



## **Grants Network: Grants Research and Knowledgebase**

The Department of Research and Development (R&D) is pleased to offer community-based nonprofit organizations within the County of Hawai'i free access to its Grants Network subscription. Grants Network is an online program available to local governments. The County of Hawai'i added the capability for free access for island nonprofits to its Grants Network subscription.

Please be advised that the County reserves the right to cancel service or to stop issuing access at any time based upon the County's ability to manage the Grants Network service.

### **How to apply**

Please provide contact information on the attached form and sign where indicated. The vendor will issue you a unique user ID and password for your individual use.

### **Terms and Conditions**

Your signature on the application page indicates that you and your organization:

1. Will incur no cost for the full access to Grants Network, training for users, and basic customer service.
2. Agree not to share or release your ID or password to any one else, or change the software in any way. If people or entities outside your organization use your usernames to access Grants Network, eCivis™ reserves the right to terminate the county's contract.
3. Understand that you may use Grants Network for your normal organizational activities, and that you may not use Grants Network for purposes of commercial sale, redistribution, broadcast or transfer of information to entities or people outside your organization.
4. Agree not to remove any copyright notices from printouts of Grants Network. eCivis™ is the sole owner of Grants Network and any associated intellectual property rights. eCivis™ claims U.S. and foreign copyright ownership with respect to Grants Network.
5. Agree to provide R&D with notice of awards received that were located through Grants Network.
6. Agree to update your contact list as needed.
7. Acknowledge that R&D will collect and monitor certain statistics in order to evaluate use and value of this subscription. Much of this information is automatically collected through the Grants Network system.



# Grants Network provided by the County of Hawaii

## Application for Access

Please return your **completed** and **signed** form to R&D.

Contact for: \_\_\_\_\_  
Name of Organization (Please type or print clearly)

\_\_\_\_\_  
Contact Name and Title

\_\_\_\_\_  
\*Physical Address of Organization Street/City/Zip Code

\_\_\_\_\_  
\*Mailing Address for Organization

\_\_\_\_\_  
\*Telephone number / Fax Number Email address

\_\_\_\_\_  
Organization URL

\* please note if this information is for the organization, or for the contact

Please Type or Print Clearly

	NAME	TITLE/POSITION	EMAIL ADDRESS AND ADDRESS/TELEPHONE
1			
2			
3			
4			
5			

Use additional pages or attach a separate list as needed

By signing below, you (the organization, signer, and eCivis users) attest that you have read, understood and agreed to the Terms and Conditions listed on the preceding information page:

By: \_\_\_\_\_  
Please sign your name here Please print your name and title here Date signed

Mail or Fax to: Department of R & D, 25 Aupuni St., Suite 1301, Hilo, HI 96720, fax 935-1205