AmeriCorps*State Operational Grant Program

Request for Grant Application (RFGA)
AC-VSG-13-3273-00

DEADLINE	Applications shall be submitted **on or before 3:00 p.m.** (Arizona time) **on *November 15, 2011*** at Governor's Office for Children, Youth, and Families, 1700 W. Washington, Suite 101, Phoenix, AZ 85007. **TELEFAXED, ELECTRONIC OR LATE APPLICATIONS WILL NOT BE ACCEPTED. Please mail or deliver one (1) original document marked "ORIGINAL" and eight (8) copies.** **Applicants are cautioned not to rely on next day U.S. Postal mail services.** Mail sent to the Governor's Office for Children, Youth and Families is filtered through the Arizona Department of Administration. The Governor's Office is not responsible for packages delivered to locations other than Suite 101. All applications will be date stamped using the time clock in Suite 101 only.
SPECIAL ACCOMMODATIONS	Persons with a disability may request reasonable accommodation such as a language interpreter by contacting Sarah Bean, email: sbean@az.gov or via Fax (602) 542-5522. Requests should be made as early as possible to allow time to arrange the accommodation.
PRE-APPLICATION CONFERENCE	Prospective applicants are encouraged to attend a conference on **October 19, 2011 at 10:00 a.m. (Arizona time) at the ADHS State Laboratory Large "igloo" conference room, 250 N. 17th Ave., Phoenix, AZ 85007**. The purpose of the meeting is to discuss and clarify this Request for Grant Application.
PROCUREMENT GUIDELINES	In accordance with A.R.S. §41-2701, competitive sealed grant applications for the services specified within this document will be received by the Governor's Office for Children, Youth and Families at the above specified location until the time and date cited. Grant applications received by the correct time and date will be opened and the name of each applicant will be publicly read. Grant applications must be in the actual possession of the Governor's Office for Children, Youth and Families on or prior to the exact time and date indicated above. **TELEFAXED, ELECTRONIC OR LATE GRANT APPLICATIONS WILL NOT BE CONSIDERED**. Grant applications must be submitted in a **sealed envelope** with the Grant Application Number and the applicant's name and address clearly indicated on the envelope. All applications must be typewritten and a complete Grant Application returned along with the offer by the time and date cited above. Additional instructions for preparing a grant application are included within this document.

	Applicants are strongly encouraged to carefully read the entire Request for Grant Application document.
CONTRACT INFORMATION	**GRANT TITLE:** AmeriCorps*State Operational Grant **CONTRACT TYPE:** Cost Reimbursement Sub-Grant **CONTRACT TERM:** The term of the contract shall commence on September 1, 2012 and shall remain in effect until August 31, 2013 unless terminated, canceled or extended as otherwise provided herein.
CONTACT INFORMATION	**Sarah Bean** Governor's Office for Children, Youth and Families Procurement Manager Fax: (602) 542-5522 Email: sbean@az.gov
CATALOG OF FEDERAL DOMESTIC ASSISTANCE (CFDA) NUMBER	The AmeriCorps*State Operational Grant CFDA number is 94.006. This number will be required for audits conducted in accordance with federal regulations.
MANDATORY SUBGRANTEE ORIENTATION	Each successful applicant who is awarded will be required to attend a **MANDATORY** Subgrantee Orientation. The time and location for this meeting will be detailed in an award letter. A fiscal representative AND a program representative will be **REQUIRED** to attend.
SPECIAL NOTE	All information submitted by the applicant is subject to disclosure and inspection by the public. If an applicant deems all, or part of their application to be proprietary, a written justification must be submitted to support non-disclosure.
NON-RESPONSIVE APPLICATIONS	Applications missing exhibits, solicitation amendments, financial documents, and any stated requirements presented in this RFGA shall be deemed non-responsive. Non-responsive applications are not susceptible for award and shall not be evaluated.
AMENDMENTS	**It is the sole responsibility of applicants to check the Governor's website for any changes to this RFGA, http://gocyf.az.gov/Grants.asp**

Janice K. Brewer Governor	State of Arizona Governor's Office for Children, Youth and Families	Cassandra A. Larsen Director

OFFER AND ACCEPTANCE FORM (SPO FORM 203)

TO THE GOVERNOR'S OFFICE FOR CHILDREN, YOUTH AND FAMILIES:

The Undersigned hereby agrees, if awarded a grant, to all terms, conditions, requirements and amendments in this solicitation document and any written exceptions, as accepted by the Governor's Office for Children, Youth and Families, in the application.

