

## **FY 2012 Indian Health Service Competitive Application Instructions**

**Program Title:** [Healthy Lifestyles in Youth Project](#)

**Application Due Date:** [August 16, 2012](#)

**Catalog of Federal Domestic Assistance (CFDA):** [93.933](#)

**Funding Opportunity Number:** [HHS-2012-IHS-HLY-0001](#)

You can search on [www.Grants.gov](http://www.Grants.gov) under *FIND* using either the Funding Opportunity Number or the CFDA number. There are also more advanced search functions available, which are explained on the Grants.gov Web site.

### **Applicant Organization Certification and Acceptance:**

In signing the face page of the application or having the E-POC and/or AOR submit the application electronically, the duly authorized representative of the applicant institution certifies that the applicant organization will comply with all applicable assurances and certifications.

Each application, whether hardcopy or electronic, that is submitted to the IHS requires that the following assurances and certifications be verified by the signature of the Official signing for the applicant organization. Definitions are provided in the HHS Grants Policy Statement, Rev. January 2007 for all certifications and assurances.

Civil Rights – n/a for IHS  
Lobbying  
Non-Delinquency on Federal Debt  
Handicapped Individuals  
Sex Discrimination  
Age Discrimination  
Environmental Impact – NEPA  
Flood Insurance  
Historic Preservation Act

The individual that signs and/or submits an application electronically or in hardcopy further certifies that the applicant organization will be accountable both for the appropriate use of all grant funds awarded and for the performance of the grant-supported project or activities.

### **Historical Preservation Requirements:**

By signing the face page of the application, whether hardcopy or electronic, the applicant certifies that DGM will be notified immediately at: (301) 443-5204 of any property listed

or eligible for listing on the National Register of Historic Places that will be affected by the IHS grant award.

Under Section 106 National Historic Preservation Act (16 U.S.C. 470 et seq.), IHS must consider the effect on historic properties prior to making a funding decision. Historic properties include any district, site, building, structure, or object that is listed on, or is eligible for listing on, the National Register of Historic Places as outlined in National Register (see below).

**National Register Information System (NRIS)**

<http://www.cr.nps.gov/nr/research/index.htm> is a database that contains information on places listed in or determined eligible for the National Register of Historic Places.

Please contact the Grants Policy Staff at (301) 443-5204 for policy-related information regarding the requirements for historic preservation.

**Equal Treatment for Faith Based Organizations:**

In accordance with 45 Code of Federal Regulations, Part 87; Section 87.1, religious organizations are eligible, on the same basis as any other organization, to participate in any Department of Health of Human Services grant program for which they are otherwise eligible.

**Eligibility:**

Please refer to the original funding opportunity announcement to confirm eligibility criteria located on the IHS Grants Policy website at:

[http://www.ihs.gov/NonMedicalPrograms/gogp/index.cfm?module=gogp\\_funding](http://www.ihs.gov/NonMedicalPrograms/gogp/index.cfm?module=gogp_funding).

Non-profit organizations must demonstrate proof of non-profit status before the award date. We strongly encourage each organization to attach proof of your non-profit status with your electronic application. For electronic application “proof of non-profit status” and any other required documentation may be scanned and attached as an “Other Attachment.” Proof of non-profit status is stated in the full announcement.

**Content and Form of Application Submission:**

Please be aware that the forms and documents listed here may not constitute a complete application package. The Grants.gov application package contains the forms required by IHS for all grants applications. The official Funding Opportunity Announcement describes any additional documentation required to submit a complete application package.

Applications must contain a project narrative and detailed line item budget and budget justification and narrative. All applications, whether submitted in hard copy or electronic, must adhere to the content form of application submission as outlined below:

#### Narrative

- Be single spaced.
- Be typed written.
- Use black type not smaller than 12 characters per one inch (tables may be done in 10 pt. character fonts).
- Have consecutively numbered pages.
- Standard forms, table of contents, budget and budget justifications, Tribal resolutions, letters of support and/or other appendix items are generally not part of the narrative
- Not be tabbed, glued, or placed in a plastic holder.
- Should include: 1) Introduction and Need for Assistance, 2) Project Objectives, Approach, Results and Benefits, 3) Project Evaluation, and 4) Organizational Capabilities and Qualifications.
- Have a one inch margin
- Be printed on one side only of standard size 8 ½” x 11” paper.

**Public Policy Requirements:** All Federal-wide public policies apply to IHS grants with exception of the Lobbying and Discrimination policy.

#### **Other Required Documentation:**

All applicants that request indirect costs will be required to have a current negotiated rate on file with the appropriate Federal cognizant agency with either the Department of Health and Human Services (HHS), Division of Cost Allocation (DCA) or Department of Interior.

Grants Policy does not recognize the Pilot Contract Support Cost (CSC) rate for our grant programs; hence, a current rate must be present at the time of award or costs associated with indirect costs will be restricted until the Division of Grants Management receives a current negotiated rate agreement.

For full details on documents required to submit a complete application, please see the full Funding Opportunity Announcement linked at Grants.gov in the Synopsis section, or on the IHS Division of Grants Management Web site at [http://www.ihs.gov/NonMedicalPrograms/gogp/index.cfm?module=gogp\\_funding](http://www.ihs.gov/NonMedicalPrograms/gogp/index.cfm?module=gogp_funding).

