2010 AmeriCorps State and National

APPLICATION INSTRUCTIONS

Competitive including Professional Corps
Education Award Program
Fixed-Amount Pilot
States and Territories without Commissions
Indian Tribes

Deadline

January 26, 2010

OMB Control #: 3045-0047
Expiration Date: 5/31/2012

IMPORTANT NOTICE

These application instructions conform to the Corporation for National and Community Service's (the Corporation's) online grant application system, eGrants. The eGrants system is designed to serve the Corporation's applicants and grantees. All Corporation funding announcements are posted on our web site www.cns.gov and at www.grants.gov.

Public Burden Statement: The Paperwork Reduction Act of 1995 requires the Corporation to inform all potential persons who are to respond to this collection of information that such persons are not required to respond unless it displays a currently valid OMB control number. (See 5 CFR 1320.5(b)(2)(i)).

Time Burden: The time required to complete this collection of information is estimated to average 40 hours per applicant.

Use of Information: The information collected constitutes an application to the Corporation for grant funding. The Corporation evaluates the application and makes funding decisions through the Corporation's grant review and selection process.

Effects of Non-Disclosure: Providing this information is voluntary; however, failure to provide the information would not allow the Corporation to assess the applicant's request for funding. In this case, it will not be possible to consider granting funds to the applicant.

Privacy Act: Information provided for this collection may be shared with federal, state, and local agencies for law enforcement purposes.

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Application Instructions
NEW AND RECOMPETING PROGRAMS

Application Process

Please use the following application instructions if you are a new or recompeting applicant applying for the following grants: State and National Competitive including Professional Corps, State and National Education Award Program (EAP), Fixed-Amount Pilot Program, States and Territories without Commissions, and Indian Tribes.

The deadline for this competition is **January 26, 2010** at **5:00 p.m. Eastern Time.**

The Corporation requires that all applicants make every effort to submit their applications electronically utilizing the Corporation's web-based application system, eGrants. If extenuating circumstances make this impossible, send a hard copy of your application to the following address, via overnight carrier (non-U.S. Postal Service because of security–related delays in receiving mail from the U.S. Postal Service). All requirements described herein apply to hard copy applications.

Corporation for National and Community Service
ATT: Office of Grants Policy and Operations/ASN Application
1201 New York Avenue NW
Washington, DC 20525

Late applications may be accepted only if the applicant submits a letter explaining the extenuating circumstance which caused the delay. Such letter must be sent to the Corporation via email to americorpsnational@cns.gov for multi-state or Indian Tribes applications submitted directly to the Corporation and to americorpscapplications@cns.gov for applications submitted to State Commissions. Late applications are evaluated on a case-by-case basis.

We strongly recommend that you create your eGrants account and begin your application at least three weeks before the deadline and begin pasting your application into eGrants no later than ten days before the deadline. This will allow you time to address technical issues prior to the deadline

Contact the eGrants Help Desk at 888-677-7849 (talk to an associate or leave a detailed message) or e-mail egrantshelp@cns.gov immediately if a problem arises while you are creating your account, preparing, or submitting your application. Be prepared to provide your application ID. If technical issues are preventing you from submitting your application in eGrants by the deadline, you must contact the eGrants Help Desk prior to the 5:00 p.m. Eastern Time deadline to explain your technical issue and get a ticket number. If your issue cannot be resolved by the deadline, you must continue working with the eGrants Help Desk to submit your application.

Use these instructions in conjunction with the *Notice of Funds Available* or *Notice of Federal Funding Opportunity (Notice)* for the year in which you are applying, and the AmeriCorps Regulations, 45 CFR §§ 2520–2550. **The *Notice* includes deadlines, eligibility requirements, submission requirements, maximum amount of funding per Member Service Year (MSY),**

and other information that changes year-to-year, for all AmeriCorps grant programs. One MSY is the equivalent of a full-time term of service.

The *Notice* can be found at http://www.americorps.org/for_organizations/funding/nofa.asp. The full regulations are available online at www.gpoaccess.gov/ecfr.

The AmeriCorps regulations include the selection criteria used to select applications for funding and other pertinent information (see Table 1, below).

Table 1: Program Requirements in the AmeriCorps Regulations

Requirements and Selection	Citation in the AmeriCorps Regulations
Member Service Activities	§2520.20 - §2520.55
Prohibited Activities	§2520.65
Tutoring Programs	§2522.900-2522.950
Matching Funds	§2521.35-2521.90
Member Benefits	§2522.240-2522.250
Calculating Cost Per Member Service Year (MSY)	§2522.485
Performance Measures	§2522.500-2522.650
Evaluation	§2522.500-2522.540 and §2522.700-2522.740
Selection Criteria and Selection Process	§2522.400-2522.475

If there is any inconsistency between the AmeriCorps regulations, the *Notice*, and the Application Instructions, the order of precedence is as follows:

1. AmeriCorps regulations 45 CFR §§ 2520–2550 take precedence over the
2. *Notice of Federal Funding Opportunity*, which takes precedence over the
3. Application Instructions.

Do not submit any other supplementary materials such as videos, brochures, letters of support, or any other item not requested in these application instructions. The Corporation will not review or return them.

Other Information to Know before Applying: In addition to consulting the *Notice* and AmeriCorps regulations as directed in these instructions, multi-state applicants may also consult the Corporation web site for a schedule of technical assistance conference calls, Frequently Asked Questions, and other resources targeted to AmeriCorps applicants. Applicants in a single state should consult with their State Commission.

Coordination with State Commissions: The Corporation expects state and multi-state grantees to consult and coordinate activities at the local level, as specified in the statute Section 131. [42 U.S.C. 12583]. The list of State Commissions can be found here: http://www.nationalservice.org/about/contact/statecommission.asp.

Specifically, multi-state applicants and grantees are expected to:

- Consult with the State Commissions of each state in which the organization plans to operate.
- Provide State Commissions with a list including contact information for National programs in their state after grants are awarded, and update this list on an annual basis.
- Participate in the State Commission's annual needs assessment and training plan development activities, and in the development of their state service plan, as well as appropriate training and other events.

- Include State Commissions on the National grantee's mailing list and invite them to appropriate training and other events.

State Commissions are expected to:

- Consider the schedules and needs of National programs in their states when planning annual events and technical assistance activities.
- Include National programs in their annual needs assessment and training plan development activities, and in the development of their state service plan.
- Add AmeriCorps National personnel in their state to their mailing list and invite them to appropriate training and other events.

Program Requirements

You will find below information relevant to the AmeriCorps State and National grant programs. .

A. State and National Competitive, including Professional Corps

These grants are awarded to organizations that are put forward to the Corporation to participate in a nationwide competition by Governor-appointed State or Territory Commissions (in American Samoa and Guam) and to organizations that apply directly to the Corporation and propose to operate AmeriCorps programs in more than one state. Applicants are eligible to apply for funding for a portion of the members' living allowance and program costs.

Prior to submission of a grant application to the Corporation, an applicant proposing to operate a program in two or more states is expected to consult with the State Commission of the state in which it intends to operate. Such an applicant must include in its application a description of the manner and extent to which the organization consulted with the State Commission in each state where the applicant intends to operate and the nature of the consultation. The Corporation will solicit the views of State Commissions regarding applications received for programs operating in their states.

The Professional Corps program model places AmeriCorps members as teachers, health care providers, police officers, engineers, or other professionals in communities where there is an inadequate number of such professionals. Applicants can apply for up to $2,500 per MSY. Applicants are eligible to apply for funding for a portion of program costs, and use their own or other resources to pay the members' living allowance and additional member costs.

Applicants may also apply for up to $50,000 to support start-up costs for a new Professional Corps program. An organization proposing a Professional Corps program that operates in more than one state applies directly to the Corporation. A Professional Corps program that operates in only one state must apply for a state and national competitive grant from the State Commission of the state in which it intends to operate.

B. State and National Education Award Program (EAP)

Organizations put forward to participate in a nationwide competition by Governor-appointed State Commissions; and organizations that operate their AmeriCorps program in more than one state may apply. Grantees are eligible to apply for a small grant and use their own or other

resources for the members' living allowance and program costs. Applicants can apply for up to $800 per MSY. There is no match requirement for EAP grants.

C. Fixed-Amount Pilot
Organizations put forward to participate in a nationwide competition by Governor-appointed State Commissions, organizations that operate their AmeriCorps program in more than one state, Professional Corps, States and Territories without Commissions, and Indian Tribes may apply to receive a fixed-amount grant for a full-time program. There is no match requirement for fixed-amount grants. Professional Corps fixed-amount applicants are not eligible to apply for $50,000 to support start-up costs.

The Fixed-Amount Pilot is only available for new and recompeting applicants. Second and third year continuation applicants must submit a new application if they are interested in participating in the Fixed-Amount Pilot.

D. States and Territories without Commissions
Applicants in South Dakota, Puerto Rico, the Territory of the Virgin Islands, and the Commonwealth of the Northern Mariana Islands may apply directly to the Corporation. Applicants are eligible to apply for funds for a portion of the members' living allowance and program costs. State or territory government entities are not eligible to apply.

E. Indian Tribes
The Corporation sets aside 1 percent of grant funds to support programs operated by Indian Tribes selected by the Corporation on a competitive basis. Applicants are eligible to apply for funds for a portion of the members' living allowance and program costs. Indian Tribe is defined as a federally recognized Indian Tribe, band, nation, or other organized group or community, including any Native village, Regional Corporation, or Village Corporation, as defined under the Alaska Native Claims Settlement Act (43 U.S.C. § 1602), that the United States Government determines is eligible for special programs and services provided under federal law to Indians because of their status as Indians. Indian Tribes also include tribal organizations controlled, sanctioned, or chartered by one of the entities described above.

New and Recompeting Applicants
SELECTION PROCESS AND CRITERIA

In evaluating applications for funding, reviewers will assess program design, organizational capability, and cost-effectiveness and budget adequacy. Please see the AmeriCorps regulations, 45 CFR §§ 2522.420–2522.448, for additional detail regarding these criteria and what reviewers will assess in each category.

Table 2: Basic Selection Criteria: Categories, Sub-Categories, and Respective Weights

Category	Percentage	Sub-Categories
Part A: Program Design	50%	Rationale and Approach (10%)
		Member Outputs and Outcomes (20%)
		Community Outputs and Outcomes (20%)
Part B: Organizational Capability	25%	No sub-categories
Part B: Cost-Effectiveness and Budget Adequacy	25%	Cost-Effectiveness (15%)
		Budget Adequacy (10%)

Section 2522.450 of the AmeriCorps regulations addresses types of programs or program models that may receive special consideration in the selection process. Section 2522.455 addresses how you can find out about additional priorities governing the selection process. Section 2522.470 addresses other factors or information the Corporation may consider in making final decisions.

Submitting Your Application in eGrants

Your application consists of the following components. Please make sure to complete each one.

I. Applicant Info
II. Application Info
III. Narratives
IV. Performance Measures
V. Documents
VI. Budget
VII. Review, Authorize, and Submit
VIII. Survey on Ensuring Equal Opportunity for Applicants (Optional)

In eGrants, before Starting Section I, you will need to:

- Start a new Grant Application
- Select a Program Area (AmeriCorps)
- Select a NOFA AmeriCorps State and National FY 2010 (New), AmeriCorps National Professional Corps FY 2010 (New), AmeriCorps Indian Tribes FY 2010 (New). Applicants applying for a State or National Education Award Program or the fixed-amount pilot grant must select the either the AmeriCorps State or National Fixed-Amount (New) NOFA.

I. Applicant Info

In eGrants, complete the Applicant Info Section (Attachment B). This section is particularly important for Corporation data collection and evaluation. Please take the time to reflect your program activities accurately in this section.

- In the Program Info Section, select existing program if you are recompeting, or enter new if you are applying for the first time.
- If you are a new program, enter your contact information into the fields that appear.

- Select a primary Program Model, and a secondary Program Model, if appropriate.
- Then select characteristics that fit your project under Program Design, Program Location, and Program Focus. Enter or select a Program Director and Program Website URL.

II. Application Info

Information entered in the Applicant Info, Application Info, and Budget sections will populate the SF 424 Facesheet. **If you are submitting your application in hard copy, you will find the SF 424 in Attachment A.**

In the Application Info Section enter:

- Areas affected by your program.
- Requested project period start and end dates. You may not request a program start date earlier than June 15. First-time grantees should not expect to start until late summer or early fall.
- If you are delinquent on any federal debt.
- State Application Identifier: Enter N/A.
- State Single Point of Contact: pre-filled "No, this is not applicable."
- If you plan to request a waiver of the volunteer leveraging or match requirements.

III. Narratives

The narrative section of the application is your opportunity to convince reviewers that your project meets the selection criteria. Below are some general recommendations to help you present your project in a way the reviewers will find compelling and persuasive.

- **Lead from your program strengths and be explicit.** Do not make the mistake of trying to stretch your program description to fit each strategic initiative, special consideration, and priority articulated in the regulations or the *Notice.*
- **Be clear and succinct.** Reviewers are not interested in jargon, boilerplate, rhetoric, or exaggeration. They are interested in learning precisely what you intend to do, and how your project responds to the selection criteria presented below.
- **Avoid circular reasoning.** The problem you are addressing should not be described as the lack of the program you are proposing.
- **Explain how.** Avoid simply stating that the criteria will be met.
- **Don't make assumptions.** Even if you have received funding from the Corporation in the past, do not assume your reviewers know anything about you, your program, your partners, or your beneficiaries. Avoid overuse of acronyms.
- **Use an impartial proofreader.** Before you submit your application, let someone who is completely unfamiliar with your project read and critique the project narrative.

In eGrants, you will enter text for Section A. Rationale and Approach, B. Member Outputs and Outcomes, C. Community Outputs and Outcomes, D. Organizational Capacity, E. Cost Effectiveness and Budget Adequacy, and F. Evaluation Plan. **You may not exceed 71,000 characters in these six sections combined. The character count includes spaces and punctuation.**

Please note that the Narratives Section also includes fields for Clarification Information, Amendment Justification, and Continuation Changes. **These are not required fields. They will be used to enter information for clarification following review, request amendments once a grant is awarded, and enter changes in the narrative in continuation requests. Please enter N/A in these fields.**

The selection criteria from the AmeriCorps regulations are included in the ruled boxes below in this font. Reviewers will assess your application against the selection criteria. The bullets that follow the criteria are recommendations on how to best respond to the criteria. To best respond to the criteria, we suggest that you address each bullet if it pertains to your application.

A. Rationale and Approach

Criteria

§ 2522. 425 What does the Corporation consider in assessing Program Design? (50%)

In determining the quality of your proposal's program design, the Corporation considers your rationale and approach for the proposed program, member outputs and outcomes, and community outputs and outcomes.

(a) *Rationale and approach (10%).* In evaluating your rationale and approach, the Corporation considers the following criteria:

(1) Whether your proposal describes and adequately documents a compelling need within the target community, including a description of how you identified the need;

(2) Whether your proposal includes well-designed activities that address the compelling need, with ambitious performance measures, and a plan or system for continuous program self-assessment and improvement;

(3) Whether your proposal describes well-defined roles for participants that are aligned with the identified needs and that lead to measurable outputs and outcomes; and

(4) The extent to which your proposed program or project:

(i) Effectively involves the target community in planning and implementation;

(ii) Builds on (without duplicating), or reflects collaboration with, other national and community service programs supported by the Corporation; and

(iii) is designed to be replicated.

