



NOTICE OF FUND AVAILABILITY (NOFA) – GRANTS

NAME OF GRANT PROGRAM: Comprehensive Tobacco Control Program 2026	NOFA REFERENCE NO.: DCHS26CTC
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PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS SHALL BE USED:

Comprehensive Tobacco Control Program will work to support evidence-based strategies that reduce youth tobacco and nicotine use through youth engagement and point-of-sale interventions. This funding opportunity prioritizes peer-led youth prevention efforts and retailer education and compliance strategies in communities disproportionately impacted by tobacco-related harms.

ESTIMATED AMOUNT OF MONEY IN THE GRANT PROGRAM: \$ 898,157.00	AWARD PERIOD: From 5/1/26 Through 4/30/27
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ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:

1. Terms and Conditions for the Administration of Grants. [\(Click here to download\)](#)
2. General and specific grant compliance requirements issued by the awarding division or commission.

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:

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| <input checked="" type="checkbox"/> Municipal Government | <input checked="" type="checkbox"/> Institution of Higher Education |
| <input checked="" type="checkbox"/> County Government | <input checked="" type="checkbox"/> Hospital |
| <input checked="" type="checkbox"/> State Government | <input checked="" type="checkbox"/> Non-profit Organization (501(c)3) |
| <input type="checkbox"/> Indian Tribal Gov't (Federally Recognized) | <input type="checkbox"/> Other: |

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:

Applicants must have a demonstrated history and experience in developing, implementing and evaluating tobacco control evidence-based programs in New Jersey with a focus on environmental, health systems, health communication and community mobilization/linkages strategies. Applicant must have a valid NJ Tax Clearance Certificate and a valid NJ Charities Registration Letter of Compliance (if applicable) submitted with their application.

APPLICATION PROCEDURES:

Eligible applicants will submit grant applications through the Department's System for Administering Grants Electronically (SAGE), in accordance with the Request for Applications (RFA). The RFA may be requested from the contact listed below.

1. The Program Management Officer will make a grant application available to all "Eligible" agencies in the System for Administering Grant Electronically (SAGE), <https://dohsage.intelligrants.com/>.
2. The applicant will submit a grant application in accordance with the grant terms and conditions.

FOR INFORMATION CONTACT:

NAME: Siobhan Pappas, PhD, Program Manager	TELEPHONE: 6099135699
PROGRAM: Office of Tobacco Control and Prevention	E-MAIL: siobhan.pappas@doh.nj.gov
MAILING ADDRESS: New Jersey Department of Health 55 North Willow St, 5th Floor Trenton, NJ 08265	

DATE ON WHICH APPLICATION WILL BE AVAILABLE: 06/08/26

SAGE PROGRAM NAME: Comprehensive Tobacco Control Program (CTCP) 2026

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED: 06/19/26

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS: 06/26/26