

Instructions for Requesting Option 3 ARP Formula Funds on the Prime in eGrants

For Cost Reimbursement and Planning Grant Primes

1. On the State Commission’s prime application, navigate to Budget Section 1

Start New Grant/Previous Grantee
back
save
next

- Applicant Info
- Application Info
- Narratives
- Budget Section 1
- Budget Section 2
- Budget Section 3
- Funding/Demographics
- Subapplications
- Review
- Authorize and Submit

Grant Application Info

Grant Application ID:
██████████

NOFA: FY 2024 AmeriCorps
State and Territory Commission
(New and Cont)

Type: New Grant/Previous
Grantee
Status: Prime Applicant Non-
Competitive Entry

Legal Applicant Info

Budget Section I. Program Operating Costs

Please enter the necessary budget information for your project.

Personnel Expenses: Add a new budget item

Position/Title	Qty	Annual Salary	% Time	Total Amount	CNCS Share	Grantee Share	edit	del
Subtotal								

Personnel Fringe Benefits: Add a new budget item

Purpose	Calculation	Total Amount	CNCS Share	Grantee Share	edit	del
Subtotal						

Staff Travel : Add a new budget item ?

Purpose	Calculation	Total Amount	CNCS Share	Grantee Share	edit	del
Travel to CNCS-Sponsored		\$0	\$0	\$0	edit	

2. Scroll down to the Other Program Operating Costs section and click Add a new budget item.

Purpose	Calculation	Total Amount	CNCS Share	Grantee Share	edit	del
Subtotal						

3. Provide information about the ARP Funds, as instructed in the snip.

Purpose: ARP Funds from ARP Prime

Calculation: ARP Formula Option 3 Funds to be moved to subgrants on this prime during the FY 2024 program year.

Provide Total Amount, CNCS Share Amount, and Grantee Amounts.

Budget - Other Program Operating Costs

cancel save & close

Please enter the necessary budget information for your project.

* Purpose: ARP Funds from ARP Prime

Calculation: ARP Formula Option 3 Funds to be moved to subgrants on this prime during the FY 2024 program year

* Total Amount: \$ 500000.00

* CNCS Share: \$ 500000

* Grantee Share: \$ 0

cancel save & close

4. Amount will be reflected on the Parent Org Subtotal of the Funding Summary Chart.

For Official Use Only

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AmeriCorps State Funding Summary Chart

Legal Applicant: **Commission Name**

Grant Number:

Grant Year:

Application ID Number/ Operating Site/ Applicant	Program Name	App Type	Funding Type	# Yrs Rcvng CNCS Funds *	Corporation Funds		Grantee Funds		Reqd Match %	Approved Alternate Match Schedule or Waiver	Total MSYs	Cost/ MSY
App ID # / Legal Applicant Name 1	Best AmeriCorps Program Ever	N		10	681,446	33.77%	1,336,316	66.23%	50.00%	N/A	30.0	\$22,714.87
App ID # / Legal Applicant Name 2	AmeriCorps Superstars	N		10	414,000	50.00%	414,000	50.00%	32.00%	N/A	18.0	\$23,000.00
App ID # / Legal Applicant Name 3	Getting Things Done!	A		10	165,732	47.49%	183,249	52.51%	30.00%	N/A	6.0	\$27,622.00
App ID # / Legal Applicant Name 4	Community AmeriCorps Solutions	C		3	68,726	98.57%	1,000	1.43%	24.00%	Waiver	10.0	\$6,872.60
App ID # / Legal Applicant Name 5	Second Best AmeriCorps Program Ever	C		10	425,500	39.56%	650,192	60.44%	50.00%	N/A	18.5	\$23,000.00
App ID # / Legal Applicant Name 6	Improving Lives	N		0	74,636	71.56%	29,669	28.44%	24.00%	N/A	0.0	\$0.00
App ID # / Legal Applicant Name 7	Community Heroes AmeriCorps	N		10	459,974	66.75%	229,122	33.25%	26.00%	N/A	20.0	\$22,998.70
Operating Sites Subtotal				n/a	2,290,014	44.60%	2,843,548	55.40%	n/a		102.5	\$22,341.60
Parent Org Subtotal				n/a	500,000	*****	0	0%	n/a		0.0	\$0.00
Totals				n/a	2,790,014	49.52%	2,843,548	50.48%	n/a		102.5	\$27,219.65

*Based on number of years that a program has received funding from the Corporation as outlined in CFR 45 § 2521.60

For Fixed Prime

1. On the State Commission's prime application, navigate to Budget Section 2.

The image shows a vertical navigation menu on the left side of a web application. The menu items are: Applicant Info, Application Info, Narratives, Budget Section 2 (highlighted with a grey background and an orange arrow icon), Funding/Demographics, Subapplications, Review, and Authorize and Submit. Below the menu is a section titled "Grant Application Info" in a bold orange header. This section contains the following text: "Grant Application ID:" followed by a blacked-out ID, "Grant #:" followed by a blacked-out number, and "NOFA: FY 2024 AmeriCorps State and Territory Commission Fixed and EAP (New and Cont)".

2. Scroll down to the Fixed Award part of that screen. Select edit.

Fixed Award : Add a new budget item ?

Purpose	Calculation	Total Amount	CNCS Share	Grantee Share	edit	del
Program grant request		\$0	\$0	\$0	edit	
Subtotal		\$0	\$0	\$0		

3. Provide information about the ARP Funds, as instructed in the snip.

Purpose: This field is not editable.

Calculation: ARP Formula Option 3 Funds to be moved to subgrants on this prime during the FY 2024 program year.

Provide Total Amount, CNCS Share Amount, and Grantee Amounts.

Budget - Fixed Award

Please enter the necessary budget information for your project.

* Purpose: Program grant request

Calculation:

* Total Amount: \$

* CNCS Share: \$

* Grantee Share: \$