#### **Submission Dates and Times:**

##### **Electronic Submission:**

The required method for receipt of applications is electronic submission through Grants.gov. If any technical concerns arise please contact Grants.gov Customer Support

at 1-800-518-4726 or [support@grants.gov](mailto:support@grants.gov). The support center's hours of operations are 24 hours a day, 7 days a week. The support center is closed on all Federal holidays. When you contact the customer service center, please obtain a Grants.gov case number that will assist the DGM in tracking the status of your application. If technical challenges or concerns continue, please contact Paul Gettys at (301) 443-5204 or send an email to [Paul.Gettys@ihs.gov](mailto:Paul.Gettys@ihs.gov).

All waiver requests must be submitted to the DGM and approved prior to submitting a hard copy application. The waiver must clearly outline a justification for the need to submit an application outside of the standard Grants.gov electronic process. Please submit your waiver request to: [GrantsPolicy@ihs.gov](mailto:GrantsPolicy@ihs.gov) with a carbon copy to [Tammy.Bagley@ihs.gov](mailto:Tammy.Bagley@ihs.gov) or call (301) 443-5204. Please make sure that your subject line clearly states: "Request for Waiver from [*insert grantee organization's name*]." The waiver request must include the Grants.gov case number, the funding opportunity number you are applying to, the name of your organization, the name and number of a contact person in your organization, the issue encountered when attempting to process your submission electronically in Grants.gov, and steps taken to resolve the issue.

Please note: Granting waivers from the electronic application requirement is different from obtaining an extension to submit your application to the DGM.

In order to submit electronic applications please adhere to the following:

- Register with CCR. The organization must have DUNS number prior to registering with CCR. If a DUNS number is needed please contact 1-866-705-5711 or request it online via <http://www.dnb.com/ccr/register.html>
- Registration with CCR requires the organization to contact 1-866-606-8220 or via online at <https://www.bpn.gov/ccrupdate/NewRegistration.aspx>. There are two important fields within the CCR; they are E-Biz Point of Contact (E-POC) and M-PIN.
- Register with Grants.gov which is a separate process from the registration process that is described above. In order to register with Grants.gov, the applicant must have registered with CCR and have a username and password and DUNS number information. The DUNS number should match the one that was used to register in CCR. If they differ, this will prohibit the applicant from successfully registering in Grants.gov. Once the applicant has successfully registered in Grants.gov they will be issued a username and password from Grants.gov. This information is separate and distinct from what was received during the CCR registration process. Please hold on to both sets of usernames and passwords. Registration in Grants.gov can be done in approximately 7 business days. Please begin the registration process early. For assistance, contact Grants.gov directly at 1-800-518-4726.
- Applicants can have only "one" E-POC and several Authorized Organizational Representatives (AORs). The E-POC can serve in dual roles as an E-POC and an AOR. The E-POC must authorize each AOR in order for them to officially submit the electronic application on behalf of the organization.

- IHS, Grants.gov, nor CCR can provide input on how the organization is set up. Please use the governing body within your organization to make sure that the appropriate officials are designated to submit the application to the IHS via Grants.gov.
- The E-POC can log into Grants.gov and authorize the organizational representative(s). All log-ins consist of the organization's M-PIN (which is received during the CCR registration process) and the DUNS number.
- Your electronic application must comply with any page limitations that are described within the Program Announcement.
- Please use the attachment feature in Grants.gov to attach additional documentation that may be required by IHS.
- The organization should search for the application package and accompanying instructions by using the CFDA number in Grants.gov using the "Find" link.
- After the application is submitted the applicant will receive a grants.gov tracking number via email.
- Successful submissions will receive electronic verification and an assigned tracking number from Grants.gov.
- Unsuccessful submissions will be sent an error notification message. If the submitter does not receive either a verification of submission email or an error notification email, please contact the Grants.gov Support Center directly at 1-800-518-4726 or email [support@grants.gov](mailto:support@grants.gov). You may track your application package by using the following link if Grants.gov has provided you with a "Valid" tracking number: [http://www.grants.gov/applicants/track\\_your\\_application.jsp](http://www.grants.gov/applicants/track_your_application.jsp). The Support Center is available for service 24 hours a day, 7 days a week. The Support Center is closed on Federal holidays.
- E-mail applications *will not be accepted* by IHS under this announcement.

**Paper Applications (only allowed under approved waivers):**

All grantees must obtain prior approval to submit a paper application. Please use the following link to obtain the necessary forms for paper submissions or visit the Grants Policy Website at:

[http://www.ihs.gov/NonMedicalPrograms/gogp/index.cfm?module=gogp\\_forms](http://www.ihs.gov/NonMedicalPrograms/gogp/index.cfm?module=gogp_forms), or the Grants.gov Website at: <http://www.grants.gov>  
[Forms](#)

- [SF-424 Application for Federal Assistance](#) [PDF]
- [SF-424A Budget Information – Non-construction Programs](#) [PDF]
- [PHS 5161 Form](#) [PDF]; Certification forms (see pages 17-19 of the PHS 5161) checklist pages (see pages 25-26)
- [SF-424B Non-construction Programs](#) [PDF]
- [Disclosure of Lobbying Activities Form](#) [PDF]
- [Certification Regarding Lobbying](#)
- [Debarment Certification \(Primary\)](#)
- [Debarment Certification \(Lower Tier\)](#)
- [Drug-free Certification](#)

- [Environmental Tobacco Smoke](#)
- [Maintenance of Effort Certification](#)
- Key Contact Form

#### Hardcopy Application Submission Instructions

Complete mailing instructions will be included with the waiver approval email message.