Addressing the Criteria

Compelling Community Need:

- Describe the community need that you will address within the target community.
- Why did you select this need as your focus?
- How did you identify the need?
- Provide documentation of the need.
- **If your program will operate at multiple sites**, demonstrate a need in each community you propose to serve.

Description of Activities and Member Roles:

- Describe the activities you propose to address the need.
- Describe current efforts of your organization and planned partners to address the need.

- What will be the member's roles in these activities, and how do the member roles relate to addressing the need as distinct from staff or volunteer roles? Discuss your program structure including number of members, where members will serve (for example, at the applicant organization or at local service sites). How do the types of member slots you are requesting (for example, full-time, half-time, quarter-time, etc.) align with the program design and activities? See Budget Instructions for a chart that lists slot types, minimum hours served, and minimum and maximum living allowance.
- How will you ensure that your program does not violate non-duplication, non-displacement, and non-supplementation requirements? See 45 CFR § 2540.100 for information on these requirements.
- How will your plan for member development, training, and supervision contribute to achieving your desired outcomes?
- How will you ensure that members comply with rules on prohibited service activities? See 45 CFR § 2520.45, 45 CFR § 2520.65 and the AmeriCorps grant provisions for a list of prohibited service activities.
- How will receiving an AmeriCorps grant add value to your existing service activities?

Measurable Outputs and Outcomes:

- Describe at least one aligned measurable output, intermediate outcome, and end outcome you expect to achieve as a result of your activities. While you are not required to report on end outcomes, you must describe the long-term impact you expect to achieve.
- What systems will you use to track outputs and intermediate outcomes?
- **Note**: You will develop more detailed performance measures in eGrants, including outputs and intermediate outcomes, how they will be measured, your targets for each year, and the data you will gather, during the post-review clarification period.
- **Indicate here if you plan to operate a program in one of the five focus areas (Education, Healthy Futures, Clean Energy, Veterans, or Opportunity) and whether you will be using standard performance measures.** Sample language: My program will address the Healthy Futures priority area and we will/will not be using standard performance measures.

Plan for Self-Assessment and Improvement:

What are your plans for continuous program improvement? How will you identify strengths and weaknesses, resolve problems, and gather feedback from and provide feedback to members, service sites, and partners?

Community Involvement:

- Describe how you involved the target community (or target communities) in identifying the needs and activities. Which community partners and stakeholders were involved? What roles did they play, and what were their responsibilities in the planning process?
- Explain how you will continue to engage your community partners and stakeholders throughout the three-year program period. What will be their ongoing roles and responsibilities?

Relationship to other National and Community Service Programs:

- How will your program build on (without duplicating), or reflect collaboration with, other national and community service programs supported by the Corporation and the State

Commissions in the states where you plan to operate? Include in your response if your receive funding from other Corporation sources, and which funding source supports you (AmeriCorps, Learn and Serve America, Senior Corps, or VISTA). You can find a listing of Corporation-supported programs by state here: http://www.americorps.org/about/role_impact/state_profiles.asp. The National Community Service Act prohibits duplication and displacement in SEC. 177. [42 U.S.C. 12637].

- **For Multi-state applicants: Describe the manner and extent to which you consulted with the State Commission in the states in which you plan to operate.**

Potential for Replication:

To what extent is your AmeriCorps program designed to be replicated by your organization or other organizations? What are your plans or strategies for replication?

B. Member Outputs and Outcomes

Criteria

(b) *Member outputs and outcomes (20%).* In evaluating how your proposal addresses member outputs and outcomes, the Corporation considers the extent to which your proposal or program:

(1) Includes effective and feasible plans for, or evidence of, recruiting, managing, and rewarding diverse members, including those from the target community, and demonstrating member satisfaction;

(2) If you are a current grantee, has succeeded in meeting reasonable member enrollment and retention targets in prior grant periods, as determined by the Corporation;

(3) Includes effective and feasible plans for, or evidence of, developing, training, and supervising members;

(4) Demonstrates well-designed training or service activities that promote and sustain post-service, an ethic of service and civic responsibility, including structured opportunities for members to reflect on and learn from their service; and

(5) If you are a current grantee, has met well-defined, performance measures regarding AmeriCorps members, including any applicable national performance measures, and including outputs and outcomes.

Addressing the Criteria

Member Recruitment and Support:

- Describe your plans for recruiting members for your program. What criteria will you use to select your members, including specific qualifications, characteristics, or backgrounds? What are your plans to ensure that your corps is diverse and includes members from the communities to be served?
- What member support will you offer to ensure that your members complete their term of service (i.e. they are retained). How will you assess member satisfaction?
- **Current Grantees Only: Enrollment**
  If you enrolled less than 100% of slots received during your last full year of program operation, provide an explanation, and describe your plan for improvement.
- **Current Grantees Only: Retention**

If you were not able to retain all of your members during your last full year of program operation, provide an explanation, and describe your plan for improvement. While we recognize retention rates may vary among equally effective programs depending on the program model, we expect grantees to pursue the highest retention rate possible.

- **Tutoring programs only:**
  Describe how your strategy for recruiting and selecting members complies with AmeriCorps requirements for member tutoring qualifications. Members who tutor must have a high school diploma, and successfully complete high-quality, research-based pre- and in-service training for tutors. This requirement does not apply to a member enrolled in an elementary school or secondary school who is providing tutoring through a structured, school-managed cross-grade tutoring program. Tutoring programs must offer a curriculum that is high quality, research-based, and consistent with the State academic content standards required by section 1111 of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 6311) and the instructional program of the local educational agency.

Member Development, Training and Supervision:

- Describe in detail your plan for orienting members to AmeriCorps, the community, their placement site, and to the service they will perform.
- How do you plan to train members to perform all the activities they will engage in and, as necessary, provide them with ongoing training throughout their terms? What is the timeline for this training? Identify the training curricula and materials you will use.
- Describe in detail your plan for supervising members, and how it ensures that members will receive adequate support and guidance throughout their terms.
- **Tutoring programs only**:
  Describe how your strategy for training members complies with AmeriCorps requirements for member tutor training that is high quality and research based, consistent with the instructional program of the local agency and with state academic content standards, includes appropriate member supervision by individuals with expertise in tutoring, and provides specialized pre-service and in-service training consistent with the activities the member will perform.
- **Ethic of Service and Civic Responsibility:**
  Demonstrate how you will provide structured opportunities for participants to reflect on and learn from their service in order to promote a lifelong ethic of service and civic responsibility

C. Community Outputs and Outcomes

Criteria

(c) *Community outputs and outcomes (20%).* In evaluating whether your proposal adequately addresses community outputs and outcomes, the Corporation considers the extent to which your proposal or program:

(1) Is successful in meeting targeted, compelling community needs, or if you are a current grantee, the extent to which your program has met its well-defined, community-based performance measures, including any applicable national performance measures, and including outputs and outcomes, in previous grant cycles, and is continually expanding and increasing its reach and impact in the community;

(2) Has an impact in the community that is sustainable beyond the presence of Federal support (For example, if one of your projects is to revitalize a local park, you would meet this criterion by showing that after you have completed your revitalization project, the community will continue its upkeep on its own);

(3) Generates and supports volunteers to expand the reach of your program in the community; and

(4) Enhances capacity-building of other organizations and institutions important to the community, such as schools, homeland security organizations, neighborhood watch organizations, civic associations, and community organizations, including faith-based organizations.

Addressing the Criteria

Sustainability:

Outline your plans for ensuring that the impact of your program in the community is sustainable beyond the presence of federal support. For example, you might describe how your community relationships will lead to community investment in the program's continued operation; how you will diversify your funding sources to include a wide range of stakeholders (such as state, local, and private sector funding); how your strategies for recruiting and supporting volunteers will sustain member activities after your AmeriCorps grant ends; or how the community will maintain your project once it is completed.

Volunteer Recruitment and Support:

- Describe how your program will use volunteers to expand the reach of the program in the community. How will you recruit, support, and recognize volunteers? Identify how many volunteers you expect to recruit and the number of hours of service they will provide, in total and on average. Will these volunteers be episodic (committing to one-time or occasional events) or ongoing (committing to a regular, ongoing role in the program)? If selected for funding, you will be expected to report on your actual volunteer recruitment levels.
- Describe the role that members will play in your volunteer recruitment and support efforts.
- **If you are requesting a waiver of the requirement to recruit or support volunteers (see 45 CFR § 2520.35), explain the basis for your request in the Waiver Request Justification field, which is in the Application Info Section in eGrants. If you are submitting a hard copy application, explain the basis for your waiver request in the program narrative.**

Capacity Building:

Describe how your program will enhance the capacity of other organizations and institutions important to the community, such as schools, homeland security organizations, neighborhood watch organizations, civic associations, and community organizations, including faith-based organizations. What roles will members play in your capacity-building activities?

D. Organizational Capability

Criteria

§ 2522.430 How does the Corporation assess my organizational capability? (25%)

(a) In evaluating your organizational capability, the Corporation considers the following:

(1) The extent to which your organization has a sound structure including:

(i) The ability to provide sound programmatic and fiscal oversight;

(ii) Well-defined roles for your board of directors, administrators, and staff;

(iii) A well-designed plan or systems for organizational (as opposed to program) self-assessment and continuous improvement; and

(iv) The ability to provide or secure effective technical assistance.

(2) Whether your organization has a sound record of accomplishment as an organization, including the extent to which you:

(i) Generate and support diverse volunteers who increase your organization's capacity;

(ii) Demonstrate leadership within the organization and the community served; and

(iii) If you are an existing grantee, you have secured the matching resources as reflected in your prior grant awards;

(3) The extent to which you are securing community support that recurs, expands in scope, or increases in amount, and is more diverse, as evidenced by—

(i) Collaborations that increase the quality and reach of service and include well-defined roles for faith-based and other community organizations;

(ii) Local financial and in-kind contributions; and

(iii) Supporters who represent a wide range of community stakeholders.

(b) In applying the criteria in paragraph (a) of this section to each proposal, the Corporation may take into account the following circumstances of individual organizations:

(1) The age of your organization and its rate of growth; and

(2) Whether your organization serves a resource-poor community, such as a rural or remote community, a community with a high poverty rate, or a community with a scarcity of philanthropic and corporate resources.

Addressing the Criteria

Sound Organizational Structure

Ability to Provide Sound Programmatic and Fiscal Oversight:

- Provide a brief history of your organization. What year was your organization established? Describe your organization's experience in the proposed areas of activity and your experience operating and overseeing a program comparable to the one proposed. Include specific examples of your prior accomplishments and outcomes. Describe your capacity to manage a federal grant and to provide on site monitoring of the financial and other systems required to administer an AmeriCorps grant. **If you are proposing a multi-site program**:
  - Explain how you are able to support and oversee service sites.
  - Describe your process for selecting service sites and ensuring they have adequate programmatic and financial capabilities. How will your site selection process incorporate the criteria required by the AmeriCorps regulations 45 CFR § 2522.475 (quality, innovation, sustainability, quality of leadership, past performance, community involvement), and the special considerations found in 45 CFR § 2522.450 (program models, program activities, and programs supporting distressed communities)?

- What are your current or previous programmatic and funding relationships with the sites?
- Describe your plans for monitoring site compliance with fiscal and programmatic requirements.
- How will you develop connections among the sites through common program elements or activities to ensure that your overall mission and vision for the AmeriCorps program is maintained at each site?

Board of Directors, Administrators, and Staff:

- Describe your organization's management and staff structure and how the board of directors (if applicable), administrators, and staff members will be used to support your program.
- Identify the key program and fiscal positions responsible for your proposed program. Describe the relevant background and experience of all staff members working on the project and their respective roles, or your plans to recruit, select, train, and support additional staff, and their roles.

Plan for Self-Assessment or Improvement:

How does your organization conduct ongoing internal assessment and improvement of its overall—not program-specific—systems, structure, staffing, and other capacities to ensure that it remains sound and well managed?

Plan for Effective Technical Assistance:

- How do you plan to provide or secure any needed financial and programmatic technical assistance for your program, and if applicable, your service sites? What are your plans for providing financial and programmatic orientation, and training and technical assistance to your program and service sites?
- Explain how you will identify and respond to your programs' and, if applicable, your service sites' ongoing training and technical assistance needs.

<u>Sound Record of Accomplishment as an Organization</u>

Volunteer Generation and Support:

Describe how your organization recruits and supports a diverse group of volunteers to increase your own organizational capacity.

Organizational and Community Leadership:

Provide examples of how you have demonstrated leadership as an organization and in the community you serve. For example, describe awards received by the organization or individuals within the organization, public positions of leadership such as staff serving on other community boards, or participation in community events, task forces, and other community activities.

Current Grantees Only: Success in Securing Match Resources

Describe your successes and challenges in securing match resources during your current three-year grant cycle and, if applicable, during the period of previous awards.

<u>Success in Securing Community Support</u>

Collaboration:

Describe any collaborations you have developed that increase the quality and reach of services you provide. What roles have community organizations, including faith-based organizations, played in these collaborations?

Local Financial and In-kind Contributions:
Discuss examples of how local contributions have continued over time, expanded in scope, increased in amount, or become more diverse.

Wide Range of Community Stakeholders:
Describe community stakeholders in your organization. How has non-financial support from your community stakeholders continued over time, expanded in scope, increased in amount, or become more diverse?

Special Circumstances:
In applying the organizational capability criteria to each proposal, reviewers may also take into account the following circumstances of individual organizations:

- The age of your organization and its rate of growth.
- Whether your organization serves a resource-poor community, such as a rural or remote community, a community with a high poverty rate, or a community with a scarcity of philanthropic and corporate resources.

If you feel that any of the circumstances stated above have an impact on your organizational capability that has not already been discussed, please describe the circumstance and how it affects your organizational capacity.

For Professional Corps Applicants Requesting Start-up Funds: Please include a description of the amount you are requesting for start-up, and how and when you intend to use the start-up funding. Please include a timeline that documents how long the start-up period will last, and when the first members are expected to enroll. Include the amount you are requesting for start-up in your application budget. Professional Corps applying for a fixed-amount grant are not eligible for start-up funds.

E. Cost Effectiveness and Budget Adequacy
Criteria

§ 2522.435 How does the Corporation evaluate the cost-effectiveness and budget adequacy of my program? (25%)

(a) In evaluating the cost-effectiveness (15%) and budget adequacy (10%) of your proposed program, the Corporation considers the following:

(1) Whether your program is cost-effective based on:

(i) Your program's proposed Corporation cost per MSY, as defined in §2522.485; and

(ii) Other indicators of cost-effectiveness, such as:

(A) The extent to which your program demonstrates diverse non-Federal resources for program implementation and sustainability;

(B) If you are a current grantee, the extent to which you are increasing your share of costs to meet or exceed program goals; or

(C) If you are a current grantee, the extent to which you are proposing deeper impact or broader reach without a commensurate increase in Federal costs; and

(2) Whether your budget is adequate to support your program design.

