In/Tend Incubator Hub Application - Cohort 2

Welcome to the application for the In/Tend Innovation Hub!

The application portal will close and stop accepting further applications once we receive **50 submissions**, or upon reaching **May 6, 2025 at 11:59 PM ET**, whichever comes first. We highly encourage and recommend any teams interested to apply as soon as possible.

We estimate that this application will take you several hours to complete, so we have included a "save & continue" feature. When you advance to the second page, this feature will appear at bottom of your screen.

Applicants should note that using the save and continue feature does not secure your spot as one of the 50 submissions. Only once you submit and reach the thank you page is your application considered complete and counted towards the application count.

1. **Team Name**

Tell us your team's name—be fun and creative! Team names can be a maximum of 35 characters. *

2. Team Members

Please list each team member's first and last name below. *

Team Member 1	
Team Member 2	
Team Member 3	

3. Team Member Information *

	Age	Location (City, State)	Email	Phone Number (XXX-XXX-XXXX)
Team Member 1				
Team Member 2				
Team Member 3				

Logistical Team Information

4. **Have any team members participated as a sub-grantee, prime, or consultant for and/or received any innovation funding from the U.S. Department of Health and Human Services, Office of Population Affairs (OPA)? This includes the following:**

- TPP20 Innovation Networks
- TPP18 Phase 1 Strategies
- TPP19 Tier 1
- TPP15 2A Projects
- TPP15 2B Projects
- TPP Tier 1 Projects
- Title X Family Planning Grantee or Site
- State Personal Responsibility Education Program (PREP)
- Competitive Personal Responsibility Education Program (PREP)
- Personal Responsibility Education Innovative Strategies (PREIS) Program
- Tribal Personal Responsibility Education Program (Tribal PREP)
- Title V Competitive Sexual Risk Avoidance Education (SRAE) Program
- Title V State Sexual Risk Avoidance Education (SRAE) Program
- General Departmental-Funded Sexual Risk Avoidance Education (GD SRAE) Program

*

○ Yes

○ No

5. **Please select which tier and year team member(s) participated in.** *

☐ TPP20 Innovation Networks

☐ TPP18 Phase 1 Strategies

☐ TPP19 Tier 1

☐ TPP15 2A Projects

☐ TPP15 2B Projects

☐ TPP Tier 1 Projects

☐ Title X Family Planning Grantee or Site

☐ State Personal Responsibility Education Program (PREP)

☐ Competitive Personal Responsibility Education Program (PREP)

☐ Personal Responsibility Education Innovative Strategies (PREIS) Program

☐ Tribal Personal Responsibility Education Program (Tribal PREP)

☐ Title V Competitive Sexual Risk Avoidance Education (SRAE) Program

☐ Title V State Sexual Risk Avoidance Education (SRAE) Program

☐ General Departmental-Funded Sexual Risk Avoidance Education (GD SRAE) Program

6. **Have any of your team members been part of an innovation incubator or accelerator program before?** *

○ Yes

○ No

7. **Please list the program(s), project(s) and year(s) you participated.** *

8. **We know you probably do it all, but what is your main responsibility?** *

Team Member 1

Administrative Support/Project Coordinator
Administrator/Manager/Program Manager
Attorney
Caseworker
Communications/Marketing Specialist
Consultant/Freelancer
Corrections Officer
Curriculum Developer
Educator
Executive Director/CEO
Group Home or Residential Care Staff
Healthcare Provider
Policy Analyst/Advocate
Policymaker
Probation Officer/Parole Officer
Psychologist/Psychiatrist
Researcher
Social Worker
Student
Teacher or Other School Personnel
Technical Assistance Provider
Teen or Young Adult
Volunteer
Other (please describe):

Team Member 2

Administrative Support/Project Coordinator
Administrator/Manager/Program Manager
Attorney
Caseworker
Communications/Marketing Specialist
Consultant/Freelancer
Corrections Officer
Curriculum Developer
Educator
Executive Director/CEO
Group Home or Residential Care Staff
Healthcare Provider