Applicants are reminded to include a copy of your approved waiver request along with your application package. Your submission must reach DGM on or before 5 p.m. EST on the due date of [August 16, 2012](#).

For paper application an original plus one copy must be submitted. The original application must be single sided, with required signatures on the face page of the application. Do not staple or otherwise bind the original application. The format should be consistent with what is referenced for electronic applications.

The entire application package is available at <http://www.grants.gov>.

#### **Helpful Reminders for New Applicants:**

##### *Central Contractor Registry (CCR) Reminder*

All applicants must renew their CCR registration **annually**. If you are not sure of your status of your CCR registration or who your EPOC is, please search on the CCR database by going to <http://www.bpn.gov/CCRSearch/search.aspx>.

##### *Important Grants.gov Reminder*

Please be reminded (as outlined at the beginning of the instructions) that you must access the application package by going to **Grants.gov “Find.”** You will not be able to access the application package if you use Grants.gov “Apply Link”.

#### **Attachments in Grants.gov:**

All other attachments (appendix documentation, Tribal resolutions, etc) should be attached to the Grants.gov file.

#### **Terms of Award:**

All IHS grant awards are subject to the HHS Grants Policy Statement (HHS GPS), 01/07 unless otherwise noted in the Notice of Award (NoA). Please refer to the Notice of Award to obtain details regarding specific terms and conditions that pertain to your organization.

Debarment and Suspension as well as Drug Free Workplace are now standard terms and conditions of the award. These requirements no longer require separate certifications; however, by signing the application (either electronic signature credentials or face page

of the SF-424A) the applicant certifies they are meeting the requirements of 45 CFR Part 76 (Debarment and Suspension) and 45 CFR Part 82 (Drug-Free Workplace).

All other administrative requirements are cited in the Program Announcement, Notice of Award or the HHS Grants Policy Statement, Rev. 01/07 under Administrative Requirements. The administrative requirements that are found in the HHS Grants Policy Statement are standard terms of award.

**List of Contact Information:**

- **Grants Management Specialist: 301-443-5204; Andrew Diggs**
  - General questions regarding the administrative requirements for completing applications should be referred to the GMS.
- **Program Official: 505-248-4182; Lorraine Valdez**
- **General Grants Policy-related Inquiries: [Grants.Policy@ihs.gov](mailto:Grants.Policy@ihs.gov)**
- **Grants.gov Help Desk Contact Center: 1-800-518-4726**
- **Grants.gov IHS Liaison: 301-443-5204; Mr. Paul Gettys**
- **Central Contractor Registry-related Inquiries: 1-866-606-8220**
- **Waiver from Grants.gov Submission: [Grants.Policy@ihs.gov](mailto:Grants.Policy@ihs.gov) Attn. Tammy Bagley**
- **Extension for additional time to submit continuation application: 301-443-5204; Andrew Diggs**

**Disabled Persons:**

This PA provides a TDD or TTY number so that information under this announcement is available to disabled persons. The TTY number is: 301-443-6394.

**CCR and Grants.gov Organization Registration Checklist:**

For Special Diabetes Program for Indian grant recipients, please check the following website for specific additional instructions that may be applicable to SDPI Program only (competitive and noncompetitive). Link:

<http://www.ihs.gov/MedicalPrograms/Diabetes/index.asp>

**Grants.gov Security Login Changes:**

On March 31, 2010 Grants.gov implemented new security enhancement logon procedures for all non-certificate S2S accounts. This pertains to **all IHS grantee Grants.gov accounts**. The new procedures are as follows:

**Password complexity rules for all non-certificate S2S accounts**

When an applicant (AOR/Individual), E-Biz POC, and/or a grantor, create or change a password in the Grants.gov system, the new password requirements will be enforced.

The requirements include:

- Must be alphanumeric
- Contain on (1) uppercase
- Contain one (1) lower case letter

- Contain at least eight (8) characters
- Cannot be the same as the previous three (3) passwords

### **90-day password expiration policy for all Non-certificate (S2S) Accounts**

A (90) day password expiration policy for all non-certificate (S2S) accounts will be implemented. That is if the password is changed today, it is considered as day one. This password will be valid for 90 calendar days and will not be valid on 91<sup>st</sup> day onward.

- Applicants will not be able to submit their applications if the password is expired. They will be able to change their password and resubmit immediately,
- All users who have a username and password will not be able to login using the browser. All users will be able to change their password and login immediately.

### **Account Lock-out Procedure**

After three (3) consecutive failures over a period of five (5) minutes to enter a correct password the account shall be locked for (15) minutes.