(b) In applying the cost-effectiveness criteria in paragraph (a) of this section, the Corporation will take into account the following circumstances of individual programs:

(1) Program age, or the extent to which your program brings on new sites;

(2) Whether your program or project is located in a resource-poor community, such as a rural or remote community, a community with a high poverty rate, or a community with a scarcity of corporate or philanthropic resources;

(3) Whether your program or project is located in a high-cost, economically distressed community, measured by applying appropriate Federal and State data; and

(4) Whether the reasonable and necessary costs of your program or project are higher because they are associated with engaging or serving difficult-to-reach populations, or achieving greater program impact as evidenced through performance measures and program evaluation.

(c) The indicators in paragraphs (a)(1)(i) and (a)(1)(ii)(B) of this section do not apply to Education Award Program applicants.

Addressing the Criteria

Cost Effectiveness

Corporation Cost per Member Service Year (MSY):

- The Corporation cost per MSY is determined by dividing the Corporation's share of budgeted grant costs by the number of MSYs you are requesting in your grant. It does not include child care or the cost of the education award.
- One MSY is equivalent to at least 1700 service hours, a full-time AmeriCorps position.
- The Corporation cost per MSY will be automatically calculated once you enter your budget in eGrants.
- The maximum cost per MSY allowable is published each year in the *Notice*.
- Cost effectiveness will be evaluated by analyzing cost per MSY in relation to your program design. If you request above the maximum, please justify. This is rarely approved.

Diverse Non-Federal Support:

- Demonstrate how your program has or will obtain diverse non-federal resources for program implementation and sustainability.
- Include a discussion of the non-Corporation resource commitments (in-kind and cash) that you have obtained, the additional commitments you plan to secure, and how you will secure them. In the budget, you must list the sources of your match funds.
- If you are requesting the alternative match explain the basis of your request in the Waiver Request Justification field in the Application Info section of eGrants. If you are submitting a hard copy application, explain the basis of your request in a paragraph titled "Waiver Request Justification."
- **Current Grantees Only: Decreased Reliance on Federal Support.** Describe the extent to which you are increasing your share of costs to meet or exceed program goals, or the extent

to which you are proposing deeper impact or broader reach without a commensurate increase in federal costs.

Budget Adequacy

Discuss the adequacy of your budget to support your program design including how it is sufficient to support your program activities and is linked to your desired outputs and outcomes.

For EAP and other Fixed-Amount Grants Only: Fixed amount applicants must describe the costs that will not be covered by Corporation funding. These costs might include staff salaries and benefits, travel, evaluation, living allowances or salaries for AmeriCorps members, supplies, and equipment. Applicants must also describe how they expect to raise the resources necessary to operate a successful AmeriCorps program. You will not be required to track or report on your expenditures. However, you must demonstrate that you have planned for and can raise the additional resources you will need to manage and operate a successful AmeriCorps program. Reviewers will assess the adequacy of your plan to secure resources to support your program design.

The Corporation cost per MSY and the extent to which a current grantee is increasing its share of costs to meet or exceed programs goals will not be considered in assessing a fixed-amount grant applicant's cost effectiveness. However, all the other indicators described in this section will apply and the cost effectiveness/budget adequacy section still equals 25% of the selection criteria weight.

F. Evaluation Summary or Plan

If you are competing for the first time, please enter N/A in the Evaluation Summary or Plan field since it pertains only to recompeting grantees. If you are recompeting for AmeriCorps funds for the first time since the AmeriCorps rule took effect (July, 2005), you must submit a summary of your evaluation efforts or plan to date, or a copy of any evaluation that has been completed, as part of your application for funding. Submit your summary or plan in the Evaluation Summary or Plan Narrative Field in eGrants. If you are recompeting for the first time, and have completed an evaluation report, or you are recompeting for the second time since July, 2005, submit your report according to the instructions in Section VII., below.

Your evaluation requirements are different depending on the amount of your grant, as described in the AmeriCorps Regulations, Section 2522.710:

- If you are State andNational grantee (other than an Education Award Program grantee), and your average annual Corporation program grant is $500,000 or more, you must arrange for an independent evaluation of your program, and you must submit the evaluation with any application to the Corporation for competitive funds as required in §2522.730 of this subpart.
- If you are State and National grantee whose average annual Corporation program grant is less than $500,000, or an Education Award Program grantee, you must conduct an internal or an external evaluation of your program, and you must submit the evaluation with any application to the Corporation for competitive funds as required in §2522.730 of this subpart.

G. Amendment Justification

Enter N/A. This field will be used if you are awarded a grant and need to amend it. Please delete any information previously entered in the field before entering new information.

H. Clarification Information
Enter N/A. This field will be used to enter information that requires clarification in the post-review period. Please delete any information previously entered in the field before entering new information.

I. Continuation Update
Enter N/A. This field will be used to enter changes in your narratives in your continuation requests. Please delete any information previously entered in the field before entering new information.

IV. Performance Measures

A. Serve America Act Priorities

In eGrants, the Serve America Act Priorities (Education, Healthy Futures, Clean Energy, Veterans, and Opportunity) are listed in the Performance Measures section. If you will be working in one of these areas, please select the appropriate priority area(s).

B. Issue Areas and Service Categories

In eGrants, the service categories are located in the Performance Measures Section. In this section you will select issue areas and service categories that describe your program activities. First select an issue area, and then choose service categories from the pull down menu. When you have selected all applicable service categories, indicate which service category is the primary and which is the secondary in importance to your program. Only one service category can be indicated as the primary, and one as the secondary.

If you have selected the Education, Healthy Futures, or Clean Energy Serve America Act priorities, the appropriate issue area will be selected for you. See Attachment C for the list of Issue Areas and Service Categories.

C. Entering Performance Measures

The Corporation does not require you to enter performance measures until the Corporation notifies you that you have been selected for consideration for a grant. **If you decide to wait until then to enter your performance measures you will still need to enter your Service Categories at the time of application. In addition, because eGrants requires content in the performance measure fields in order to submit, you must enter NA in the text fields and a number in the data fields. This information will not be reviewed.**

If you choose to enter detailed performance measures at the time of application, the following instructions will guide you through the process of entering information in the fields for the required aligned measure. These are also the instructions you will use if you are selected for consideration for a grant.

Before you complete the Performance Measures, please review 45 CFR §§ 2522.500– 2522.650. The Performance Measure worksheet in Attachment D is provided as a tool to help you think through the development of performance measures and assemble the information in eGrants. You may find the Performance Measurement Toolkit, on the Corporation's web site useful in developing your performance measures (http://www.nationalserviceresources.org/star/ac-program-toolkit).

You are required to align at least one set of performance measures in your primary service category. **In eGrants, you will align the measures by entering two different Result Types and Result Statements for one Performance Measurement Title. The two Result Types are Output and Intermediate Outcome.**

In order to align a set of performance measures in eGrants:

- First select Add Performance Measure in eGrants.
- Enter the Title, the Measure Category, and the Service Category from the pull down menus.
- Enter a sentence or two on Needs and Activities, and Result Type.
- For the Output Result Type, enter a Result Statement, Indicators, Targets, Number or Percentage, Instruments, and Performance Measure Statement.
- **Add New Result** for the Intermediate Outcome and complete the pertinent fields.
- **Do not Add New Performance Measure in order to add an Intermediate Outcome for your aligned measure.**
- Once you have aligned one set of measures, i.e., completed two Result Types (Output and Intermediate Outcome) for one Performance Measurement Title, you may continue to Add New Performance Measures as appropriate for your program design.

V. Documents

In addition to your application submitted in eGrants, you are required to provide your evaluation, labor union concurrence (if necessary), and a federally approved indirect cost agreement (if budgeted and for national applicants only), in hard copy or e-mail, as part of your application. After you have submitted the documents, change their status in eGrants from the default "Not Sent" to the applicable status ("Sent," "Not Applicable," or "Already on File at CNCS"). In the event of difficulties submitting an application in eGrants, please see the *Notice* for instructions.

A. Evaluation

Submit any completed evaluation report as described in D., below. Select Evaluation and select Sent once you have submitted a completed evaluation report.

B. Labor Union Concurrence

If a program applicant:
(1) Proposes to serve as the placement site for AmeriCorps members; and
(2) Has employees engaged in the same or substantially similar work as that proposed to be carried out by AmeriCorps members; and
(3) Those employees are represented by a local labor organization
then the program applicant's application must include the written concurrence of the local labor organization representing those employees.

For the purposes of this section, “program applicant” includes any applicant to the Corporation or a State Commission, as well as any entity applying for assistance or approved national service positions through a Corporation grantee or subgrantee.

If this applies to you, please select “Enter New,” name the new document “Labor Union Concurrence,” and enter status Sent.

C. Federally Approved Indirect Cost Agreement
National applicants with a federally-approved indirect cost agreement in their budget must submit the approved agreement.

D. Submission Instructions for Evaluations, Labor Union Concurrence, and Indirect Cost Rates
Send hard copy information to:
Corporation for National and Community Service
ATT: AmeriCorps National
1201 New York Avenue NW
Washington, DC 20525

Please use an alternative service to the U.S. Postal Service to send hard copy. U.S. Postal Service deliveries to government agencies often are delayed and sometimes damaged due to security measures. Attach a hard copy of the program’s SF424 facesheet to each document so that we know which application corresponds to each document.

If you prefer, you may submit national evaluations, labor union concurrence, and Indirect Cost Rates electronically to anericorpsnational@cns.gov for multi-state or Indian Tribes applications submitted directly to the Corporation and to americorpsapplications@cns.gov for applications submitted to State Commissions . This information must be received at the Corporation by 5 p.m. Eastern Time on the deadline. You may submit state evaluations and labor union concurrence to your state commissions.

E. Preaward Costs
Grantees may be reimbursed for pre-award costs only if they are incurred with the written approval of the Corporation’s Office of Grants Management. You incur all pre-award costs at your own risk. The Corporation is under no obligation to reimburse you or your subgrantee for these costs if you or your subgrantee does not receive advance approval, or if the approved amount is less than anticipated.

To request such approval, send an email request to your Corporation grants officer, with a copy to your program officer that includes a brief justification for the costs to be incurred and indicates the desired effective date. If your request is approved, the Office of Grants Management will issue a letter authorizing the pre-award costs within five business days.

The Corporation will consider approving, where appropriate, the following types of pre-award costs:

- Personnel expenses and benefits.

- Travel for staff and prospective members.
- Equipment.
- Supplies.
- Contractual and consultant services.
- Training for staff and prospective members.
- Evaluation.
- Other program operating costs.

Because the Strengthen AmeriCorps Program Act (P.L. 108-45 (July 3, 2003), codified at 42 U.S.C. 12605) specifically provides that a national service position is approved when the Corporation issues a grant award, we cannot approve member living allowances or support costs, including FICA, workers' compensation, health care, and child care, as pre-award costs. Approval of pre-award costs does not authorize you or your subgrantee to enroll AmeriCorps members or have them begin serving. AmeriCorps members may not count any hours served prior to the award being issued as part of their term of service.

VI. Budget Instructions

For Fixed-Amount grants, including Education Award programs: Use the Budget Instructions for Fixed-Amount applicants and the budget worksheet in Attachment G to prepare your budget.

A. Overview of Key Budget Requirements

Program requirements, including requirements on match, are located in the AmeriCorps regulations, modified by 2008 appropriations language, and summarized below.

Table 3: Match Requirements in the AmeriCorps Regulations

Competition	Match Requirement
State and Territory Competitive, States and Territories without Commissions, National Direct, National Professional Corps, Indian Tribes	Minimum grantee share is 24% of program costs for the first three years. Overall grantee share of total program costs increases gradually beginning in Year 4 to 50% by the tenth year of funding and any year thereafter.
State and National EAP Fixed-Amount	There are no specific match requirements for fixed-amount grants. Grantees pay all program costs over $800 per MSY provided by the Corporation.
Professional Corps Fixed-Amount Pilot	There are no specific match requirements for fixed-amount grants. Grantees pay all program costs over the amount per MSY provided by the Corporation.
Fixed-Amount Pilot	There are no specific match requirements for fixed-amount grants. Grantees pay all program costs over the amount per MSY provided by the Corporation

- Equipment costs must not exceed 10% of the total Corporation share.
- Administrative costs must not exceed 5% of the total Corporation funds requested.
- If you are applying for the first time, you must match with cash or in-kind contributions at least 24% of the project's total Operating Costs (Section I) plus Member Costs (Section II)

plus Administrative Costs (Section III). If you are recompeting, your Program Officer can tell you where you are in the match schedule.

- The acceptable sources of matching funds are federal, state, local, private sector, and/or other funds in accordance with applicable AmeriCorps requirements.
- In Section III of the budget, identify the source and total dollar amount of cash match from private, state and local and federal funds, and the source and total amounts of in-kind support. Define all acronyms the first time they are used.

Note: The Corporation's legislation permits the use of non-Corporation federal funds as match for the grantee share of the budget. Please discuss your intention of using their funds to match an AmeriCorps grant with the other agency prior to submitting your application.

B. Preparing Your Budget

Your proposed budget should be sufficient to allow you to perform the tasks described in your proposal narrative. Reviewers will consider the information you provide in this section in their assessment of the Cost-Effectiveness and Budget Adequacy selection criterion.

Follow the detailed budget instructions, below, to prepare your budget. We recommend that you prepare your budget in the same order as indicated in the Budget Worksheets in Attachments F and G. The Budget Checklist in Attachment H is a resource for you to ensure your budget is complete. eGrants will create the budget and the budget narrative automatically from the detailed budget information you enter. Once you have entered your budget information in eGrants you will be asked to validate your budget, and eGrants will check your submission for errors.

As you prepare your budget:

- All the amounts you request must be defined for a particular purpose. Do not include miscellaneous, contingency, or other undefined budget amounts.
- Present the basis for all calculations in the form of an equation.
- Do not include unallowable expenses, e.g., entertainment costs (which include food and beverage costs) unless they are justified as an essential component of an activity.
- Do not include fractional amounts (cents).

Please refer to the relevant OMB Circulars on allowable costs for further guidance. The OMB circulars are online at www.whitehouse.gov/OMB/circulars.

- A-21 - Cost Principles for Educational Institutions, 2 CFR 220
- A-87 - Cost Principles for State, Local, and Indian Tribal Governments, 2 CFR 225
- A-122 - Cost Principles for Non Profit Organizations, 2 CFR 230

Programs must comply with all applicable federal laws, regulations, and OMB circulars for grant management, allowable costs, and audits, including providing audits to the A-133 clearinghouse if they expend over $500,000 in federal funds, as required in OMB Circular A-133.

Detailed Budget Instructions

These instructions do not apply to applicants for EAP and Fixed-Amount Pilot grants.
Please see page 29 for detailed budget instructions for Fixed-Amount grants.

Source of Match
In the "Source of Match" field that appears at the before Section I, enter a brief description of the Source of Match, the amount, the match classification (Cash, In-kind, or Not Available) and Match Source (State/Local, Federal, Private, Other or Not Available). Define any acronyms the first time they are used.

