>
<td>Organizations who provide the activities outlined in the proposal as a part of the work they conduct on an ongoing basis (not directed at their own employees) i.e.: - safety consultation firm - vocational counseling firm</td>
</tr>
<tr>
<td>- Educational Institution</td>
<td>University, college, etc.</td>
</tr>
<tr>
<td>- Self-insured Employers</td>
<td>Employers who are not covered under the state funded workers compensation system</td>
</tr>
</tbody>
</table>

**Do you need a partner?**

Generally all organizations that fall under the “other” category would need a partner to be eligible.

Others that may benefit from a partnership would be:
- Employee Organizations
- Groups of Employees (would likely need buy off from your employer)

Ideally, all products developed should be able to transfer or be usable by other entities doing similar types of work.

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**STEP 2 – SHIP RTW GRANT ELIGIBILITY: IS YOUR PROJECT ELIGIBLE?**

Is your project designed to develop and implement innovative and effective return to work programs for injured workers ___.

If **YES**, are products substantially similar to products that currently existing in the public domain? ___.

If **YES**, contact the SHIP program.

If **NO**, will any portion of your project funding be used to come into compliance with safety and health or other legal requirements? ___.

If **YES**, it is **not eligible** for a SHIP grant.

If **NO**, does your project involve lobbying and political activities or supporting, opposing, or developing legislative or regulatory initiatives? ___.

If **YES**, it is **not eligible** for a SHIP grant.

If **NO**, does your project require the purchase of equipment as an essential element for the project’s success or completion? ___.

If **YES**, is it the primary purpose of your project? ___.

If **YES**, it is **not eligible** for a SHIP grant.

If **NO**, your proposed project may be eligible. Contact the SHIP program if you would like to discuss your concept. Please Note: SHIP funds cannot be used to apply for another SHIP grant or any other grant.

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