- Applicants will not be able to submit their applications during the lockout period. Applicants can change their password and resubmit immediately
- All users who have a username and password will not be able to login using the browser. All users will be able to change their password and login immediately

### **Changes to User Profile maintenance interface to tighten security controls**

#### **GRANTOR SUPER USERS**

Grantor with 'Manage Agencies' role will have read-only view to the profiles of other grantors in the same agency and sub agencies. The following fields will be displayed on this screen:

- First Name
- MI
- Last Name
- Job Title
- Agency Code
- Telephone
- Email
- Username

Password, Secret Question and Secret Answer fields will not be available on this page when a Grantor with 'Manage Agencies' role, can view other grantor's profiles.

#### **APPLICANT USERS**

For applicant users, the following fields will be non-editable on the user profile maintenance page:

- Username
- DUNS

## GRANTOR USERS

For grantor users, the following fields will be non-editable on the user profile maintenance page:

- Username
- Agency Enrollment code

## BOTH APPLICANT and GRANTOR

The following fields are editable on user profile maintenance pages:

- First Name
- MI
- Last Name
- Job Title
- Telephone
- Email
- Secret Question
- Secret Answer

### **Change Password Option**

Implement the change password option for grantor, E-Biz POC and applicant users. The change password request will challenge the requester by requiring entry and validation of current password.

The change password option will be provided on the login pages and within the applicant and grantor center, and E-Biz POC page.

### **Enhance Forgot Password**

For users, on 'Forgot My Password/Unlock My Account' page, a second option for the user will be available if the user forgets their security answer. The second option will allow the user to request the system to generate a one-time use password and automatically send the user an email with the temporary password. The system will use the email address found in the user's profile.

## Organization Registration Checklist

The following checklist provides registration guidance for a company, academic or research institution, state, local or tribal government, not-for-profit, or other type of organization. The registration is a **one-time** process, which is **required** before representatives of an organization can submit grant application packages electronically through Grants.gov. The registration process can take **three to five business days or up to four weeks**, depending on your organization and if all steps are met in a timely manner.

**Note:** If you are an individual applying for a grant on your own behalf and not on behalf of a company, academic or research institution, state, local or tribal government, not-for-profit, or other type of organization, refer to the **Individual Registration:** [http://www.grants.gov/applicants/individual\\_registration.jsp](http://www.grants.gov/applicants/individual_registration.jsp). If you apply as an individual to a grant application package designated for organizations, your application will be rejected.

Grants.gov Registration Checklist	What is the purpose of this step?	How long should it take?	Completed?
<p><b>1. Obtain DUNS Number</b></p> <p><b>Has my organization identified its Data Universal Number System (DUNS) number?</b></p> <p>Ask the grant administrator, chief financial officer, or authorizing official of your organization to identify your DUNS number.</p> <p>If your organization does not know its DUNS Number or needs to register for one, visit Dun &amp; Bradstreet at <a href="http://fedgov.dnb.com/webform/displayHomePage.do">http://fedgov.dnb.com/webform/displayHomePage.do</a>.</p>	<p>The Federal government has adopted the use of DUNS numbers to track how federal grant money is allocated.</p> <p>DUNS Numbers identify your organization.</p>	<p>Same Day</p> <p>You will receive DUNS Number information online.</p>	<input type="checkbox"/>
<p><b>2. Register with CCR</b></p> <p><b>Has my organization registered with the Central Contractor Registration (CCR)?</b></p> <p>Ask the grant administrator, chief financial officer, or authorizing official of your organization if your organization has registered with the CCR.</p>	<p>Registering with the CCR is required for organizations to use Grants.gov.</p>	<p>If your organization already has an Employment Identification Number (EIN) or Taxpayer Identification Number (TIN), then</p>	<input type="checkbox"/>

Grants.gov Registration Checklist	What is the purpose of this step?	How long should it take?	Completed?
<p>If your organization is not registered, you can apply by going to <a href="http://www.ccr.gov">http://www.ccr.gov</a>. CCR has developed a handbook (<a href="https://www.bpn.gov/ccr/doc/UserAccount.pdf">https://www.bpn.gov/ccr/doc/UserAccount.pdf</a>) to help you with the process.</p> <p>If AFTER having registered in CCR, you experience any registration problems, you can get help by going to Federal Service Desk <a href="https://www.fsd.gov">https://www.fsd.gov</a>.</p> <p>When your organization registers with the CCR, you must designate an E-Business Point of Contact (E-Biz POC). This person will identify a special password called an “MPIN”.</p> <p>This MPIN gives the E-Biz POC authority to designate which staff member(s) from your organization are allowed to submit applications electronically through Grants.gov. Staff members from your organization designated to submit applications are called Authorized Organization Representatives (AORs).</p> <p>If your E-Business POC has forgotten the MPIN password, call 1-866-606-8220. The E-Biz Point of Contact will need to know the MPIN within the CCR Profile in order to login to Grants.gov.</p> <p><b>*Note:</b> Your organization needs to renew their CCR registration once a year. <i>You will not be able to move on to Step 3 until this step is completed. This step may take up to <b>five business days</b>.</i></p>		<p>you should allow 1-3 business days to complete the entire CCR registration. The EIN and TIN will come from the Internal Revenue Service (IRS).</p> <p>If your organization does not have an EIN or TIN, then you should allow two weeks for obtaining the information from the IRS when requesting the EIN or TIN via phone or Internet. The additional number of days is needed as a result of security information that needs to be mailed to the organization.</p>	