Policy Analyst/Advocate
Policymaker
Probation Officer/Parole Officer
Psychologist/Psychiatrist
Researcher
Social Worker
Student
Teacher or Other School Personnel
Technical Assistance Provider
Teen or Young Adult
Volunteer
Other (please describe):

| Team Member 3 | Administrative Support/Project Coordinator
Administrator/Manager/Program Manager
Attorney
Caseworker
Communications/Marketing Specialist
Consultant/Freelancer
Corrections Officer
Curriculum Developer
Educator
Executive Director/CEO
Group Home or Residential Care Staff
Healthcare Provider
Policy Analyst/Advocate
Policymaker
Probation Officer/Parole Officer
Psychologist/Psychiatrist
Researcher
Social Worker
Student
Teacher or Other School Personnel
Technical Assistance Provider
Teen or Young Adult
Volunteer
Other (please describe): |

9. **Please briefly explain why you listed "other" as your main responsibility.**

If multiple team members chose other, please format your answer as follows:

- *Team Member Name: explanation*
- *Team Member Name: explanation*

*

10. **List each team member's organization. If you are a student or independent consultant, you can list your school or affiliation instead.**

Teams may be composed of individuals who come from different organizations. *
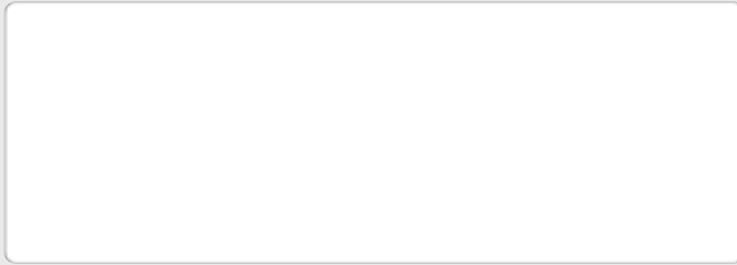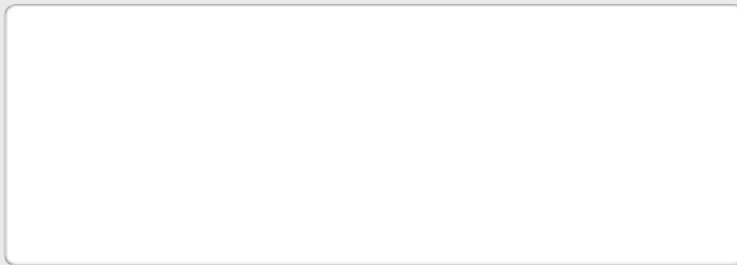
Team Member 1

Team Member 2

Team Member 3

11. **Do you have access to end-users—people who represent the community who is affected by the challenge you wish to solve?** *
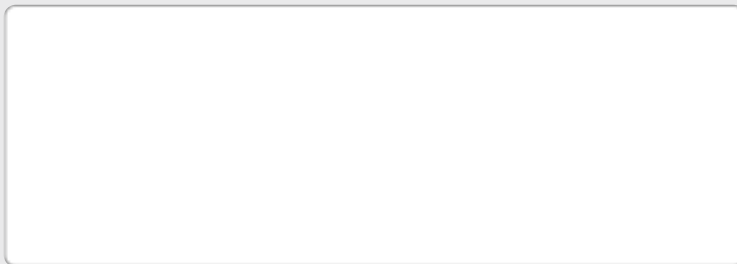
- ○ Yes

- ○ No

- ○ I'm not sure

12. **If yes, please briefly explain how you anticipate reaching end-users to test your prototype while in the In/Tend Incubator.** *

13. **If no, please briefly explain how you anticipate reaching end-users to test your prototype while in the In/Tend Incubator.** *

14. **If not sure, please briefly explain, including how you would envision reaching end-users to test your prototype while in the In/Tend Incubator.** *

15. Where did you learn about this opportunity? *

- ○ Healthy Teen Network Egram
- ○ OPA Newsletter
- ○ OPA Project Officer
- ○ Joint Hub Primer / Info Session
- ○ Industry Event or Conference
- ○ Referral from another Innovation Hub
- ○ Social Media
- ○ Family, Friend, or Colleague
- ○ Other - Write In (Required)

  [   ]

16. Were you referred to us by another Innovation Hub? *

- ○ Yes
- ○ No

If yes, please select which Innovation Hub. *

- ○ In/Tend
- ○ RYSE (Reimagining Young People's Sexual Health Equity)
- ○ youthink
- ○ Breakthrough
- ○ Launch
- ○ TISH (Theory and Innovation Support Hub)