Arizona Transaction (Sales) Privilege Tax License No.:

_____

Federal Employer Identification No.:

_____ _____ _____

Name of Point of Contact Concerning this Application:

Name: _____

Phone: _____ Fax: _____

E-Mail:_____

_____
Name of Applicant

_____
Signature of Person Authorized to Sign Offer

_____
Address

_____
Printed Name

_____
City **State** **Zip**

_____
Title

CERTIFICATION

By signature in the Offer section above, the Applicant certifies:

1. The submission of the application did not involve collusion or other anti-competitive practices.
2. The applicant shall not discriminate against any employee or applicant for employment in violation of Federal Executive Order 11246, State Executive Order 99-4 or A.R.S. §§ 41-1461 through 1465.
3. The applicant has not given, offered to give, nor intends to give at any time hereafter any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor, or service to a public servant in connection with the submitted offer. Failure to provide a valid signature affirming the stipulations required by this clause shall result in rejection of the offer. Signing the offer with a false statement shall void the offer, any resulting contract and may be subject to legal remedies provided by law.
4. In accordance with A.R.S. §35-391 and A.R.S. §35-393, the applicant hereby certifies that the applicant does not have scrutinized business operations in Sudan or Iran.

ACCEPTANCE OF APPLICATION

The Application is hereby accepted.

The Applicant is now bound to perform as stated in the attached grant application, and based upon the RFGA solicitation document, including all terms, conditions, requirements, amendments, etc., and the Applicant's grant application as accepted by the State.

This grant shall henceforth be referred to as Grant No. _____.

The Applicant has been cautioned not to commence any billable work or to provide any material or service under this contract until Applicant receives a purchase order, contact release document or written notice to proceed.

State of Arizona
Awarded this _____ **day of** _____ **20** ____

_____
Sarah Bean, Procurement Manager

What is in this Request for Grant Application?

What is Governor's Office for Children, Youth & Families? Page 5

What is the Governor's Commission on Service and Volunteerism? Page 5

What are AmeriCorps*State Operational Programs? Page 5

What is the Corporation for National and Community Service? Page 6

What is the Funding Source for this Grant? Page 7

What Arizona Entities are Eligible to Apply for this Funding Opportunity? Page 7

What is the Funding Availability? Page 7

What Will this Request for Grant Application Fund? Page 8

How Do I Apply? Page 14

How Will the Applications be Evaluated? Page 16

Technical Requirements Page 17

Application Requirements Page 17

Program Specific Requirements Page 31

Terms and Conditions Page 33

Exhibits and Attachments Page 46

Checklist Page 47

What is Governor's Office for Children, Youth & Families?

The Governor's Office for Children, Youth & Families (GOCYF) provides resources, promotes citizen engagement and leads innovative programs to strengthen and empower families and communities. To achieve the Governor's vision for healthy communities, the office is organized into several areas: Children, Community and Youth Development, Substance Abuse Policy and Women. Experienced and knowledgeable professionals with expertise in their particular areas staff each area and act as resources to our funded partners.

The GOCYF acts as a catalyst for overall systems changes. Our commissions advise and monitor policy initiatives and grant programs. The GOCYF convenes numerous commissions, councils and task forces which include: the Arizona Parents Commission on Drug Education and Prevention, the Arizona Substance Abuse Partnership, the Arizona Juvenile Justice Commission, the Governor's Commission to Prevent Violence Against Women, the Governor's Commission on Service and Volunteerism and the Governor's Youth Commission. To achieve its goal of community participation and inclusiveness, the commissions and councils are composed of diverse people representing a variety of geographic areas, ethnicities, interests, and professions.