Section I. Program Operating Costs

Complete Section I, Program Operating Costs, of the Budget Worksheet by entering the "Total Amount," "CNCS Share," and "Grantee Share" for Parts A-I, as follows:

A. Personnel Expenses
Under "Position/Title Description," list each staff position separately and provide position description, salary, and percentage of effort devoted to this award. Each staff person's role listed in the budget must be described in the application narrative. Because the purpose of this grant is to enable and stimulate volunteer community service, do not include the value of direct community service performed by volunteers. However, you may include the value of volunteer services contributed to the organization for organizational functions such as accounting, audit work, or training of staff and AmeriCorps members.

B. Personnel Fringe Benefits
Under "Purpose/Description," identify the types of fringe benefits to be covered and the costs of benefit(s) for each staff position. Allowable fringe benefits typically include FICA, Worker's Compensation, Retirement, SUTA, Health and Life Insurance, IRA, and 401K. You may provide a calculation for total benefits as a percentage of the salaries to which they apply or list each benefit as a separate item. If a fringe amount is over 30%, please list separately. Holidays, leave, and other similar vacation benefits are not included in the fringe benefit rates but are absorbed into the personnel expenses (salary) budget line item.

C. 1. Staff Travel
Describe the purpose for which program staff member will travel. Provide a calculation to include itemized costs for airfare, transportation, lodging, per diem, and other travel-related expenses multiplied by the number of trips/staff. Where applicable, identify the current standard reimbursement rate(s) of the organization for mileage (not to exceed the federal mileage rate), daily per diem, and similar supporting information. Only domestic travel is allowable.

We expect all applicants (including planning grant applicants) to include funds in this line item for travel for staff and site staff to attend Corporation-sponsored technical assistance meetings. There are two to three such opportunities per year, including opportunities for financial training and the National Conference on Service and Volunteering.

C. 2. Member Travel
Describe the purpose for which members will travel. Provide a calculation to include costs for airfare, transportation, lodging, per diem, and other related expenses for members to travel outside their service location or between sites. Costs associated with local travel, such as bus passes to local sites, mileage reimbursement for use of car, etc., should be included in this budget

category. Where applicable, identify the current standard reimbursement rate(s) of the organization for mileage, daily per diem, and similar supporting information.

D. Equipment

Equipment is defined as tangible, non-expendable personal property having a useful life of more than one year AND an acquisition cost of **$5,000 or more <u>per unit</u>** (including accessories, attachments, and modifications). Any items that do not meet this definition should be entered in E. Supplies below. Purchases of equipment are limited to 10% of the total Corporation funds requested. If applicable, show the unit cost and number of units you are requesting. Provide a brief justification for the purchase of the equipment under Item/Purpose.

E. Supplies

Include the amount of funds to purchase consumable supplies and materials, including member service gear and equipment that does not fit the definition above. You must individually list any single item costing $1,000 or more. Except for safety equipment, grantees may only charge the cost of member service gear to the federal share if it includes the AmeriCorps logo. Grantees may also add the AmeriCorps logo to their own local program uniform items using federal funds. All safety gear may be charged to the federal share, regardless of whether it includes the AmeriCorps logo. All other service gear must be purchased with non-CNCS funds.

F. Contractual and Consultant Services

Include costs for consultants related to the project's operations, except training or evaluation consultants, who will be listed in Sections G. or H., below. Payments to individuals for consultant services under this grant may not exceed $617 per day (excluding costs for indirect expenses, travel, supplies, etc.). The $617 daily rate is a ceiling, and we anticipate budgeted daily rates at considerably lower levels. Indicate the daily rate for consultants you are proposing to use and their contractual services. Indicate the daily rate, number of days, and total cost.

G. 1. Staff Training

Include the costs associated with training staff on project requirements and training to enhance the skills staff need for effective project implementation, i.e., project or financial management, team building, etc. If using a consultant(s) for training, indicate the estimated daily rate, not to exceed the daily rate limit.

G. 2. Member Training

Include the costs associated with member training to support them in carrying out their service activities, for example, orientation, project-specific skills such as age-appropriate tutoring, CPR, or ecosystems and the environment. You may also use this section to request funds to support training in Life After AmeriCorps. If using a consultant(s) for training, indicate the estimated daily rate, not to exceed the daily rate limit.

H. Evaluation

Include costs for project evaluation activities, including additional staff time or subcontracts, use of evaluation consultants, purchase of instrumentation, and other costs specifically for this activity not budgeted in Personnel Expenses. This cost **does not** include the daily/weekly gathering of data to assess progress toward meeting performance measures, but is a larger

assessment of the impact your project is having on the community, as well as an assessment of the overall systems and project design. Indicate daily rates of consultants, where applicable.

I. Other Program Operating Costs

Allowable costs in this budget category should include when applicable:

- Background checks of members and grant-funded staff who have recurring access to vulnerable populations, i.e., children, the elderly, disabled, etc.
- Office space rental for projects operating without an approved indirect cost rate agreement that covers office space. For national office space, rental may be unallowable; check relevant OMB Circulars. If space is budgeted and it is shared with other projects or activities, the costs must be equitably pro-rated and allocated between the activities or projects.
- Utilities, telephone, Internet and similar expenses that are specifically used for AmeriCorps members and AmeriCorps project staff, and are not part of the organizations indirect cost/admin cost allocation pool.
- Recognition costs for members. List each item and provide a justification in the budget narrative. Gifts and/or food in an entertainment/event setting are not allowable costs.
- National Direct applicants: Indicate the number of subgrants and the average amount of subgrants. Indicate any match that you will require of your subgrants under the "grantee share" column in this category. Subgranted funds may only cover costs allowable under federal and AmeriCorps regulations and provisions.

Section II. Member Costs

Member Costs are identified as "Living Allowance" and "Member Support Costs." Your required match can be federal, state, local, or private sector funds.

A. Living Allowance

The narrative should clearly identify the number of members you are supporting by category (i.e., full-time, half-time, reduced-half-time, quarter-time, minimum-time, 1st and 2nd Years of 2-year half-time) and the amount of living allowance they will receive, allocating appropriate portions between the Corporation's share (CNCS Share) and grantee match (Grantee Share).

Members – Enter the total number of members you are requesting in each category. Enter the average amount of the living allowance for each type of member. Enter the number of members for which you are not requesting funds for a living allowance, but for which you request education awards.

Table 4. Minimum and Maximum Living Allowance

Service Term	Minimum # of Hours	Ed Award	MSY	Minimum Living Allowance	Maximum Total Living Allowance
Full-time	1700	$5,350	1.000	$11,800	$23,600
One-year Half-time	900	$2,675	0.500	n/a	$12,500
Two-year Half-time	900	$2,675	0.250	n/a	$12,500
Reduced Half-time	675	$2,038	0.381	n/a	$9,370
Quarter-time	450	$1,415	0.265	n/a	$6,250
Minimum-time	300	$1,132	0.212	n/a	$4,160
Full-time Living Allowance		**$11,800**			

B. Member Support Costs
Consistent with the laws of the states where your members serve, you must provide members with the benefits described below.

- **FICA for Members.** Unless exempted by the IRS with accompanying documentation (note in the narrative and provide documentation with application), all projects must pay FICA for any member receiving a living allowance, even when the Corporation does not supply the living allowance. In the first column next to FICA, indicate the number of members who will receive FICA. Calculate the FICA at 7.65% of the total amount of the living allowance.
- **Worker's Compensation.** Some states require worker's compensation for AmeriCorps members. You must check with State Departments of Labor or State Commissions where members serve to determine if you are required to pay worker's compensation and at what level. If you are not required to pay worker's compensation, you must obtain Occupational, Accidental, Death and Dismemberment coverage for members to cover in-service injury or incidents.
- **Health Care.** You must offer health care benefits to full-time members in accordance with AmeriCorps requirements. Except as stated below you may not pay health care benefits to less-than-full-time members with Corporation funds. You may choose to provide health care benefits to less-than-full-time members from other sources (i.e., non-federal). Less-than-full-time members who are serving in a full-time capacity for a sustained period of time (such as a full-time summer project) are eligible for health care benefits. In your budget narrative, indicate the number of members who will receive health care benefits. The Corporation will not pay for dependent coverage.
- **Unemployment Insurance and Other Member Support Costs.** Include any other required member support costs here. Some states require unemployment coverage for their AmeriCorps members. You may not charge the cost of unemployment insurance taxes to the grant unless mandated by state law. Programs are responsible for determining the requirements of state law by consulting State Commissions, legal counsel, or the applicable state agencies.

Section III. Administrative/Indirect Costs

Definitions

Administrative costs are general or centralized expenses of the overall administration of an organization that receives Corporation funds and do not include particular project costs. These costs may include administrative staff positions. For organizations that have an established indirect cost rate for federal awards, administrative costs mean those costs that are included in the organization's indirect cost rate agreement. Such costs are generally identified with the organization's overall operation and are further described in Office of Management and Budget Circulars A-21, A-87, and A-122.

Options for Calculating Administrative/Indirect Costs (choose either A. OR B.)

Applicants can choose to use one of two methods to calculate allowable administrative costs – a Corporation fixed percentage method or a federally approved indirect cost rate method.

Regardless of the option chosen, the Corporation's share of administrative costs is limited to 5% of the total Corporation funds **actually expended** under this grant.

A. Corporation Fixed Percentage Method
Five Percent Fixed Administrative Costs Option
The Corporation fixed rate allows you to charge administrative costs up to a cap without a federally approved indirect cost rate and without documentation supporting the allocation. If you choose the Corporation Fixed Percentage Method (Section IIIA in eGrants), you may charge, for administrative costs, a fixed 5% of the total of the Corporation funds expended. In order to charge this fixed 5%, the grantee match for administrative costs may not exceed 10% of all direct cost expenditures.

1. To determine the Corporation share for Section III: Multiply the sum of the Corporation funding shares of Sections I and II by 0.0526. This is the maximum amount you can request as Corporation share. The 5% maximum is calculated by multiplying the sum of the Corporation's share of Section I and Section II by the factor 0.0526. The factor 0.0526 is used to calculate the maximum amount of federal funds that may be budgeted for administrative (indirect) costs, rather than 0.0500, as a way to mathematically compensate for determining Section III costs when the total budget (Sections I + II + III) is not yet established. (If 0.0500 was used, the resulting Section III costs would be less than the maximum 5% of total costs that are permitted under the Corporation's regulations.) Enter this amount as the Corporation share for Section III A.

2. To determine the Grantee share for Section III: Then multiply the total (both Corporation and grantee share) of Sections I and II by 10% (0.10) and enter this amount as the grantee share for Section III A.

3. Enter the sum of the Corporation and grantee shares under Total Amount.

If a commission elects to retain a share of the 5% of federal funds available to programs for administrative costs, that decision is identified within each subgrant's budget. To calculate these fractional shares, within Section III of the subgrant budget, **one-fifth (20 %) of the federal dollars budgeted for administrative costs are allocated to the commission's share and four-fifths (80%) of the federal dollars budgeted for administrative costs are allocated to the program's share. Because programs budget the 5% administrative maximum by multiplying the Corporation's share of Section I and Section II costs by the factor 0.0526, the allocation between commission and program shares would be calculated as follows:**

([Section I] + [Section II] x 0.0526) x(0.20) = Commission Share

([Section I] + [Section II] x 0.0526) x (0.80) = Subgrantee Share

If a commission elects to retain a share that is less than 1% budgeted for administrative costs, then the calculation above would be adjusted, as appropriate.

B. Federally Approved Indirect Cost Rate Method

If you have a Federally Approved Indirect Cost (IDC) rate and choose to use it, the IDC rate will constitute documentation of your administrative costs including the 5% maximum payable by the Corporation. Specify the Cost Type for which your organization has current documentation on file, i.e., Provisional, Predetermined, Fixed, or Final indirect cost rate. Supply your approved IDC rate (percentage) and the base upon which this rate is calculated (direct salaries, salaries and fringe benefits, etc.). It is at your discretion whether or not to claim your entire IDC rate to calculate administrative costs. If you choose to claim a lower rate, please include this rate in the Rate Claimed field.

1. Determine the base amount of direct costs to which you will apply the IDC rate, including both the Corporation and Grantee's shares, as prescribed by your established rate agreement (i.e., based on salaries and benefits, total direct costs, or other). Then multiply the appropriate direct costs by the rate being claimed. This will determine the total amount of indirect costs allowable under the grant.

2. To determine the Corporation share: Multiply the sum of the Corporation funding share in Sections I and II by 0.0526. This is the maximum amount you can claim as the Corporation share of indirect costs.

3. To determine the Grantee share: Subtract the amount calculated in step b (the Corporation administrative share) from the amount calculated in step a (the Indirect Cost total). This is the amount the applicant can claim as grantee share for administrative costs.

Section IV. Increasing Grantee Overall Share of Total Budgeted Costs

Grantees are required to meet an overall matching rate that increases over time. You have the flexibility to meet the overall match requirements in any of the three budget areas, as long as the minimum match of 24% for the first three years, and the increasing minimum in years thereafter, are maintained. These matching requirements may be waived in limited circumstances.

Applying for Alternative Match

If you are requesting the alternative match as specified in 45 CFR § 2521.60(b), you must demonstrate that your program is either located in a rural county or in a severely economically distressed community as defined below. Also describe the efforts you have taken to raise the resources needed to meet the matching requirements in the Waiver Justification field in the Application Info Section of eGrants.

Please see 45 CFR §§ 2521.35–2521.90, for match and waiver requirements. You apply for the alternative match the year before it goes into effect. If approved, you will base your budget in your next application on the approved alternative match. The alternative match requirement will be in effect for whatever portion of the three-year project period remains, if you are approved for funding.

A. Program Location: Except when approved otherwise, the Corporation will determine the location of your program based on the legal applicant's address. If you believe that the legal applicant's address is not the appropriate way to consider the location of your program, you must provide relevant facts about your program location in your waiver request. The

Corporation will, in its sole discretion, determine whether some other address is more appropriate for determining a program's location.

B. Rural County: In determining whether a program is rural, the Corporation will consider the most recent Beale code rating published by the U.S. Department of Agriculture for the county in which the program is located. Any program located in a county with a Beale code of 6, 7, 8 or 9 is eligible to apply for the alternative match requirement. See Attachment J for the Table of Beale codes.

C. Severely Economically Distressed County: In determining whether a program is located in a severely economically distressed county, the Corporation will consider the following list of county-level characteristics. See Attachment J for a list of website addresses where this publicly available information can be found.

- The county-level per capita income is less than or equal to 75 percent of the national average for all counties using the most recent census data or Bureau of Economic Analysis data;
- The county-level poverty rate is equal to or greater than 125 percent of the national average for all counties using the most recent census data; and
- The county-level unemployment is above the national average for all counties for the previous 12 months using the most recently available Bureau of Labor Statistics data.
- **State and State EAP:** Your State Commission must approve your waiver request before it is forwarded to the Corporation.

VII. Budget Instructions for Fixed-Amount Applicants

These instructions apply only to applicants for fixed-amount grants, including education award programs (EAPs) and the Fixed-Amount pilot programs.

EAP and Fixed-Amount Pilot applicants may only request a fixed amount of funding per MSY. Therefore, fixed-amount applicants are not required to complete a detailed budget. In addition, the matching requirements in 45 CFR §§ 2521.40– 2521.95 do not apply to EAP and other fixed-amount grant applicants. Fixed-Amount Pilot applicants must include only full-time members.