Grants.gov Registration Checklist	What is the purpose of this step?	How long should it take?	Completed?
<p><b>3. Username and Password</b></p> <p><b>Have the AORs who officially submit applications on behalf of your organization completed their profile with Grants.gov to create their username and password?</b></p> <p>To create a username and password, AORs must complete their profile (<a href="https://apply07.grants.gov/apply/OrcRegister">https://apply07.grants.gov/apply/OrcRegister</a>) on Grants.gov. AORs will need to know the DUNS number of the organization for which they will be submitting applications to complete the process.</p> <p>After your organization registers with the CCR, AORs must wait one business day before they can complete a profile and create their usernames and passwords on Grants.gov.</p>	<p>An AOR username and password serves as an “electronic signature” when submitting a Grants.gov application.</p>	<p>Same day. After the AOR has completed their profile they will be prompted to create a username and password that will allow the user to log in and check their approval status immediately.</p>	<p><input type="checkbox"/></p>
<p><b>4. AOR Authorization</b></p> <p><b>Has the E-Business Point of Contact (E-Biz POC) approved AORs to submit applications on behalf of the organization?</b></p> <p>When an AOR registers with Grants.gov to submit applications on behalf of an organization, that organization’s E-Biz POC will receive an email notification. The email the AOR submitted in the profile will be the email used when sending the automatic notification from Grants.gov to the E-Biz POC with the AOR copied on the correspondence.</p> <p>The E-Biz POC must then <a href="#">log in</a> to Grants.gov (using the organization’s DUNS number for the username and the “MPIN” password obtained in Step 2) and approve the AOR, thereby giving him or her permission to submit applications.</p>	<p>Only the E-BIZ POC can approve AORs. This allows the organization to authorize specific staff members or consultants/grant writers to submit grants. Only those who have been authorized by the E-Biz POC can submit applications on behalf of the organization.</p>	<p>This depends on how long it takes the E-Biz POC to log in and approve the AOR, once the approval is completed the AOR can immediately submit an application.</p>	<p><input type="checkbox"/></p>

Grants.gov Registration Checklist	What is the purpose of this step?	How long should it take?	Completed?
When an E-Biz POC approves an AOR, Grants.gov will send the AOR a confirmation email.			
<p><b>5. Track AOR status</b></p> <p>AORs can also <a href="#">log in</a> to track their AOR status using their username and password (obtained in Step 3) to check if they have been approved by the E-Biz POC.</p>	To verify that the organization's E-Biz POC has approved the AOR.	Logging in as an applicant is instantaneous, the approval process to become an AOR depends on how long it takes the E-Biz POC to log in and approve the AOR.	<input type="checkbox"/>

**INSTRUCTIONS FOR THE SF-424**

Public reporting burden for this collection of information is estimated to average 60 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503.

**PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.**

This is a standard form (including the continuation sheet) required for use as a cover sheet for submission of preapplications and applications and related information under discretionary programs. Some of the items are required and some are optional at the discretion of the applicant or the Federal agency (agency). Required items are identified with an asterisk on the form and are specified in the instructions below. In addition to the instructions provided below, applicants must consult agency instructions to determine specific requirements.