What is the Governor's Commission on Service and Volunteerism?

The Governor's Commission on Service and Volunteerism (the Commission) was founded in 1994 to provide oversight and to administer Arizona's AmeriCorps funding through the Corporation for National and Community Service, as appropriated by Congress. In 1999, the mission of the Commission was expanded to become the Governor's policy-recommending body on volunteer and service issues. In 2009, with the Serve America Act, the Commission's role has been expanded to include providing training and technical assistance to all AmeriCorps and Learn and Serve, and Senior Corps Programs in Arizona. Arizonans representing the diversity and unique nature of the state are appointed to serve on the Commission by the Governor.

Throughout its growth and development, the Commission has placed great emphasis on developing the capacity of community infrastructures to better identify and address important community needs at the local level.

Mission: The Commission initiates, builds, enhances, motivates and maintains an ethic of service and volunteerism statewide.

Vision: the Commission envisions a state in which Arizonans of all ages, backgrounds and abilities view service and volunteerism as their civic responsibility and become connected and strengthened through a commitment of civic engagement.

What are AmeriCorps*State Operational Programs?

AmeriCorps was established in 1993 as a way for Americans of all ages, backgrounds and abilities to give back to their communities. AmeriCorps supports programs which have the following key elements:

- Programs that are high-quality, innovative, have the potential to be replicated by programs in other areas, and that can sustain themselves or the service activities with other support when the grant period ends.

- Programs that collaborate with or propose to foster Federal Work Study students in community service.
- Programs that are geographically diverse across the state, region, or country and include urban and rural areas.
- Programs that demonstrate they can effectively develop and administer an AmeriCorps program with proper supervision, monitoring, evaluation, and financial controls.
- Programs that involve recruitment, support, and management of volunteers that enhances or builds upon direct service goals of the program or organization.
- Partnerships that include small community based, faith-based, or grassroots non-profits that address a defined local need.
- Programs that will produce results for local communities.
- AmeriCorps grants support programs that are expected to be self-sustaining over time.
- AmeriCorps*State Operational programs provide AmeriCorps members with a living allowance, and may also provide health care and child care benefits to full time AmeriCorps members. Upon the successful completion of service, an education award is provided to AmeriCorps members through the National Service Trust.
- AmeriCorps*State Operational Programs are funded by the CNCS through the Governor's Commission on Service and Volunteerism (the Commission).

Other CNCS programs include AmeriCorps*National Direct, AmeriCorps*Tribal, AmeriCorps*VISTA, AmeriCorps*NCCC, Senior Corps, and Learn and Serve America. To find out more about the programs above, including AmeriCorps, visit http://www.nationalservice.gov.

What is the Corporation for National and Community Service?

The mission of the Corporation for National and Community Service (CNCS) is to improve lives, strengthen communities, and foster civic participation through service and volunteering. For more than fifteen years, the CNCS—through its Senior Corps, AmeriCorps programs—has helped to engage millions of citizens in meeting community and national challenges through service and volunteer action.

On April 21, 2009, President Obama signed the Edward M. Kennedy Serve America Act, the most sweeping expansion of national service in a generation. This landmark law not only expands service opportunities, but also focuses national service on key outcomes; builds the capacity of individuals, nonprofits, and communities to succeed; and encourages innovative approaches to solving problems.

In alignment with the Serve America Act, this AmeriCorps*State Operational RFGA aligns with the federal *Notice of Federal Funding Opportunity* and will focus AmeriCorps grantmaking in six Focus Areas identified by the Act:

- Disaster Services
- Economic Opportunity
- Education
- Environmental Stewardship
- Healthy Futures
- Veterans and Military Families

In order to carry out Congress' intent and to maximize the impact of the investment in AmeriCorps, the Commission seeks to fund programs that can demonstrate community

impact and solve community problems through an evidence-based approach (e.g. performance data, research, theory of change).