Budget Section II. AmeriCorps Member Positions

A. Fixed-amount Pilot Instructions for Budget Section II

Enter the number of full-time positions you are requesting under the column labeled w/o living allowance. You may not request less than full-time positions under this competition.

Under "calculation" you will enter the calculation for your grant request. Leave all other columns blank.

Member Positions		Cost per MSY		Total Cost
_____Full-time (1700 hours)	x	$_____	=	$ _____

Type the total amount requested in the "Total Amount" & "CNCS Share" columns. Leave the "Grantee Share" blank.

Please note that the final amount that a program receives will be adjusted to reflect actual hours served if a member does not serve the minimum number of hours necessary to complete a full term of service.

B. Education Award Program Instructions for Budget Section II

Member Positions

Identify the number of Education Award members you are requesting by category (i.e. full-time, half-time, reduced half-time, quarter-time, minimum-time) and list under the column labeled **#w/o Allow** (without CNCS-funded living allowance.) **Leave all other columns blank**.

The total number of member service years (MSY) will **automatically calculate** at the bottom of the Member Positions chart.

Amounts of fixed awards are based on the member service years which are calculated as follows:

Member Positions	**Calculation**	**MSY**
_____Full-time (1700 hours)	(_____ members x 1.000)	= _____
_____1-Year Half-time (900 hours)	(_____ members x 0.500)	= _____
_____ 2-Year Half-time (1st Year) (generally 450 hours)	(_____ members x 0.500)	= _____
_____ 2-Year Half-time (2nd Year)* (generally 450 hours)	(_____ members x 0.000)*	= _____
_____Reduced half-time (675 hours)	(_____ members x 0.3810)	= _____
_____Quarter-time (450 hours)	(_____ members x 0.2646)	= _____
_____Minimum-time (300 hours)	(_____ members x 0.2117)	= _____
	Total MSY	_____

** Grantees receive the total amount for 2-Year Half-time members in the first year. Therefore, 2-Year Half-time members serving in their second year are not included in the calculation for funds.*

Under "Calculation," you will enter the calculation for your grant request. Applicants may request up to $800 per member service year (MSY).

Display your calculation in the following format:

Total # of MSYs _____ x MSY amount (up to $800)_____ = Total Grant Request **$____**

Type the total amount requested in the "Total Amount" & "CNCS Share" columns. Leave the "Grantee Share" blank. See example below:

Purpose	Calculation	Total Amount	CNCS Share	Grantee Share	edit	del
Program Grant Request	47.5 MSY X $800/MSY	$19,000	$19,000	$0	view	
Subtotal		$19,000	$19,000	$0		

VIII. Review, Authorize, and Submit

eGrants requires that you review and verify your entire application before submitting, by completing the following sections in eGrants:

- Review
- Authorize
- Assurances
- Certifications
- Verify
- Submit

Read the Authorization, Assurances, and Certifications carefully. Complete each section. The person who authorizes the application must be the applicant's authorized representative or his/her designee and must have an active eGrants account to sign these documents electronically. A copy of the governing body's authorization for this official representative to sign must be on file in the applicant's office. Be sure to check your entire application to make sure that there are no errors before submitting it. eGrants will also generate a list of errors if there are sections that need to be corrected prior to submission when you verify the application.

If someone else is acting in the role of the applicant's authorized representative, that person must log into their eGrants account and proceed with Authorize and Submit. After signing off on the Authorization, Assurances, and Certifications, their name will override any that may appear and show on the application as the authorized representative.

IX. Survey on Ensuring Equal Opportunity for Applicants (Optional)

The Corporation and other federal agencies are collaborating with the White House Office of Faith-Based and Community Initiatives to conduct a survey of organizations that apply for federal funding. The purpose of this voluntary information collection is to compile statistics on the types of organizations that apply to the Corporation for funds, such as number of employees, budget size, and self-identification as a faith-based/religious organization or a non-religious community-based organization.

This form is for applicants that are nonprofit private organizations, **not including private universities.** All information from the attached survey will be confidential and the responses will be aggregated for a summary report. Information provided on your form will not be released and will not be considered in any way in making funding decisions. If you are submitting a hard copy application, the form can be found in Attachment I.

You may complete the survey while preparing your application or after submitting your application.

1) To complete the survey while preparing your application, go to the Main Menu, select Enter Survey on Ensuring Equal Opportunity, provide requested information and submit.
2) If you submit your grant application without completing the survey, a pop-up box will appear and ask you if you would like to complete the survey. You may select Yes, No, or Remind Me Later. If you select Remind Me Later, you will be asked to fill in the survey next time you attempt to submit an application to the Corporation for National and Community Service.

Application Instructions:
CONTINUATION REQUESTS

The following instructions for submitting a continuation request apply only to programs that are currently in their first or second year of operation within a three-year grant cycle. If your program is currently in the final year of its grant cycle, you must apply using the application instructions for new and recompeting programs. In addition, if you are applying for a fixed-amount grant you need to submit a new application; you cannot continue your existing three-year project period.

When to Submit Your Continuation Request:
The date for the submission of continuation requests is **January 26, 2010** at **5:00 p.m. Eastern Time**.

How to Submit Your Continuation Request:
- Submit your continuation request in eGrants.
- To create your continuation request in eGrants, click **Continuation** on your eGrants home page. You will be shown a list of grants that are eligible to be continued. Select the grant you wish to continue. **Make sure you select the correct one**. The system will copy your most recently awarded application.
- Edit your continuation application as directed in the continuation request instructions below. When you have completed your edits, click the **SUBMIT** button.

Be sure you also review the *Notice* when preparing your request. If you have questions about the content of your continuation request, please contact your program officer. **If you experience problems using eGrants, contact the eGrants Help Desk at (888) 677-7849 or (202) 606-7506, or email at egrantshelp@cns.gov.**

What to Include in Your Continuation Request:

I. Applicant Info and Application Info
Update the Applicant Info and Application Info Sections in eGrants if necessary. Note in the Continuation Changes field that you have updated the Applicant Info or Application Info Section(s).

II. Narrative (Narratives Section)

Your original application will appear in the narrative sections Rationale and Approach, Community Outputs and Outcomes, Organizational Capability, Cost-Effectiveness and Budget Adequacy, Evaluation Summary or Plan, Amendment Justification, Clarification Information, and Continuation Changes, as appropriate.

If you have changes in any of these areas, please document them in the Continuation Changes field in eGrants. Delete information previously entered in the Continuation Changes field before entering new information. Do not enter continuation changes in the original fields. If you are not proposing changes to your continuation request, simply leave your original narrative as it is, and enter No Changes in the Continuation Changes field.

Enrollment
If you enrolled less than 100% of slots received during your last full year of program operation, provide an explanation, and describe your plan for improvement in the Continuation Changes field.

Retention
If you were not able to retain all of your members during your last full year of program operation, provide an explanation, and describe your plan for improvement in the Continuation Changes field. We recognize retention rates may vary among equally effective programs depending on the program model. We expect grantees to pursue the highest retention rate possible.

For Multi-state Continuations: Describe the manner and extent to which you consulted with the State Commission in the states in which you plan to operate.

III. Performance Measures (Performance Measures Section)
Your performance measures are copied from your previous year's application into your continuation request. If you need to revise your performance measures, View/Edit the performance measures that copy over from your original application, or add new performance measures. Note in the Continuation Changes field that you have updated your performance measures.

IV. Budget (Budget Section)
Provide a detailed budget for the upcoming year. Incorporate any required Corporation increases, such as an increase to the member living allowance into your budget. Your budget from the previous year's application is copied into your continuation request so you can make the necessary adjustments.

Source of Match
In the "Source of Match" field that appears at the end of Section III, enter a brief description of the Source of Match, the amount, the match classification (Cash, In-kind, or Not Available) and Match Source (State/Local, Federal, Private, Other or Not Available). Define any acronyms the first time they are used.

V. Increasing Grantee Overall Share of Total Budgeted Costs

Grantees are required to meet an overall matching rate that increases over time. You have the flexibility to meet the overall match requirements in any of the three budget areas, as long as the minimum match of 24% for the first three years, and the increasing minimum in years thereafter, are maintained. These matching requirements may be waived in limited circumstances. See 45 CFR §§ 2521.35–2521.95 for the specific regulatory match and waiver requirements.

Applying for Alternative Match

If you are requesting the alternative match as specified in § 2521.60(b), you must demonstrate that your program is either located in a rural county or in a severely economically distressed community as defined below. Also describe the efforts you have taken to raise the resources needed to meet the matching requirements in the Waiver Justification field in the Application Info Section of eGrants.

Please see 45 CFR §§ 2521.35–2521.90, for match and waiver requirements. You apply for the alternative match the year before it goes into effect. If approved, you will base your budget in your next application on the approved alternative match. The alternative match requirement will be in effect for whatever portion of the three-year project period remains, if you are approved for funding.

A. **Program Location**: Except when approved otherwise, the Corporation will determine the location of your program based on the legal applicant's address. If you believe that the legal applicant's address is not the appropriate way to consider the location of your program, you must provide relevant facts about your program location in your waiver request. The Corporation will, in its sole discretion, determine whether some other address is more appropriate for determining a program's location.

B. **Rural County:** In determining whether a program is rural, the Corporation will consider the most recent Beale code rating published by the U.S. Department of Agriculture for the county in which the program is located. Any program located in a county with a Beale code of 6, 7, 8 or 9 is eligible to apply for the alternative match requirement. See Attachment J for the Table of Beale codes.

C. **Severely Economically Distressed County**: In determining whether a program is located in a severely economically distressed county, the Corporation will consider the following list of county-level characteristics. See Attachment J for a list of website addresses where this publicly available information can be found.
   - The county-level per capita income is less than or equal to 75 percent of the national average for all counties using the most recent census data or Bureau of Economic Analysis data;
   - The county-level poverty rate is equal to or greater than 125 percent of the national average for all counties using the most recent census data; and
   - The county-level unemployment is above the national average for all counties for the previous 12 months using the most recently available Bureau of Labor Statistics data.

ATTACHMENT A: Facesheet Instructions (eGrants Applicant Info and Application Info Sections)

Modified Standard Form 424 (Rev. 11/02 to conform to the Corporation's eGrants system)

This form is required for applications submitted for federal assistance.

Item #

1. Filled in for your convenience.
2. Self-explanatory.
3. 3. a. and 3. b. are for state use only (if applicable).
4. Item 4. a: Leave blank.
   Item 4. b: If you are a recipient in year 2 or 3 of an already-awarded grant, enter the grant number, otherwise, leave blank.
5. Enter the following information:
   a. The complete name of the organization that will be legally responsible for the grant, not the name of the organizational unit within the legally responsible organization. (For example, indicate "National University" instead of "Liberal Arts Department.")
   b. Your organization's DUNS number (received from Dun and Bradstreet). **This is a required field. Please see the Notice for instructions on how to obtain a DUNS number.**
   c. The name of the primary organizational unit that will undertake the assistance activity, if different from 5. a.
   d. Your organization's complete address with the 9 digit ZIP+ 4 code.
   e. The name and contact information of the project director or other person to contact on matters related to this application.
6. Enter your Employer Identification Number (EIN) as assigned by the Internal Revenue Service.
7. Item 7. a.: Enter the appropriate letter in the box.
   Item 7. b.: Please enter the characteristic(s) that best describe your organization.

K-12 Education

1 School (K-12)
2 Local Education Agency
3 State Education Agency

Higher Education

4 Vocational/Technical College
5 Community College
6 2-year College
7 4-year College
8 Hispanic Serving College or University
9 Historically Black College or University
10 Tribally Controlled College or University

Non-Profit Organizations

11 Community-Based Organization
12 Faith-Based Organization
13 Chamber of Commerce/ Business Association
14 Community Action Agency/ Program
15 Service/Civic Organization
16 Volunteer Management Organization
17 Self-Incorporated Senior Corps Project
18 Statewide Association
19 National Non-Profit (Multistate)
20 Local Affiliate of National Organization
21 Tribal Organization (Non-government)
22 Other Native American Organization

Government

23 Local Government-Municipal
24 Health Department
25 Law Enforcement Agency
26 Governor's Office
27 State Commission/Alternative Administrative Entity
28 Other State Government
29 Tribal Government Entity
30 Area Agency on Aging
31 U.S. Territory

8. Check the appropriate box for type of application and enter the appropriate letter(s) in the lower boxes:
   - Check "New" if your organization has never held an AmeriCorps State or National grant before.
   - Check "New Application/Previous Grantee" if your organization has held an AmeriCorps State or National grant in the past and the application is for a new grant.
   - Check "Continuation" if you are a grantee applying for an additional year of funding within an existing multi-year grant project period. AmeriCorps State and National grants are typically awarded for three-year periods.
   - Check "Amendment" if you are a grantee proposing any measurable change in an existing grant award; e.g., a budget amendment, extension, changes in the program scope or goals, etc.

   If you are proposing an amendment to your grant, check the type of revision you are submitting.

   A. Select "Augmentation" if you are an AmeriCorps State or National grantee submitting a revised budget to incorporate a Corporation-authorized increase.
   B. Select "Budget Revision" to make a change in the grant budget, including slots.
   C. Select "No-cost Extension" to request an extension of the grant period, then enter the extension date requested in the blank following the checkbox. No-cost extensions can be requested only in the third year of the 3-year grant cycle and must be requested before the project period ends.
   D. Select "Other," as applicable, and specify in the blank provided.

9. Filled in for your convenience.

10. Use the following list of CFDA (Catalog of Federal Domestic Assistance) numbers for the applicable program listing, or other source if so instructed in the *Notice*: 94.006 AmeriCorps State and National.

11. Enter the project title.
    a. When applying for a "Continuation" or "Amendment" applicants should use the same title as used for their existing grant program. When applying as a "New Applicant/Previous Grantee" if the application is for re-funding of a previous grant program, use the same title as was used in the prior grant program if appropriate (i.e., if the program is unchanged).
    b. Enter the name of the Corporation's program initiative, if any, as provided in the instructions corresponding to the *Notice* for which you are applying; otherwise, leave blank.

12. List only the largest political entities affected (e.g., counties, and cities).

13. (See item 8) "New" application or "New application/previous grantee:" Enter the dates for the proposed project period. "Continuation" or "Amendment" application: Enter the dates of the approved project period.

    Performance Period: this appears only in eGrants, and is for the use of staff only.

14. Leave blank, staff use only.

15. Estimated Funding. Check the appropriate box to indicate the grant year for which funding is being requested. Enter the amount requested or to be contributed <u>during this budget</u> <u>period</u> on each appropriate line, as shown below. The value of in-kind contributions should be included in these amounts, as applicable. For revisions (See item 8), if the action will result in a dollar change

to an existing award, include only the amount of the change. For decreases, enclose the amounts in parentheses.

a. Federal	The total amount of federal funds being requested in the budget.
b. Applicant	The total amount of the applicant share as entered in the budget.
c. State	The amount of the applicant share that is coming from state sources.
d. Local	The amount of the applicant share that is coming from local governmental sources (e.g., city, county and other municipal sources).
e. Other	The amount of the applicant share that is coming from non-governmental sources.
f. Program Income	The amount of the applicant share that is coming from income generated by programmatic activities (i.e., use of the additive option where program income is used to increase the size of the program).
g. Total	The applicant's estimate of the total funding amount for the agreement.