17. **Please read Healthy Teen Network's Guiding Principles and the In/Tend Incubator FAQ. Do you affirm that your team's values and goals are in alignment with Healthy Teen Network and the In/Tend Innovation Hub's values and goals?** *

○ Yes

○ No

18. **Do you affirm that your team is willing to pivot your ideas if our human-centered design process indicates that adjustments are necessary to better reflect end-user needs and effectively address the chosen challenge?** *

○ Yes

○ No

19. **Is everyone on the team willing and able to commit to and work with the In/Tend Innovation Hub program from July 2025 through March 2026?**

To be eligible to participate in the In/Tend Innovation Hub, all team members must commit to the 7-month program.

Teams unable to do so will be ineligible to participate and their application will be disqualified. *

○ Yes

○ No

20. **Would you like to opt in to In/Tend's email list to receive communications about opportunities and events?** *

○ Yes

○ No

Designated Point(s) of Contact

21. **Please identify one team member as the point of contact for communication with the In/Tend Team.** *

Name

| Team Me |
| Team Me |
| Team Me |

Email

[   ]

22. **Please identify one team member as the fiscal point of contact.**

This person will be responsible for receiving, distributing, and managing funds. This person can be the same person as the point of contact for communication. *

Name

| Team Member 1 |
| Team Member 2 |
| Team Member 3 |
| None of us, an organization will be our fiscal point of contact |

Email

[   ]

23. **Please indicate the full name of the organization here:** *

[   ]

Fiscal Responsibilities

24. Please fill out this linked budget template in accordance to the guidance given in the sheet and upload it here. We acknowledge that you might not know how your funds will be used at this time. You will have the opportunity to make changes if selected as part of the cohort, but you need to provide at least some budgetary information based on what you know so far. **Please read the Instructions sheet in the template before filling it out.**

Your budget template should include the following:

- **Travel for In-Person Workshops and other meetings and events:** This is required. Allocate funds for travel, accommodation, and meals for the entire team (3 people) for 2 in-person meetings, each lasting 4 days. If travel outside of the required in-person workshops is needed, allocate that here. All travel should be conducted in accordance with the Federal Travel Regulations. Travel rates will be consistent with those established by the Federal Government GSA rates.
- **End-User Incentives:** This is required. Budget for incentives or payments for end-users who will be supporting and testing your ideas. End-users are the people who represent the community who is affected by the challenge you wish to solve.
- **Materials and Supplies:** Allocate funds for any materials, supplies, or equipment needed to develop and prototype your ideas, including IT/web costs, software, etc.
- **Marketing and Outreach:** Consider setting aside funds for marketing, outreach to engage and recruit with the target audience, including costs such as printing.
- **Consulting and Professional Services:** If needed, allocate funds for consulting services or expert advice to help with specific aspects of your project.
- **Contingency Fund:** Allocate a small portion of the budget as a contingency fund to cover unexpected expenses or emergencies up to 3% of the total budget.
- **Conferences:** Allocate funds to register and attend conferences to showcase your work (e.g., Healthy Teen Network Annual Conference).
- **Fringe Benefits:** Fringe Benefits are extras beyond salary and wages that enhance your total compensation. This includes things such as health insurance, paid time off, and more. Allocated if needed.
- **Indirect Costs/Overhead:** Up to 10% max of the total $90,000 can be used for indirect costs. Indirect costs/overhead are anything not project specific to your work as an IDT, but are still necessary for you to work, such as rent for a facility you were already working in before joining In/Tend. This is not a required line item.

We ask that you please upload the sheet as a CSV (.csv) or Excel sheet (.xls or .xlsx). When uploading, please be sure to rename your file to include your team name. Please format it as follows: *TEAMNAME_Budget_Template.xlsx* *

> Browse...

25. . *

☐ **By checking this box, I acknowledge our team will comply with the following guidelines.**

We have filled out the budget template to the best of our ability.
Our team will attend and fully participate in at least 2 in-person events and at least 4 online events.
Our team will use the funds given in accordance to the guidelines provided.
Our team will pivot ideas if the human-centered design process indicates that adjustments are necessary to better reflect end-user needs and effectively address the chosen challenge.