In addition to the nationally identified focus areas, the Commission will provide organizations the opportunity to design quality programs to better address the priority areas of service-learning, youth-adult partnerships, **OR** encore service programs and will award Priority Points for addressing one of these priority areas.

What is the Funding Source for this Grant?

The Corporation for National and Community Service provides funding for all AmeriCorps*State Programs, including Education Award Programs. The Edward M. Kennedy Serve America Act (Serve America Act) reauthorizes service programs administered by the Corporation for National and Community Service. Their web site is http://www.nationalservice.gov. The Catalog of Federal Domestic Assistance (CFDA) Number for the AmeriCorps Grant is 94.006.

What Arizona Entities are Eligible to Apply for this Funding Opportunity?

The following Arizona entities are eligible to apply:

- School districts and institutions of higher education
- Local, county, tribal, state government entities
- Any partnership of the above listed entities (a fiscal agent must be designated), or an intermediary organization representing the interests of the above listed entities
- A non-profit and/or a community or faith-based organization

For the purposes of this application, the GOCYF considers an Arizona non-profit faith-based organization to include**:**

- A religious congregation (church, mosque, synagogue, temple, etc.)
- A spiritual assembly
- An organization, program, or project sponsored/hosted by a religious congregation/spiritual assembly (may be incorporated or not incorporated)
- A non-profit organization founded by religious congregation/spiritual assembly or religiously-motivated incorporators and board members that clearly states in its name, incorporation, or mission statement that it is a religiously-motivated institution
- A collaboration of organizations that clearly and explicitly includes organizations from the previously described categories

What is the Funding Availability?

The Commission anticipates awarding new and recompeting AmeriCorps grants for fiscal year 2012. The actual level of funding will be subject to the availability of annual appropriations, which have not yet been made by Congress. Once again, the Commission anticipates that this AmeriCorps grant competition will be highly competitive.

High quality applications will be submitted for funding in a national competition. If an application does not receive competitive funding through the Corporation for National and Community Service, the application may then be considered for state formula funding. The

Commission anticipates awarding approximately fifty percent (50%) of their formula allocation AmeriCorps State Operational Grant Competition depending on the number of remaining high-quality applications and the availability of funds.

This is a twelve (12) month contract that may be renewable for two additional twelve month contracts. Successful applicants may be eligible for continuation funding for a second and third program year contingent upon the availability of federal appropriations, compliance with terms and conditions, programmatic and financial performance, and through the submission of a renewal application. **The initial contract period for any resultant grant is anticipated to begin September 1, 2012 through August 31, 2013.**

For this application, a combination of AmeriCorps member slots may be requested that results in federal budget share of **not less than $66,500 minimum** (a combination of member slots that equal 5 MSY) **and a maximum of $399,000** (a combination of member slots that equal 30 MSY). Average cost per Member Service Year (MSY) may not exceed $13,300.00.

What Will This Request for Grant Application Fund?

Arizona public or private nonprofit organizations, including labor organizations, faith-based and other community organizations; institutions of higher education; government entities within states or territories (e.g., cities, counties); Indian Tribes; partnerships or consortia; and intermediary organizations are eligible to apply. AmeriCorps*State Operational Program grants will be awarded to eligible organizations that identify high-priority, unmet needs in their community that will be addressed by AmeriCorps members recruited, trained and managed by the organization. An AmeriCorps member is an individual age 17 and older who is enrolled in an approved national service position and engages in community service. Members may receive a living allowance and other benefits while serving as an AmeriCorps member. Upon successful completion of their term of service, members receive a Segal Education Award from the National Service Trust.

A. What is the purpose of AmeriCorps funding?

The purpose of AmeriCorps is to maximize the power of service and volunteering to improve lives in communities across the country. In the Edward M. Kennedy Serve America Act, Congress directed the CNCS to focus national service in areas where service can make a major impact, including education, energy conservation, health, economic opportunity for economically vulnerable individuals, increasing service by and for veterans, and providing disaster services.