Item	Entry:	Item	Entry:
1.	<b>Type of Submission:</b> (Required): Select one type of submission in accordance with agency instructions. <ul style="list-style-type: none"> <li>• Preapplication</li> <li>• Application</li> <li>• Changed/Corrected Application – If requested by the agency, check if this submission is to change or correct a previously submitted application. Unless requested by the agency, applicants may not use this to submit changes after the closing date.</li> </ul>	10.	<b>Name Of Federal Agency:</b> (Required) Enter the name of the Federal agency from which assistance is being requested with this application.
		11.	<b>Catalog Of Federal Domestic Assistance Number/Title:</b> Enter the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested, as found in the program announcement, if applicable.
2.	<b>Type of Application:</b> (Required) Select one type of application in accordance with agency instructions. <ul style="list-style-type: none"> <li>• New – An application that is being submitted to an agency for the first time.</li> <li>• Continuation - An extension for an additional funding/budget period for a project with a projected completion date. This can include renewals.</li> <li>• Revision - Any change in the Federal Government's financial obligation or contingent liability from an existing obligation. If a revision, enter the appropriate letter(s). More than one may be selected. If "Other" is selected, please specify in text box provided. <ul style="list-style-type: none"> <li>A. Increase Award                      B. Decrease Award</li> <li>C. Increase Duration                      D. Decrease Duration</li> <li>E. Other (specify)</li> </ul> </li> </ul>	12.	<b>Funding Opportunity Number/Title:</b> (Required) Enter the Funding Opportunity Number and title of the opportunity under which assistance is requested, as found in the program announcement.
		13.	<b>Competition Identification Number/Title:</b> Enter the Competition Identification Number and title of the competition under which assistance is requested, if applicable.
		14.	<b>Areas Affected By Project:</b> List the areas or entities using the categories (e.g., cities, counties, states, etc.) specified in agency instructions. Use the continuation sheet to enter additional areas, if needed.
3.	<b>Date Received:</b> Leave this field blank. This date will be assigned by the Federal agency.	15.	<b>Descriptive Title of Applicant's Project:</b> (Required) Enter a brief descriptive title of the project. If appropriate, attach a map showing project location (e.g., construction or real property projects). For preapplications, attach a summary description of the project.
4.	<b>Applicant Identifier:</b> Enter the entity identifier assigned by the Federal agency, if any, or the applicant's control number if applicable.		
5a.	<b>Federal Entity Identifier:</b> Enter the number assigned to your organization by the Federal Agency, if any.	16.	<b>Congressional Districts Of:</b> (Required) 16a. Enter the applicant's Congressional District, and 16b. Enter all District(s) affected by the program or project. Enter in the format: 2 characters State Abbreviation – 3 characters District Number, e.g., CA-005 for California 5 <sup>th</sup> district, CA-012 for California 12 <sup>th</sup> district, NC-103 for North Carolina's 103 <sup>rd</sup> district. • If all congressional districts in a state are affected, enter "all" for the district number, e.g., MD-all for all congressional districts in Maryland. • If nationwide, i.e. all districts within all states are affected, enter US-all. • If the program/project is outside the US, enter 00-000.
5b.	<b>Federal Award Identifier:</b> For new applications leave blank. For a continuation or revision to an existing award, enter the previously assigned Federal award identifier number. If a changed/corrected application, enter the Federal Identifier in accordance with agency instructions.		
6.	<b>Date Received by State:</b> Leave this field blank. This date will be assigned by the State, if applicable.		
7.	<b>State Application Identifier:</b> Leave this field blank. This identifier will be assigned by the State, if applicable.		
8.	<b>Applicant Information:</b> Enter the following in accordance with agency instructions:	17.	<b>Proposed Project Start and End Dates:</b> (Required) Enter the proposed start date and end date of the project.
	<b>a. Legal Name:</b> (Required): Enter the legal name of applicant that will undertake the assistance activity. This is that the organization has registered with the Central Contractor Registry. Information on registering with CCR may be obtained by visiting the Grants.gov website.		
	<b>b. Employer/Taxpayer Number (EIN/TIN):</b> (Required): Enter the Employer or Taxpayer Identification Number (EIN or TIN) as assigned by the Internal Revenue Service. If your organization is not in the US, enter 44-4444444.	18.	<b>Estimated Funding:</b> (Required) Enter the amount requested or to be contributed during the first funding/budget period by each contributor. Value of in-kind contributions should be included on appropriate lines, as applicable. If the action will result in a dollar change to an existing award, indicate only the amount of the change. For decreases, enclose the amounts in parentheses.

	<p><b>c. Organizational DUNS:</b> (Required) Enter the organization's DUNS or DUNS+4 number received from Dun and Bradstreet. Information on obtaining a DUNS number may be obtained by visiting the Grants.gov website.</p>	19.	<p><b>Is Application Subject to Review by State Under Executive Order 12372 Process?</b> Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State intergovernmental review process. Select the appropriate box. If "a." is selected, enter the date the application was submitted to the State.</p>																								
	<p><b>d. Address:</b> Enter the complete address as follows: Street address (Line 1 required), City (Required), County, State (Required, if country is US), Province, Country (Required), Zip/Postal Code (Required, if country is US).</p>	20.	<p><b>Is the Applicant Delinquent on any Federal Debt?</b> (Required) Select 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 disallowances, loans and taxes. If yes, include an explanation on the continuation sheet.</p>																								
	<p><b>e. Organizational Unit:</b> Enter the name of the primary organizational unit (and department or division, (if applicable) that will undertake the assistance activity, if applicable.</p> <p><b>f. Name and contact information of person to be contacted on matters involving this applicant</b> (required), organizational affiliation (if affiliated with an organization other than the applicant organization), telephone number (Required), fax number, and email address (Required) of the person to contact on matters related to this application.</p>	21.	<p><b>Authorized Representative:</b> (Required) To be signed and dated by the authorized representative of the applicant organization. Enter the name (First and last name required) title (Required), telephone number (Required), fax number, and email address (Required) of the person authorized to sign for the applicant. A copy of the governing body's authorization for you to sign this application as the official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.)</p>																								
9.	<p>Type of Applicant: (Required) Select up to three applicant type(s) in accordance with agency instructions.</p> <table border="0" data-bbox="256 1129 899 1780"> <tr> <td>A. State Government</td> <td>M. Nonprofit</td> </tr> <tr> <td>B. County Government</td> <td>N. Nonprofit</td> </tr> <tr> <td>C. City or Township Government</td> <td>O. Private Institution of Higher Education</td> </tr> <tr> <td>D. Special District Government</td> <td>P. Individual</td> </tr> <tr> <td>E. Regional Organization</td> <td>Q. For-Profit Organization (Other than Small Business)</td> </tr> <tr> <td>F. U.S. Territory or Possession</td> <td>R. Small Business</td> </tr> <tr> <td>G. Independent School District</td> <td>S. Hispanic-serving Institution</td> </tr> <tr> <td>H. Public/State Controlled Institution of Higher Education</td> <td>T. Historically Black Colleges and Universities (HBCUs)</td> </tr> <tr> <td>I. Indian/Native American Tribal Government (Federally Recognized)</td> <td>U. Tribally Controlled Colleges and Universities (TCCUs)</td> </tr> <tr> <td>J. Indian/Native American Tribal Government (Other than Federally Recognized)</td> <td>V. Alaska Native and Native Hawaiian Serving Institutions</td> </tr> <tr> <td>K. Indian/Native American Tribally Designated Organization</td> <td>W. Non-domestic (non-US) Entity</td> </tr> <tr> <td>L. Public/Indian Housing Authority</td> <td>X. Other (specify)</td> </tr> </table>	A. State Government	M. Nonprofit	B. County Government	N. Nonprofit	C. City or Township Government	O. Private Institution of Higher Education	D. Special District Government	P. Individual	E. Regional Organization	Q. For-Profit Organization (Other than Small Business)	F. U.S. Territory or Possession	R. Small Business	G. Independent School District	S. Hispanic-serving Institution	H. Public/State Controlled Institution of Higher Education	T. Historically Black Colleges and Universities (HBCUs)	I. Indian/Native American Tribal Government (Federally Recognized)	U. Tribally Controlled Colleges and Universities (TCCUs)	J. Indian/Native American Tribal Government (Other than Federally Recognized)	V. Alaska Native and Native Hawaiian Serving Institutions	K. Indian/Native American Tribally Designated Organization	W. Non-domestic (non-US) Entity	L. Public/Indian Housing Authority	X. Other (specify)		
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## Instructions For Completing SF-424A Budget Information for Non-Construction Programs

