

Call for Request for Applications: Youth Engagement Programs in Healthcare & Allied Health

The University System of New Hampshire (USNH) Rural Health Transformation HUB (USNH RHT HUB) invites Requests for Applications (RFAs) from organizations seeking support to implement or expand youth engagement programs that encourage interest in healthcare and allied health professions, particularly within rural communities.

This RFA is for programs conducted from June 1st through August 31st of this year.

Purpose

The USNH RHT HUB is one of five HUBs funded through the Governor's Office of New Opportunities & Rural Transformational Health (GO-NORTH) which received funding through the Center for Medicare & Medicaid Services (CMS).

USNH aims to retain a skilled rural health workforce through education, training, and career pathways by supporting initiatives that build a locally rooted health workforce pipeline. This call seeks programs that engage youth (middle school through young adults) through career exposure, education, mentorship, and experiential learning aligned with healthcare fields.

Eligible Applicants

Eligible organizations include K–12 schools and districts, higher education institutions, healthcare providers and clinics, community-based and youth-serving organizations, and workforce development partners. Collaborative proposals are encouraged.

Program Focus Areas

Programs may include career exploration, job shadowing, healthcare camps or clubs, mentorship models, outreach to rural and underserved youth, and initiatives highlighting rural health, public health, or community-based care.

Expected Outcomes & Alignment with GO-NORTH Objectives

Applicants should describe how expected outcomes align with RHT HUB objectives, including building the rural workforce pipeline, advancing health access, strengthening cross-sector partnerships, and supporting sustainable systems change.

Total Award Pool

The USNH RHT HUB has allocated \$60,179 in total for programs conducted from June 1st through August 31st of this year.

RFA Submission Guidelines

RFAs (2–3 single-spaced pages maximum) should include an organization overview, program description, target population, expected outcomes, requested financial support from the USNH RHT HUB, key partners, and an anticipated timeline.

Selection Criteria

Criterion	Description	Max Points
Alignment with Rural Workforce Pipeline Goals	Strength of connection to healthcare career pathways that address rural workforce shortages; exposure to high-need roles; connection to regional providers or workforce partners	25
Reach into Rural and Underserved Communities	Degree to which the program prioritizes rural youth, underserved populations, or participants facing access barriers	20
Program Design and Participant Experience	Quality of engagement activities such as mentorship, job shadowing, simulation, camps, structured exploration, or experiential learning	15
Partnerships and Cross-Sector Collaboration	Strength and clarity of collaboration among schools, healthcare providers, workforce organizations, and community partners	15
Expected Outcomes and Measurable Impact	Defined participant targets, career exposure milestones, evaluation approach, and alignment with workforce pipeline outcomes	10
Feasibility and Summer Implementation Readiness	Evidence that the program can be successfully delivered between June 1 and August 31 with staffing, partners, and timeline in place	10
Sustainability and Long-Term Pipeline Contribution	Potential to extend beyond a one-time activity and connect participants to future education or workforce pathways	5
	TOTAL	100

Submission and Review

RFAs should be submitted to Ken La Valley, Executive Director Rural Health Education at ken.lavalley@unh.edu. RFAs should be formatted at PDF or MS Word documents.

RFAs will be reviewed on May 29th and awardees will be contacted beginning June 1st.

This program is supported by the Centers for Medicare & Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$204,016,550.20 with 100 percent funded by CMS/HHS.