16. Pre-filled for your convenience. This program is excluded from coverage by State Executive Order 12372.

17. Check the appropriate box. This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit allowances, loans, and taxes. If Yes, attach an explanation.

18. The person who signs this form must be the applicant's authorized representative. A copy of the governing body's authorization for this official representative to sign must be on file in the applicant's office.

Note: Falsification or concealment of a material fact, or submission of false, fictitious or fraudulent statements or representations to any department or agency of the United States Government may result in a fine of not more than $10,000 or imprisonment for not more than five (5) years, or both. (18 U.S. Code Section 1001

APPLICATION FOR FEDERAL ASSISTANCE

Standard Form 424 (Rev. 9-2003) Prescribed by OMB Circular A-102

1. TYPE OF SUBMISSION:
☒ Application ☒ Non-Construction ☐

2. a. DATE SUBMITTED:	**3. a. DATE RECEIVED BY STATE:**	3. b. STATE APPLICATION IDENTIFIER:
2. b. APPLICATION IDENTIFIER:	**4. a. DATE RECEIVED BY FEDERAL AGENCY:**	4. b. FEDERAL IDENTIFIER: (Staff Only)

5. APPLICANT INFORMATION

5. a. LEGAL NAME:
5. b. ORGANIZATIONAL DUNS:
5. c. ORGANIZATIONAL UNIT (DEPARTMENT/DIVISION):

5. d. ADDRESS *(give street address, city, county, state and zip code):*
STREET:
CITY: COUNTY:
STATE: COUNTRY:

5. e. NAME AND TELEPHONE NUMBER OF PERSON TO BE CONTACTED ON MATTERS INVOLVING THIS APPLICATION *(give area code):*

NAME:
TELEPHONE NUMBER: ( ) -
FAX NUMBER: ( ) - EMAIL:

6. EMPLOYER IDENTIFICATION NUMBER *(EIN):*

7. a. TYPE OF APPLICANT: (*enter appropriate letter in box)*

A. State	H. Independent School District
B. County	I. State Controlled Institution of Higher Learning
C. Municipal	J. Private University
D. Township	K. Indian Tribe
E. Interstate	L. Individual
F. Intermunicipal	M. Profit Organization
G. Special District	N. Private Non-Profit Organization
O. Federal Government	P. HQ Internal Organizations
Q. State Education Agency	R. Territory

S. Other (specify)_____

7. b. CNCS APPLICANT CHARACTERISTICS *Enter appropriate codes:*

8. TYPE OF APPLICATION
☐ NEW ☐ NEW/PREVIOUS GRANTEE
☐ CONTINUATION ☐ REVISION

If Revision, enter appropriate letter(s) in box(es):

A. AUGMENTATION B. BUDGET REVISION:
C. NO COST EXTENSION to _____ *(enter date)*
E. OTHER (*specify below)*
_____

9. NAME OF FEDERAL AGENCY:
Corporation for National and Community Service

10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER:

11. a. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:

12. AREAS AFFECTED BY PROJECT *(List Cities, Counties, States, etc.):*

11.b. CNCS PROGRAM INITIATIVE (IF ANY):

13. PROPOSED PROJECT: START DATE: ENDING DATE:

14. Performance Period (Staff Use Only_

15. ESTIMATED FUNDING: Check applicable box: Yr 1: ☐ Yr.2: ☐ Yr. 3: ☐

a. FEDERAL	$
b. APPLICANT	$
c. STATE	$
d. LOCAL	$
e. OTHER	$
f. PROGRAM INCOME	$
g. TOTAL	$

16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?

a. YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE
TO THE STATE EXECUTIVE ORDER 12372 PROCESSS FOR REVIEW ON:
DATE _____

b. NO. ☒ PROGRAM IS NOT COVERED BY E.O. 12372

17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?
☐ YES If "Yes," attach an explanation. ☐ NO

18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.

a. TYPED NAME OF AUTHORIZED REPRESENTATIVE:	b. TITLE:	c. TELEPHONE NUMBER:
d. SIGNATURE OF AUTHORIZED REPRESENTATIVE:		e. DATE SIGNED:

ATTACHMENT B: Program Model, Design, Location, and Focus (eGrants Applicant Info Section)

SECTION I: PROGRAM MODEL

Directions: Choose one primary and one secondary program model, if applicable.

P	Section I: Project Models (select one for primary and another for secondary)	
	Youth Corps	A full-time year-round youth corps program or full-time summer youth corps program, such as a conservation corps or youth service corps that undertakes meaningful service projects with visible public benefits; includes as participants youths and young adults between the ages of 16 and 25 inclusive, including out-of-school youths and other disadvantaged youths.
	Community Corps	A community corps program that meets unmet human, educational, environmental, or public safety needs and promotes greater community unity through the use of organized teams of participants of varied social and economic backgrounds, skill levels, physical and developmental capabilities, ages, ethnic backgrounds, or genders.
	Campus-based Model	A campus-based program that is designed to provide substantial service in a community during the school term and during summer or other vacation periods through the use of students who are attending an institution of higher education.
	Pre-Professional Corps	A pre-professional training program in which students enrolled in an institution of higher education receive training in specified fields, which may include classes containing service-learning; perform service related to such training outside the classroom during the school term and during summer and other vacation periods; and agree to provide service upon graduation to meet unmet human, educational, environmental, or public safety needs related to such training.
	Professional Corps	A professional corps program that recruits and places qualified participants to meet unmet human, educational, environmental, or public safety needs in communities with an inadequate number of such professionals.
	Entrepreneur Corps	A national service entrepreneur program that identifies, recruits, and trains gifted young adults of all backgrounds and assists them in designing solutions to community problems.
	Intergenerational Program	An intergenerational program that combines students, out-of-school youths, and older adults as participants to provide needed community services, including an intergenerational component for other national service programs described in this subsection.
	Service-Learning Program	A program that provides specialized training to individuals in service-learning and places the individuals after such training in positions, including positions as service-learning coordinators to facilitate service-learning in programs eligible for funding under Learn and Serve America School-Based and Community-Based Grants.
	Rural Corps	A program designed to meet the needs of rural communities, using teams or individual placements to address the development needs of rural communities and to combat rural poverty, including health care, education, and job training.
	Hunger Elimination Program	A program that seeks to eliminate hunger in communities and rural areas through service in projects involving food banks, food pantries, and nonprofit organizations that provide food during emergencies.

SECTION II: PROGRAM DESIGN

Directions: Choose one or more project designs.

P	Section II: Program Design	
	Team-Based	A program where members regularly function as a team during the service week.
	Individual Placement /Scattered Site	A program that places one or two members at sites in a variety of locations.
	Intermediary Organization	Intermediary organizations provide the mechanism by which a number of community or faith-based organizations or grassroots groups may access AmeriCorps and other Corporation resources. We define intermediaries as national, regional, state, or local organizations that agree to provide the technical and financial support to assist community or faith-based organizations that do not have the capacity to perform these functions. Intermediaries serve as the legal applicant for a Corporation grant, thereby ensuring that the systems to manage a federal grant are in place.
	Statewide Initiative	A program that operates throughout the state and may or may not have a single issue focus.

SECTION III: PROGRAM LOCATION

Directions: Please enter your program's location information.

P	Geography (please check one)	
	Urban	A program designed to meet the needs of urban communities.
	Rural	A program designed to meet the needs of rural communities.
	Both	A program designed to meet the needs of both urban and rural communities.
		Areas of Need Identification: Check all that apply (optional)
	Areas Affected by Military Downsizing	Areas adversely impacted by reductions in defense spending or the closure or realignment of military installations.
	Empowerment Zones or Redevelopment Areas	Communities designated as empowerment zones or redevelopment areas that are targeted for special economic incentives, or otherwise identifiable as having high concentrations of low-income people.
	Environmentally Distressed Areas	Areas that are environmentally distressed.
	Areas Affected by Management of Federal Lands	Areas adversely affected by federal actions related to the management of federal lands that result in significant regional job losses and economic dislocation.
	Areas with High Unemployment Rates	Areas that have an unemployment rate greater than the national average unemployment for the most recent 12 months for which satisfactory data are available.

SECTION IV: PROGRAM FOCUS

Directions: Choose one or more program focus areas from below.

P	Section IV: Program Focus				
	African American community		Pre-school Children		At-Risk Youth
	Asian American community		K-12 Students		Children of Prisoners
	Latin American community		Young Adults (17-24)		Foster Children
	Native American community		College Students		
	Families/Parents		Incarcerated Individuals and Ex-Offenders		Seniors
	Homeless		Low-Income Community		Unemployed
	Homeless Veterans		Low-Income Housing Residents		Veterans
	Immigrants		Mentally/Physically Challenged		Victims/Potential Victims of Crime
			Persons with HIV/AIDS		
	Asset Accumulation	Community and faith-based organizations that conduct activities that empower the poor through asset accumulation programs including home ownership, individual development accounts, and financial literacy.			
	Strengthening Families	Community and faith-based organizations that conduct activities that strengthen families to break the intergenerational cycle of poverty.			

ATTACHMENT C: Issue Areas and Service Categories (eGrants Performance Measures Section)

In this section you will select service categories that describe your program activities. First select an issue area, and then choose one or more service categories. When you have selected all applicable service categories, indicate which service category is the primary one by entering a 1 next to the check box, and which is the secondary by entering a 2 next to the checkbox. Only one service category can be indicated as the primary, and one as the secondary.

Issue Areas and Service Categories (Issue Areas in Bold)

☐ **Community and Economic Development**
- ☐ Community-based Volunteer Programs
- ☐ Community Revitalization/Improvement
- ☐ Consumer Education
- ☐ Cooperatives/Credit Unions
- ☐ Food Production/Community Gardens/Farming
- ☐ Job Development/Placement
- ☐ Management Consulting
- ☐ Micro Enterprise
- ☐ Other Economic and Community Development
- ☐ Public Safety
- ☐ Regional/State/City Planning
- ☐ Small/Minority Business Development
- ☐ Social Services Planning & Delivery Systems/Community Organization
- ☐ Tax Counseling/Counseling
- ☐ Technology Access
- ☐ Thrift Store
- ☐ Transportation Services
- ☐ Welfare to Work

☐ **Disaster Recovery/Relief**
- ☐ Disaster Mitigation
- ☐ Disaster Preparedness
- ☐ Disaster Recovery
- ☐ Disaster Response
- ☐ Other Disaster

☐ **Education**
- ☐ Adult Education and Literacy
- ☐ After School Programs
- ☐ America Reads
- ☐ Computer Literacy
- ☐ Cultural Heritage
- ☐ ESL
- ☐ Elementary Education
- ☐ GED/Dropouts
- ☐ Head Start/School Preparedness
- ☐ Job Preparedness/School to Work
- ☐ Library Services
- ☐ Other Education
- ☐ Pre-Elementary Day Care
- ☐ Secondary Education
- ☐ Service-Learning
- ☐ Special Education
- ☐ Tutoring & Child Literacy—Elementary
- ☐ Tutoring & Child Literacy—High School
- ☐ Tutoring & Child Literacy—Middle School
- ☐ Vocational Education
- ☐ Youth Leadership/Development

☐ **Environment**
- ☐ Clean Air
- ☐ Clean and Safe Water
- ☐ Community Restoration/Clean Up
- ☐ Energy Conservation
- ☐ Environmental Awareness
- ☐ Indoor Environment
- ☐ Other Environment
- ☐ Toxic Waste Management
- ☐ Waste Reduction, Management, and Recycling
- ☐ Wildlife, Land & Vegetation Protection or Restoration

☐ **Health/Nutrition**
- ☐ Boarder Babies
- ☐ CHIOS/SCHIPS
- ☐ Congregate Meals
- ☐ Delivery of Health Services
- ☐ Food Distribution/Collection
- ☐ HIV/AIDS
- ☐ Health Education
- ☐ Health Screening
- ☐ Hospice/Terminally Ill
- ☐ Immunization
- ☐ In-Home Care
- ☐ Maternal/Child Health Services
- ☐ Mental Health
- ☐ Mental Retardation
- ☐ Other Health/Nutrition
- ☐ Physical Disabilities Programs
- ☐ Substance Abuse

☐ **Homeland Security**
- ☐ Disaster Preparedness/Relief
- ☐ Public Health
- ☐ Other Homeland Security
- ☐ Public Safety

☐ **Human Needs**
- ☐ Adoption
- ☐ Adult Day Care/Senior Center
- ☐ Companionship/Outreach
- ☐ Crisis Intervention
- ☐ Intensive Mentoring (at least 1 hour weekly for at least 9 months)
- ☐ Mentoring
- ☐ Other Human Needs
- ☐ Respite
- ☐ Senior Center Program (Non Residential)
- ☐ Senior Citizen Assistance
- ☐ Teen Pregnancy/Abstinence/Parent Support

☐ **Housing**
- ☐ Home Management Support/Education
- ☐ Homeless
- ☐ Housing Referrals/Relocation/Other
- ☐ Housing Rehabilitation/Construction
- ☐ Independent Living—Disabled
- ☐ Independent Living—Seniors
- ☐ Other Housing
- ☐ Tenant Organizing
- ☐ Transitional Housing

☐ **Public Safety**
- ☐ Adult Offender/Ex-Offender Services/Rehabilitation
- ☐ Child Abuse/Neglect
- ☐ Children & Youth Safety Programs
- ☐ Community Policing/Community Patrol
- ☐ Conflict Resolution/Mediation
- ☐ Crime Awareness/Crime Avoidance
- ☐ Elder Abuse/Neglect
- ☐ Family Violence
- ☐ Improvement of Household Security
- ☐ Juvenile Justice, Delinquency, Gangs
- ☐ Legal Assistance
- ☐ Neighborhood Watch/Block Watch
- ☐ Other Public Safety
- ☐ Safe Havens
- ☐ Safety/Fire Prevention/Accident Prevention
- ☐ Sexual Abuse/Rape
- ☐ Victim/Witness Assistance

ATTACHMENT D: Performance Measure Worksheet (eGrants Performance Measures Section)

Please fill in the performance measure information for each section.
General Info
Performance Measurement Title:
Measure Category (choose one): Needs and Service Activities Participant Development Strengthening Communities
Service Category addressed by this Performance Measure Worksheet (see Attachment A, Service Categories):
Needs and Activities
Briefly describe the need to be addressed (1-3 sentences):
Briefly describe how you will achieve this result (1-3 sentences):
How many AmeriCorps members will be participating in this activity?
How many days per week (on average) will this activity occur?
How many hours per day (on average) will this activity occur?
When does this activity begin?
When does this activity end?
Results
The outputs and outcomes you intend to track for a particular activity:
Result Type
Outputs are counts of the amount of service members or volunteers have completed, but do not provide information on benefits to or other changes in the lives of members and/or beneficiaries.
Intermediate-outcomes specify changes that have occurred in the lives of members and/or beneficiaries, but are short of a significant benefit for them.
Result: Output
Result Statement: 1-2 sentences stating the expected result.
Indicator: A specific, measurable item of information that specifies progress toward achieving a result. Indicator:

Other Indicator:
Targets
Target Description:
(number) or % (percent):
Instruments: Specific tool to collect information (e.g. behavior checklist, tally sheet, attitude questionnaire, interview protocol).
Result: Intermediate Outcome
Result Statement: 1-2 sentences stating the expected result.
Indicator: A specific, measurable item of information that specifies progress toward achieving a result. Indicator:
Other Indicator:
Targets
Target Description:
(number) or % (percent):
Instruments: Specific tool to collect information (e.g. behavior checklist, tally sheet, attitude questionnaire, interview protocol).