Public reporting burden for this collection of information is estimated to average 180 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0044), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

### General Instructions

This form is designed so that application can be made for funds from one or more grant programs. In preparing the budget, adhere to any existing Federal grantor agency guidelines which prescribe how and whether budgeted amounts should be separately shown for different functions or activities within the program. For some programs, grantor agencies may require budgets to be separately shown by function or activity. For other programs, grantor agencies may require a breakdown by function or activity. Sections A, B, C, and D should include budget estimates for the whole project except when applying for assistance which requires Federal authorization in annual or other funding period increments. In the latter case, Sections A, B, C, and D should provide the budget for the first budget period (usually a year) and Section E should present the need for Federal assistance in the subsequent budget periods. All applications should contain a breakdown by the object class categories shown in Lines a-k of Section B.

### Section A. Budget Summary Lines 1-4 Columns (a) and (b)

For applications pertaining to a single Federal grant program (Federal Domestic Assistance Catalog number) and not requiring a functional or activity breakdown, enter on Line 1 under Column (a) the Catalog program title and the Catalog number in Column (b).

For applications pertaining to a single program requiring budget amounts by multiple functions or activities, enter the name of each activity or function on each line in Column (a), and enter the Catalog number in Column (b). For applications pertaining to multiple programs where none of the programs require a breakdown by function or activity, enter the Catalog program title on each line in Column (a) and the respective Catalog number on each line in Column (b).

For applications pertaining to multiple programs where one or more programs require a breakdown by function or activity, prepare a separate sheet for each program requiring the breakdown. Additional sheets should be used when one

form does not provide adequate space for all breakdown of data required. However, when more than one sheet is used, the first page should provide the summary totals by programs.

### Lines 1-4, Columns (c) through (g)

For new applications, leave Column (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year).

For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the Federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of amounts in Columns (e) and (f).

For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of Federal funds and enter in Column (f) the amount of the increase or decrease of non-Federal funds. In Column (g) enter the new total budgeted amount (Federal and non-Federal) which includes the total previous authorized budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (g) should not equal the sum of amounts in Columns (e) and (f).

**Line 5** - Show the totals for all columns used.

### Section B Budget Categories

In the column headings (1) through (4), enter the titles of the same programs, functions, and activities shown on Lines 1-4, Column (a), Section A. When additional sheets are prepared for Section A, provide similar column headings on each sheet. For each program, function or activity, fill in the

total requirements for funds (both Federal and non-Federal) by object class categories.

**Line 6a-i** - Show the totals of Lines 6a to 6h in each column.

**Line 6j** - Show the amount of indirect cost.

**Line 6k** -Enter the total of amounts on Lines 6i and 6j. For all applications for new grants and continuation grants the total amount in column (5), Line 6k, should be the same as the total amount shown in Section A, Column (g), Line 5. For supplemental grants and changes to grants, the total amount of the increase or decrease as shown in Columns (1)-(4), Line 6k should be the same as the sum of the amounts in Section A, Columns (e) and (f) on Line 5.

**Line 7** -Enter the estimated amount of income, if any, expected to be generated from this project. Do not add or subtract this amount from the total project amount. Show under the program narrative statement the nature and source of income. The estimated amount of program income may be considered by the Federal grantor agency in determining the total amount of the grant.

#### **Section C. Non-Federal Resources**

**Lines 8-11** Enter amounts of non-Federal resources that will be used on the grant. If in-kind contributions are included, provide a brief explanation on a separate sheet.

**Column (a)** -Enter the program titles identical to Column (a), Section A. A breakdown by function or activity is not necessary.

**Column (b)** -Enter the contribution to be made by the applicant.

**Column (c)** -Enter the amount of the State's cash and in-kind contribution if the applicant is not a State or State agency. Applicants which are a State or State agencies should leave this column blank.