Choose Your Own Adventure – Short Answer Section Instructions

Welcome to the "Choose Your Own Adventure" portion of the application. Your team will be asked to answer the first 3 questions in a video and the last 5 questions as written answers. We do this to cater to different learning and sharing modalities, allowing you to showcase your team with more creative freedom. Please follow the guidelines below for each answer type:

- Written responses should be **3,500 characters or less (approximately 700 words or fewer).** Unless stated, external links are not allowed; the selection committee will disregard any links included in answers.
- **Videos should not be longer than 2 minutes and 30 seconds per answer.** We cannot guarantee videos longer than 2 minutes and 30 seconds will be watched in their entirety by the selection committee.
    - You must upload your video answers to any publicly accessible platform, such as Google Drive via a public share link or (unlisted) YouTube videos.
    - Please make sure that links to videos are publicly accessible by testing the links before submitting your application. Any video that is not accessible by the Selection Committee will be disregarded.
    - Here is some guidance on a few platforms below, and we encourage you to explore what platform makes most sense for you and your team.
        - How to upload and share a video using Google Drive
        - How to share an unlisted video on YouTube

We know team members might have different views on some of the questions. Please include these differences in your team's answers. Your responses should show the team's overall thoughts and can mention individual ideas, but we don't want separate answers from each person.

Short Answer Section

Page description:
Please answer each question below as directed.

As a reminder, each video answer should not be longer than 2 minutes and 30 seconds per answer, and each written answer must be 3,500 characters or less (approximately 700 words or less). Unless stated, external links are not allowed; the selection committee will disregard any links included in answers.

1. [Video] Team Introduction

Tell us about yourselves! Using a Team Manifesto, outline your team's values, roles, and work style, as well as detail your individual strengths, areas of growth, and contributions to the team dynamic.

Here are some examples of manifestos in different formats:

- Health Justice Manifesto
- How to Create a Culture Manifesto for Your Organization
- A Personal Manifesto

Make sure that you cover the following:

For each team member...

- Who are you?
- How do you show up in a space?
- What do you bring to the table as a person and as a professional?
- What do you like to do outside of work? What fills you up?

For the Team...

- History of collaborative work
- What are your team's strengths and areas of growth?
- Describe the most fulfilling project or initiative your team has undertaken together and why it was meaningful to you.

Please share the link to your video below and make sure your link is public. *

2. [Video] Support

What does your team want to learn from this experience? What type of support does your team anticipate

needing during the In/Tend Incubator program? This support could include financial support, additional

knowledge or skills, mentorship, or other resources.

Please share the link to your video below and make sure your link is public. *

3. [Video] Motivation

What excites your team about the prospect of participating in the In/Tend Incubator Hub?

Please share the link to your video below and make sure your link is public. *

4. [Written] Challenge

Please describe the challenge you wish to address during your time with the In/Tend Incubator

Hub. Describe the connection you have to this challenge, personal or otherwise. *

5. [Written] Idea:

Please describe the idea. Provide us as many details as possible, including your process, or how you came to identify this idea as a viable concept to address the challenge. Who did you involve in the development of the idea? How were end users engaged? Who owns the idea (if any, party of individual)?

*

6. [Written] Prototype:

Do you already have a prototype based on insights you have gathered from end-users (i.e., the community you are working with)? *

    ○ Yes

    ○ No

If yes, please:

- Describe your prototype in detail;
- Link any draft materials you have of your prototype, such as sketches, demos, wireframes, etc. If needed, please upload materials into an aggregated place, such as a public Google Drive Folder or Box folder, and paste the share link below.

*

7. [Written] Imagine this

Imagine your team has been working on a project to cultivate a new type of flower called Intentia blossoms

that can thrive in any environment and can be a sustainable light source as they can glow in the dark.

However, after months of research and experimentation, the flowers are not performing as expected.

- What do you do now?
- How does your team respond to this setback?

*

8. [Written] It's not bragging if it's a fact

What is outstanding about your team that might set you apart from others?   *

Thank You!

Thank you for submitting your application for the In/Tend Innovation Hub!

You will be notified of your application status no later than **June 16, 2025.**

If you have any questions, please email innovation@healthyteennetwork.org

We also welcome any feedback on your application experience. Please share your thoughts by completing this short survey.