ATTACHMENT E: Assurances and Certifications (eGrants Review, Authorize and Submit Section)

Instructions

By signing and submitting this application, as the duly authorized representative of the applicant, you certify that the applicant will comply with the Assurances and Certifications described below.

a) Inability to certify
Your inability to provide the assurances and certifications listed below will not necessarily result in denial of a grant. You must submit an explanation of why you cannot do so. We will consider your explanation in determining whether to enter into this transaction. However, your failure to furnish an explanation will disqualify your application.

b) Erroneous certification or assurance
The assurances and certifications are material representations of fact upon which we rely in determining whether to enter into this transaction. If we later determine that you knowingly submitted an erroneous certification or assurance, in addition to other remedies available to the federal government, we may terminate this transaction for cause or default.

c) Notice of error in certification or assurance
You must provide immediate written notice to us if at any time you learn that a certification or assurance was erroneous when submitted or has become erroneous because of changed circumstances.

d) Definitions
The terms “covered transaction”, “debarred”, “suspended”, “ineligible”, “lower tier covered transaction”, “participant”, “person”, “primary covered transaction”, “principal”, “proposal”, and “voluntarily excluded” as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. An applicant shall be considered a “prospective primary participant in a covered transaction” as defined in the rules implementing Executive Order 12549. You may contact us for assistance in obtaining a copy of those regulations.

e) Assurance requirement for subgrant agreements
You agree by submitting this proposal that if we approve your application you shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by us.

f) Assurance inclusion in subgrant agreements
You agree by submitting this proposal that you will obtain an assurance from prospective participants in all lower tier covered transactions and in all solicitations for lower tier covered transactions that the participants are not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction.

g) Assurance of subgrant principals
You may rely upon an assurance of a prospective participant in a lower-tier covered transaction that is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless you know that the assurance is erroneous. You may decide the method and frequency by which you determine the eligibility of your principals. You may, but are not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

h) Non-assurance in subgrant agreements
If you knowingly enter into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the federal government, we may terminate this transaction for cause or default.

i) Prudent person standard
Nothing contained in the aforementioned may be construed to require establishment of a system of records in order to render in good faith the assurances and certifications required. Your knowledge and information is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

ASSURANCES

As the duly authorized representative of the applicant, I certify, to the best of my knowledge and belief, that the applicant:

- Has the legal authority to apply for federal assistance, and the institutional, managerial, and financial capability (including funds sufficient to pay the non-federal share of project costs) to ensure proper planning, management, and completion of the project described in this application.
- Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the state, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
- Will establish safeguards to prohibit employees from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
- Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
- Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 CFR 900, Subpart F).
- Will comply with all federal statutes relating to nondiscrimination. These include but are not limited to: Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color, or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. 1681-1683, and 1685-1686). which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), which prohibits discrimination on the basis of disability (d) The Age Discrimination Act of 1975, as amended (42 U.S.C. 6101-6107), which prohibits discrimination on the basis of age; (e) The Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) The Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) sections 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290dd-3 and 290ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the National and Community Service Act of 1990, as amended; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
- Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of federal participation in purchases.
- Will comply with the provisions of the Hatch Act (5 U.S.C. 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
- Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C 276a and 276a-77), the Copeland Act (40 U.S.C 276c and 18 U.S.C. 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. 327-333), regarding labor standards for Federally assisted construction sub-agreements.
- Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires the recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is $10,000 or more.
- Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved state management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C 1451 et seq.); (f) conformity of federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).

- Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
- Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16U.S.C. 469a-l et seq.).
- Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
- Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
- Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§ 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
- Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984, as amended, and OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations.
- Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, application guidelines, and policies governing this program.

For AmeriCorps State and National Applicants ONLY

If you are not applying for a grant through AmeriCorps, you may ignore this section.

- Will comply with all rules regarding prohibited activities, including those stated in applicable Notice, grant provisions, and program regulations, and will ensure that no assistance made available by the Corporation will be used to support any such prohibited activities.
- Will comply with the nondiscrimination provisions in the national service laws, which provide that an individual with responsibility for the operation of a project or program that receives assistance under the national service laws shall not discriminate against a participant in, or member of the staff of, such project or program on the basis of race, color, national origin, sex, age, political affiliation, disability, or on the basis of religion. (NOTE: the prohibition on religious discrimination does not apply to the employment of any staff member paid with non-Corporation funds or paid with Corporation funds but employed with the organization operating the project prior to or on the date the grant was awarded. If your organization is a faith-based organization that makes hiring decisions on the basis of religious belief, your organization may be entitled, under the Religious Freedom Restoration Act, 42 U.S.C. § 2000bb, to receive federal funds and yet maintain that hiring practice, even though the national service legislation includes a restriction on religious discrimination in employment of staff hired to work on a Corporation-funded project and paid with Corporation grant funds. (42 U.S.C. §§ 5057(c) and 12635(c)). For the circumstances under which this may occur, please see the document "Effect of the Religious Freedom Restoration Act on Faith-Based Applicants for Grants" on the Corporation's website at: http://www.usdoj.gov/archive/fbci/effect-rfra.pdf.
- Will comply with all other federal statutes relating to nondiscrimination, including any self-evaluation requirements. These include but are not limited to: (a)Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color, or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. 1681-1683, and 1685-1686). which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), which prohibits discrimination on the basis of handicaps (d) The Age Discrimination Act of 1975, as amended (42 U.S.C. 6101-6107), which prohibits discrimination on the basis of age; (e) The Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) The Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) sections 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; and (i) the requirements of any other nondiscrimination statute(s) which may apply to the application.

- Will provide, in the design, recruitment, and operation of any AmeriCorps program, for broad-based input from – (1) the community served, the municipality and government of the county (if appropriate) in which the community is located, and potential participants in the program; and (2) community-based agencies with a demonstrated record of experience in providing services and local labor organizations representing employees of service sponsors, if these entities exist in the area to be served by the program;

- Will, prior to the placement of participants, consult with the appropriate local labor organization, if any, representing employees in the area who are engaged in the same or similar work as that proposed to be carried out by an AmeriCorps program, to ensure compliance with the nondisplacement requirements specified in section 177 of the NCSA;

- Will, in the case of an AmeriCorps program that is not funded through a State, consult with and coordinate activities with the State Commission for the state in which the program operates.

- Will ensure that any national service program carried out by the applicant using assistance provided under section 121 of the National and Community Service Act of 1990 and any national service program supported by a grant made by the applicant using such assistance will address unmet human, educational, environmental, or public safety needs through services that provide a direct benefit to the community in which the service is performed;

- Will comply with the nonduplication and nondisplacement requirements set out in section 177 of the National and Community Service Act of 1990, and in the Corporation's regulations at § 2540.100;

- Will comply with the grievance procedure requirements as set out in section 176(f) of the National and Community Service Act of 1990 and in the Corporation's regulations at 45 CFR § 2540.230;

- Will provide participants in the national service program with the training, skills, and knowledge necessary for the projects that participants are called upon to perform;

- Will provide support services to participants, such as information regarding G.E.D. attainment and post-service employment, and, if appropriate, opportunities for participants to reflect on their service experiences;

- Will arrange for an independent evaluation of any national service program carried out using assistance provided to the applicant under section 121 of the National and Community Service Act of 1990 or, with the approval of the Corporation, conduct an internal evaluation of the program;

- Will apply measurable performance goals and evaluation methods, which are to be used as part of such evaluation to determine the program's impact on communities and persons served by the program, on participants who take part in the projects, and in other such areas as required by the Corporation;

- Will ensure the provision of a living allowance and other benefits to participants as required by the Corporation;

- Has not violated a Federal criminal statute;

- If a state applicant, will ensure that the State subgrants will be used to support national service programs selected by the State on a competitive basis;

- If a state applicant, will seek to ensure an equitable allocation within the State of assistance and approved national service positions, taking into consideration such factors as the locations of the programs, population density, and economic distress;

- If a state applicant, will ensure that not less than 60% of the assistance will be used to make grants to support national service programs other than those carried out by a State agency, unless the Corporation approves otherwise.

CERTIFICATIONS

Certification – Debarment, Suspension, and Other Responsibility Matters

This certification is required by the government-wide regulations implementing Executive Order 12549, Debarment and Suspension, 2 CFR Part 180, Section 180.335, *What information must I provide before entering into a covered transaction with a Federal agency?*

As the duly authorized representative of the applicant, I certify, to the best of my knowledge and belief, that neither the applicant nor its principals:

- Is presently excluded or disqualified;
- Has been convicted within the preceding three years of any of the offenses listed in § 180.800(a) or had a civil judgment rendered against it for one of those offenses within that time period;
- Is presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission or any of the offenses listed in § 180.800(a); or
- Has had one or more public transactions (Federal, State, or local) terminated within the preceding three years for cause or default.

Certification – Drug Free Workplace

This certification is required by the Corporation's regulations implementing sections 5150-5160 of the Drug-Free Workplace Act of 1988 (P.L. 100-690), 45 CFR Part 2545, Subpart B. The regulations require certification by grantees, prior to award, that they will make a good faith effort, on a continuing basis, to maintain a drug-free workplace. The certification set out below is a material representation of fact upon which reliance will be placed when the agency determines to award the grant. False certification or violation of the certification may be grounds for suspension of payments, suspension or termination of grants, or government-wide suspension or debarment (see 45 CFR Part 2542, Subparts G and H).

As the duly authorized representative of the grantee, I certify, to the best of my knowledge and belief, that the grantee will provide a drug-free workplace by:

A. Publishing a drug-free workplace statement that:
    a. Notifies employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace;
    b. Specifies the actions that the grantee will take against employees for violating that prohibition; and
    c. Informs employees that, as a condition of employment under any award, each employee will abide by the terms of the statement and notify the grantee in writing if the employee is convicted for a violation of a criminal drug statute occurring in the workplace within five days of the conviction;

B. Requiring that a copy of the statement described in paragraph (A) be given to each employee who will be engaged in the performance of any Federal award;

C. Establishing a drug-free awareness program to inform employees about:
    a. The dangers of drug abuse in the workplace;
    b. The grantee's policy of maintaining a drug-free workplace;
    c. Any available drug counseling, rehabilitation, and employee assistance programs; and
    d. The penalties that the grantee may impose upon them for drug abuse violations occurring in the workplace;

D. Providing us, as well as any other Federal agency on whose award the convicted employee was working, with written notification within 10 calendar days of learning that an employee has been convicted of a drug violation in the workplace;

E. Taking one of the following actions within 30 calendar days of learning that an employee has been convicted of a drug violation in the workplace:
    a. Taking appropriate personnel action against the employee, up to and including termination; or
    b. Requiring that the employee participate satisfactorily in a drug abuse assistance or rehabilitation program approved for these purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

F. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (A) through (E).

Certification - Lobbying Activities
As required by Section 1352, Title 31 of the U.S. Code, as the duly authorized representative of the applicant, I certify, to the best of my knowledge and belief, that:

- No federal appropriated funds have been paid or will be paid, by or on behalf of the applicant, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer of Congress in connection with the awarding of any federal contract, the making of any federal loan, the entering into of any cooperative agreement, or modification of any federal contract, grant, loan, or cooperative agreement;
- If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal contract, grant, loan, or cooperative agreement, the applicant will submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions;
- The applicant will require that the language of this certification be included in the award documents for all subcontracts at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients will certify and disclose accordingly.

Certification - Grant Review Process (State Commissions Only)
I certify that in conducting our review process, we have ensured compliance with the National and Community Service Act of 1990, the Corporation's peer review requirements, and all state laws and conflict of interest rules.

For AmeriCorps State and National Direct Applicants ONLY

If you are not applying for a grant through AmeriCorps, you may ignore this section.

Erroneous certification or assurance
The assurances and certifications are material representations of fact upon which we rely in determining whether to enter into this transaction. If we later determine that you knowingly submitted an erroneous certification or assurance, in addition to other remedies available to the federal government, we may terminate this transaction for cause or default.

Notice of error in certification or assurance
You must provide immediate written notice to us if at any time you learn that a certification or assurance was erroneous when submitted or has become erroneous because of changed circumstances.

Definitions
The terms “debarment”, “suspension”, “excluded”, “disqualified”, “ineligible”, “participant”, “person”, “principal”, “proposal”, and “voluntarily excluded” as used in this document have the meanings set out in 2 CFR Part 180, subpart I, “Definitions.” A transaction shall be considered a “covered transaction” if it meets the definition in 2 CFR part 180 subpart B, “Covered Transactions.”

Assurance requirement for subgrant agreements
You agree by submitting this proposal that if we approve your application you shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by us.

Assurance inclusion in subgrant agreements
You agree by submitting this proposal that you will obtain an assurance from prospective participants in all lower tier covered transactions and in all solicitations for lower tier covered transactions that the participants are not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction.

Assurance of subgrant principals
You may rely upon an assurance of a prospective participant in a lower-tier covered transaction that is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless you know that the assurance is erroneous. You may decide the method and frequency by which you determine the eligibility of your principals. You may, but are not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

Non-assurance in subgrant agreements
If you knowingly enter into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the federal government, we may terminate this transaction for cause or default.

Prudent person standard
Nothing contained in the aforementioned may be construed to require establishment of a system of records in order to render in good faith the assurances and certifications required. Your knowledge and information is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

ASSURANCES AND CERTIFICATIONS

ASSURANCE SIGNATURE: NOTE: Sign this form and include in the application.

SIGNATURE:
By signing this assurances page, you certify that you agree to perform all actions and support all intentions in the Assurances section.

Organization Name: _____

Program Name: _____

Name and Title of Authorized Representative: _____

Signature: _____

Date: _____

CERTIFICATION SIGNATURE: NOTE: Sign this form and include in the application.