**Column (d)** -Enter the amount of cash and in-kind contributions to be made from all other sources.

**Column (e)** - Enter totals of Columns (b), (c), and (d).

**Line 12** -Enter the total for each of Columns (b)-(e). The amount in Column (e) should be equal to the amount on Line 5, Column (f), Section A.

#### **Section D. Forecasted Cash Needs**

**Line 13** -Enter the amount of cash needed by quarter from the grantor agency during the first year.

**Line 14** -Enter the amount of cash from all other sources needed by quarter during the first year.

**Line 15** - Enter the totals of amounts on Lines 13 and 14.

#### **Section E. Budget Estimates of Federal Funds Needed for Balance of the Project**

**Lines 16-19** -Enter in Column (a) the same grant program titles shown in Column (a), Section A. A breakdown by function or activity is not necessary. For new applications and continuation grant applications, enter in the proper columns amounts of Federal funds which will be needed to complete the program or project over the succeeding funding periods (usually in years). This section need not be completed for revisions (amendments, changes, or supplements) to funds for the current year of existing grants.

If more than four lines are needed to list the program titles, submit additional schedules as necessary.

**Line 20** -Enter the total for each of the Columns (b)-(e). When additional schedules are prepared for this Section, annotate accordingly and show the overall totals on this line.

#### **Section F. Other Budget Information**

**Line 21** -Use this space to explain amounts for individual direct object class cost categories that may appear to be out of the ordinary or to explain the details as required by the Federal grantor agency.

**Line 22** -Enter the type of indirect rate (provisional, predetermined, final or fixed) that will be in effect during the funding period, the estimated amount of the base to which the rate is applied, and the total indirect expense.

**Line 23** -Provide any other explanations or comments deemed necessary.

## Track My Application

**In order to ensure that your application package was received properly by Grants.gov you should visit the: Track My Application Section.**

Soon after you submit your application package and receive the submission confirmation and receipt confirmation emails, along with your assigned Grants.gov tracking number you will be able to click on the link in the email confirmation and “Track My Application”. You or any member of your organization with the tracking number will be able to check the status of your application without logging into Grants.gov.

### **Email Notifications:**

- *Submission Confirmation Email (appears instantly)*
  - Application is currently being processed by Grants.gov
  - Contains a Tracking Number and Link to Track your Submission**
- *Submission Receipt Email (within 2 days)*
  - Application has entered the Grants.gov system and is ready for Validation
  - Contains a Tracking Number and Link to Track your Submission**

### **Error Notifications:**

If there is an error in your application submission, then you will be notified when you receive your Validation Receipt Email.

- *Submission Validation Receipt Email*
  - Email validating or rejecting the application package due to errors
  - Notification that the application is being prepared for IHS retrieval if no errors.

-If errors contact the Grants.gov help desk at to resolve issues at:

**Grants.gov Contact Center:** 1-800-518-4726. Hours of Operation: 24 Hours a day, 7 days a week. Closed on all Federal holidays or email them at [support@grants.gov](mailto:support@grants.gov).

*IHS Retrieval Email*

-Notification that the application has been sent to IHS.

### **Track My Application Results Page:**

There is a main link to Track My Application in Grants.gov, but you will still need your tracking numbers for each application submitted.

<https://apply07.grants.gov/apply/checkApplStatus.faces>. The difference between using

the link stated here, and the one listed on the confirmation notices is on that on confirmation notices you will find a direct link to your application due to the assigned tracking number, and the link above will take you to the main webpage to track your application, but you still need your tracking numbers to view the data.

You will be able to track up to 5 applications at one time without having to log into Grants.gov by clicking on the link above and having all tracking numbers needed.

*Information listed in the results screen*

CFDA Number  
Funding Opportunity Number  
Grants.gov Tracking Number  
Date/Time Application Received  
Status (Rejected, Validated)  
Status Date  
Agency Tracking Number (if any)  
Submission Name (SF424)  
Amount of Request

**What to do if you don't see your application package in Track My Application?**

If you don't see your submitted application listed, follow the instructions below:

Open an internet browser window (ex: Internet Explorer) and resubmit your application package as normal (detailed instructions below). If you still do not receive the confirmation page after you resubmit your application package, contact the Grants.gov Contact Center (**see below**).

**Instructions to resubmit by opening a new internet browser window (Internet Explorer)**

1. Open the Internet Explorer browser on your computer
2. Go to the File menu and choose "Open"  
\*The "Open" dialog box will appear
3. In the "Open" dialog box click on the browse button  
\*Another dialog box will appear with access to your files
4. In the dialog box go to the drop down menu for "File Types" and select "All Files"
5. Through the dialog box, find the location of your saved application package on your computer
6. Once you have located your application package, select it with your mouse and click the "Open" button  
\*The dialog box will disappear and the "Open" dialog box will still be present

7. In the "Open" dialog box, click on the "Ok" button  
\*Your application package will now appear
8. Within your application package, to resubmit, click on the "Submit & Save" button

**\*Call or email the Grants.gov Contact Center at 1-800-518-4726 or [support@grants.gov](mailto:support@grants.gov) to verify that your submission was received by the Grants.gov system and to receive a tracking number for your application package if you do not get one electronically.**