SIGNATURE:
By signing this certification page, you certify that you agree to perform all actions and support all intentions in the Certification sections of this application. The three Certifications are:

- Certification: Debarment, Suspension and Other Responsibility Matters
- Certification: Drug-Free Workplace
- Certification: Lobbying Activities

Organization Name: _____

Program Name: _____

Name and Title of Authorized Representative: _____

Signature: _____

Date: _____

ATTACHMENT F: Budget Worksheet (eGrants Budget Section)

Section I. Program Operating Costs

A. Personnel Expenses

Position/Title/Description	Qty	Annual Salary	% Time	**Total Amount**	**CNCS Share**	**Grantee Share**
			Totals			

B. Personnel Fringe Benefits

Purpose/Description	Calculation	**Total Amount**	**CNCS Share**	**Grantee Share**
	Totals			

C.1. Staff Travel

Purpose	Calculation	**Total Amount**	**CNCS Share**	**Grantee Share**
	Totals			

C. 2. Member Travel

Purpose	Calculation	**Total Amount**	**CNCS Share**	**Grantee Share**
	Totals			

D. Equipment

Item/ Purpose/Justification	Qty	Unit Cost	**Total Amount**	**CNCS Share**	**Grantee Share**
		Totals			

E. Supplies

Purpose	Calculation	**Total Amount**	**CNCS Share**	**Grantee Share**
	Totals			

F. Contractual and Consultant Services

Purpose	Calculation	Daily Rate	**Total Amount**	**CNCS Share**	**Grantee Share**
		Totals			

G.1. Staff Training

Purpose	Calculation	Daily Rate	**Total Amount**	**CNCS Share**	**Grantee Share**
		Totals			

G.2. Member Training

Purpose	Calculation	Daily Rate	**Total Amount**	**CNCS Share**	**Grantee Share**
		Totals			

H. Evaluation

Purpose	Calculation	Daily Rate	**Total Amount**	**CNCS Share**	**Grantee Share**
		Totals			

I. Other Program Operating Costs

Purpose	Calculation	Daily Rate	**Total Amount**	**CNCS Share**	**Grantee Share**
		Totals			

Subtotal Section I:	**Total Amount**	**CNCS Share**	**Grantee Share**

Section II. Member Costs

A. Living Allowance

Item	# Mbrs	Allowance Rate	# w/o Allowance	**Total Amount**	**CNCS Share**	**Grantee Share**
Full Time (1700 hrs)						
Half Time (900 hrs)						
1st Year of 2-Year Half Time						
2nd Year of 2-Year Half Time						
Reduced Half Time (675 hrs)						
Quarter Time (450 hrs)						
Minimum Time (300 hrs)						
			Totals			

B. Member Support Costs

Purpose	Calculation	Daily Rate	**Total Amount**	**CNCS Share**	**Grantee Share**
		Totals			

	Total Amount	**CNCS Share**	**Grantee Share**
Subtotal Section II:			
Subtotal Sections I + II:			

Section III. Administrative/Indirect Costs

A. Corporation Fixed Percentage Method

Purpose	Calculation	**Total Amount**	**CNCS Share**	**Grantee Share**
	Totals			

B. Federally Approved Indirect Cost Rate Method

Cost Type	Cost Basis	Calculation	Rate	Rate Claimed	**Total Amount**	**CNCS Share**	**Grantee Share**

Total Sections I + II + III:	**Total Amount**	**CNCS Share**	**Grantee Share**

Budget Total: Validate this budget **Required Match Percentages:**	**Total Amount**	**CNCS Share**	**Grantee Share**

ATTACHMENT G: Budget Worksheet for Fixed-Amount Grants (eGrants Budget Section)

If you are applying for a Fixed-Amount Pilot grant, complete only the full-time fields in this Table.
Education Award Program applicants may complete other than full-time fields.

Item	# Mbrs	Allowance Rate	# w/o Allow	Total Amount	CNCS Share	Grantee Share		
Full Time (1700 hrs)								
1-Year Half Time (900 hrs)								
2-Year Half Time (1st Year)								
2-Year Half Time (2nd Year)								
Reduced Half Time (675 hrs)								
Quarter Time (450 hrs)								
Minimum Time (300 hrs)								
Subtotal							**MSY**	**Cost/MSY**

Member Positions

Purpose	Calculation	Total Amount	CNCS Share	Grantee Share
Program Grant Request				
Subtotal				

ATTACHMENT H: Budget Checklist

Below is a checklist to help you make certain that you submit an accurate budget narrative that meets AmeriCorps requirements.

In Compliance?	Section I. Program Operating Costs
Yes __ No __	Costs charged under the Personnel line item directly relate to the operation of the AmeriCorps project? Examples include costs for staff that recruit, train, place, or supervise members as well as manage the project.
Yes __ No __	Staff indirectly involved in the management or operation of the applicant organization is funded through the administrative cost section (Section III.) of the budget? Examples of administrative costs include central management and support functions.
Yes __ No __	Staff fundraising expenses are not charged to the grant? You may not charge AmeriCorps staff members' time and related expenses for fundraising to the federal or grantee share of the grant. Expenses incurred to raise funds must be paid out of the funds raised. Development officers and fundraising staff are not allowable expenses.
Yes __ No __	Brief position descriptions are provided for each staff member listed in the budget?
Yes __ No __	All positions in the budget are fully described in the narrative?
Yes __ No __	The types of fringe benefits to be covered and the costs of benefit(s) for each staff position are described? Allowable fringe benefits typically include FICA, Worker's Compensation, Retirement, SUTA, Health and Life Insurance, IRA, and 401K. You may provide a calculation for total benefits as a percentage of the salaries to which they apply or list each benefit as a separate item. If the fringe amount is over 30%, please list separately. Holidays, leave, and other similar vacation benefits are not included in the fringe benefit rates but are absorbed into the personnel expenses (salary) budget line item?
Yes __ No __	Holidays, leave, and other similar vacation benefits are not included in the fringe benefit rates but are absorbed into the personnel expenses (salary) budget line item?
Yes __ No __	The purpose for all staff and member travel is clearly identified?
Yes __ No __	You have budgeted funds for staff travel to CNCS sponsored meetings in the budget narrative?
Yes __ No __	Funds to pay relocation expenses of AmeriCorps members are not in the federal share of the budget?
Yes __ No __	Funds for the purchase of equipment (does not include general use office equipment) are limited to 10% of the total grant amount?
Yes __ No __	All single equipment items over $5000 per unit are specifically listed?
Yes __ No __	Justification/explanation of equipment items is included in the budget narrative?
Yes __ No __	All single supply items over $1000 per unit are specifically listed?
Yes __ No __	You only charged to the federal share of the budget member service gear, with the exception of safety equipment, that includes the AmeriCorps logo?
Yes __ No __	Are all consultant services budgeted below the maximum federal daily rate of $617/day? Is the daily rate noted in all sections of the budget narrative where consultants are proposed?
Yes __ No __	Does the budget reflect adequate budgeted costs for project evaluation?
Yes __ No __	Have you provided budgeted costs for background checks of members and grant-funded staff that are in covered positions per 45 CFR 2522.205?
Yes __ No __	Are all items in the budget narrative itemized and the purpose of the funds justified?

In Compliance?	Section II. Member Costs
Yes __ No __	Are the living allowance amounts correct? Full-time AmeriCorps members must receive at least the minimum living allowance as indicated in the chart in the budget instructions. Note: Programs in existence prior to September 21, 1993 may offer a lower living allowance than the minimum. If such a program chooses to offer a living allowance, it is exempt from the minimum requirement, but not from the maximum requirement.
Yes __ No __	Living allowances are not paid on an hourly basis? They may be calculated using service hours and program length to derive a weekly or biweekly distribution amount. Divide the distribution in equal increments that are not based on the specified number of hours served.
Yes __ No __	Is FICA calculated correctly? You must pay FICA for any member receiving a living allowance. Unless exempted by the IRS, calculate FICA at 7.65% of the total amount of the living allowance.
Yes __ No __	Is the Worker's Compensation calculation correct? Some states require worker's compensation for AmeriCorps members. Check with your local State Department of Labor or State Commission to determine whether or not you are required to pay worker's compensation and at what level (i.e., rate). If you are not required to pay worker's compensation, you need to provide similar coverage for members' on-the-job injuries through their own existing coverage or a new policy purchased in accordance with normal procedures (i.e., Death and Dismemberment coverage).
Yes __ No __	Health care is provided for full-time AmeriCorps members only (unless part-time serving in a full-time capacity)? If your project chooses to provide health care to other half-time members, you may not use federal funds to help pay for any portion of the cost. Projects must provide health care coverage to all full-time members who do not have adequate health care coverage at the time of enrollment or who lose coverage due to participation in the project. In addition, projects must provide coverage if a full-time member loses coverage during the term of service through no deliberate act of his/her own.

In Compliance?	Section III. Administrative/Indirect Costs
Yes __ No __	Applicant has chosen Option A – Corporation fixed percentage method and the maximum federal share of administrative costs does not exceed 5% of the total federal funds budgeted? To determine the federal administrative share, multiply all other budgeted federal funds by .0526.
Yes __ No __	Applicant has chosen Option A – Corporation fixed percentage method and the maximum grantee share is at 10% or less of total budgeted funds?
Yes __ No __	Applicant has chosen Option B – federally approved indirect cost rate method and documentation on file? Administrative costs budgeted include the following: (1) indirect costs such as legal staff, central management and support functions; (2) costs for financial, accounting, audit, internal evaluations, and contracting functions; (3) costs for insurance that protects the entity that operates the project; and (4) the portion of the salaries and benefits of the director and any other project administrative staff not attributable to the time spent in direct support of a specific project.
Yes __ No __	Applicant has chosen Option B – The maximum grantee share is at 10% or less of total budgeted funds, less the 5% CNCS share?

In Compliance?	Match
Yes __ No __	Is the overall match being met at the required level, based on the year of funding?
Yes __ No __	For all matching funds, the source(s) [private, state and local, and federal], the type of contribution (cash or in-kind), and the amount (or an estimate) of match, are clearly identified in the narrative?

ATTACHMENT I: SURVEY ON ENSURING EQUAL OPPORTUNITY FOR APPLICANTS

OMB NO. 1894-0010 EXP 5/31/2009

Purpose: The Federal government is committed to ensuring that all qualified applicants, small or large, non-religious or faith-based, have an equal opportunity to compete for Federal funding. In order for us to better understand the population of applicants for Federal funds, we are asking nonprofit private organizations (not including private universities) to fill out this survey.

Upon receipt, the survey will be separated from the application. Information provided on the survey will not be considered in any way in making funding decisions and will not be included in the Federal grants database. While your help in this data collection process is greatly appreciated, completion of this survey is voluntary.

Instructions for Submitting the Survey: If you are applying using a hard copy application, please place the completed survey in an envelope labeled "Applicant Survey." Seal the envelope and include it along with your application package. If you are applying electronically, please submit this survey along with your application.

Applicant's (Organization) Name:

_____

Applicant's DUNS Number:

_____

Federal Program: _____ **CFDA Number:** _____

1. Has the applicant ever received a grant or contract from the Federal government?

☐ Yes ☐ No

2. Is the applicant a faith-based organization?

☐ Yes ☐ No

3. Is the applicant secular organization?

☐ Yes ☐ No

4. Does the applicant have 501(c)(3) status?

☐ Yes ☐ No

5. Is the applicant a local affiliate of a national organization?

☐ Yes ☐ No

6. How many full-time equivalent employees does the applicant have? *(Check only one box).*

☐ 3 or Fewer ☐ 15-50
☐ 4-5 ☐ 51-100
☐ 6-14 ☐ over 100

7. What is the size of the applicant's annual budget?

(Check only one box.)

☐ Less Than $150,000
☐ $150,000 - $299,999
☐ $300,000 - $499,999
☐ $500,000 - $999,999
☐ $1,000,000 - $4,999,999
☐ $5,000,000 or more

Survey Instructions on Ensuring Equal Opportunity for Applicant

Provide the applicant's (organization) name and DUNS number and the grant name and CFDA number.

1. Self-explanatory.

2. Self-identify.

3. Self-identify.

4. 501(c)(3) status is a legal designation provided on application to the Internal Revenue Service by eligible organizations. Some grant programs may require nonprofit applicants to have 501(c)(3) status. Other grant programs do not.

5. Self-explanatory.

6. For example, two part-time employees who each work half-time equal one full-time equivalent employee. If the applicant is a local affiliate of a national organization, the responses to survey questions 2 and 3 should reflect the staff and budget size of the local affiliate.

7. Annual budget means the amount of money your organization spends each year on all of its activities.

Paperwork Burden Statement
According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is **1894-0010**. The time required to complete this information collection is estimated to average five (5) minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. **If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to:** *Amy Borgstrom*, Corporation for National and Community Service, 1201 New York Avenue, NW, Washington, D.C. 20525.

ATTACHMENT J: Beale Codes and County-Level Economic Data

Rural Community

Beale codes are published by the U.S. Department of Agriculture and are used to classify counties as being more urban or more rural. Counties are designated on a scale from one to nine according to the following descriptions:

2003 Beale Codes		
Code#	**Metropolitan Type**	**Description**
1	Metropolitan	Counties in metro areas of 1 million population or more
2	Metropolitan	Counties in metro areas of 250,000 to 1 million
3	Metropolitan	Counties in metro areas of fewer than 250,000
4	Non-metro	Urban population of 20,000 or more, adjacent to a metropolitan area
5	Non-metro	Urban population of 20,000 or more, not adjacent to a metropolitan area
6	Non-metro	Urban population of 2,500 to 19,999, adjacent to a metropolitan area
7	Non-metro	Urban population of 2,500 to 19,999, not adjacent to a metropolitan area
8	Non-metro	Completely rural or less than 2,500 urban population, adjacent to a metropolitan area
9	Non-metro	Completely rural or less than 2,500 urban population, not adjacent to a metropolitan area

Any program located in a county with a Beale code of 6, 7, 8, or 9 is eligible *to apply* for the alternative match.

Severely Economically Distressed Community

The following table provides the website addresses where the publicly available information on county-level economic data including per capita income, poverty rate, and unemployment levels can be found.

WEBSITE ADDRESS	EXPLANATION
www.econdata.net	**Econdata.Net**: This site Links to a variety of social and economic data by states, counties and metro areas.
http://www.bea.gov/regional/	**Bureau of Economic Analysis' Regional Economic Information System (REIS):** Provides data on per capita income by county for all states except Puerto Rico.
www.census.gov/hhes/www/saipe/index.html	**Census Bureau's Small Area Poverty Estimates**: Provides data on poverty and population estimates by county for all states except Puerto Rico.
www.census.gov/main/www/cen2000.html	**Census Bureau's American Fact-finder**: Provides all 1990 and 2000 census data including estimates on poverty, per capita income and unemployment by counties, states, and metro areas including Puerto Rico.
www.bls.gov/lau/home.htm	**Bureau of Labor Statistics' Local Area Unemployment Statistics (LAUS):** Provides data on annual and monthly employment and unemployment by counties for all states including Puerto Rico.
http://www.ers.usda.gov/Data/RuralUrbanContinuumCodes/	**US Department of Agriculture's Rural-Urban Continuum Codes (Beale codes):** Provides urban rural code for all counties in US.
www.census.gov/hhes/www/saipe/index.html	**Census Bureau's Small Area Poverty Estimates: Provides data on poverty and population estimates by county for all states except Puerto Rico.**

WEBSITE ADDRESS	EXPLANATION
www.census.gov/main/www/cen2000.html	**Census Bureau's American Fact-finder: Provides all 1990 and 2000 census data including estimates on poverty, per capita income and unemployment by counties, states, and metro areas including Puerto Rico.**
www.bls.gov/lau/home.htm	**Bureau of Labor Statistics' Local Area Unemployment Statistics (LAUS): Provides data on annual and monthly employment and unemployment by counties for all states including Puerto Rico.**
http://www.ers.usda.gov/Data/RuralUrbanContinuumCodes/	**US Department of Agriculture's Rural-Urban Continuum Codes (Beale codes): Provides urban rural code for all counties in US.**