The CNCS and the Commission are carrying out Congress's intent by targeting AmeriCorps funding in these six focus areas. In accordance with the Act, through this RFGA and its other activities, the CNCS and the Commission seeks to:

- Direct the power of AmeriCorps to solve a common set of challenges.
- Expand opportunities for all Arizonans to serve.
- Build the enduring capacity of individuals, organizations and communities to effectively use service and volunteering to solve community problems.
- Embrace innovative solutions that work.

AmeriCorps grants are awarded to eligible organizations engaged in evidence-based interventions that utilize AmeriCorps members to strengthen communities. An

AmeriCorps member is an individual who is enrolled in an approved national service position and engages in community service. Members may receive a living allowance and other benefits while serving. Upon successful completion of their service members receive a Segal AmeriCorps Education Award from the National Service Trust.

Brief descriptions of the six Focus Areas follow.

Disaster Services:
Grants will help individuals and communities prepare, respond, recover, and mitigate disasters and increase community resiliency. Grant activities will:

- increase the preparedness of individuals,
- increase individuals' readiness to respond,
- help individuals recover from disasters, and/or
- help individuals mitigate disasters.

Economic Opportunity:
Grants will provide support and/or facilitate access to services and resources that contribute to the improved economic well-being and security of economically disadvantaged people. Grant activities will help economically disadvantaged people to:

- have improved access to services and benefits aimed at contributing to their enhanced financial literacy,
- transition into or remain in safe, healthy, affordable housing, and/or
- have improved employability leading to increased success in becoming employed.

Education:
Grants will provide support and/or facilitate access to services and resources that contribute to improved educational outcomes for economically disadvantaged people, especially children. There is particular interested in program designs that support youth engagement and service-learning as strategies to achieve significant educational outcomes. Grant activities will improve:

- school readiness for economically disadvantaged young children,
- educational and behavioral outcomes of students in low-achieving elementary, middle, and high schools, and/or
- the preparation for and prospects of success in post-secondary education institutions for economically disadvantaged students.

Environmental Stewardship:
Grants will provide direct services that contribute to increased energy and water efficiency, renewable energy use, or improving at-risk ecosystems, and support increased citizen behavioral change leading to increased efficiency, renewable energy use, and ecosystem improvements particularly for economically disadvantaged households and economically disadvantaged communities. Grant activities will:

- decrease energy and water consumption,
- improve at-risk ecosystems,
- increase behavioral changes that lead directly to decreased energy and water consumption or improve at-risk ecosystems, and/or
- increase green training opportunities that may lead to decreased energy and water consumption or improve at-risk ecosystems.

Healthy Futures:
Grants will meet health needs within communities including access to care, aging in place, and addressing childhood obesity. Grant activities will:

- increase seniors' ability to remain in their own homes with the same or improved quality of life for as long as possible,
- increase physical activity and improve nutrition in youth with the purpose of reducing childhood obesity, and
- improve access to primary and preventive health care for communities served by AmeriCorps programs (access to health care).

Veterans and Military Families:
Grants will positively impact the quality of life of veterans and improve military family strength. Grant activities will increase:

- the number of veterans and military service members and their families served by AmeriCorps programs, and/or
- the number of veterans and military family members engaged in service provision through AmeriCorps programs.

A brief description of Capacity Building follows.

Capacity Building:
In addition to the six Focus Areas described above, AmeriCorps grants may also provide support for capacity building activities provided by AmeriCorps members. As a general capacity building activities are considered to be *indirect services* that enable organizations to provide more, better and sustained *direct services*. Capacity building activities cannot be solely intended to support the administration or operations of the organization. Examples of capacity building activities include:

- Recruiting and/or managing community volunteers.
- Implementing effective volunteer management practices.
- Completing community assessments that identify goals and recommendations.
- Developing new systems and business processes (technology, performance management, training, etc.) or enhancing existing systems and business processes.

Encore Programs
Congress set a goal that 10 percent of AmeriCorps funding should support encore service programs that engage a significant number of participants age 55 or older.

National Performance Measures:
In 2012, the Commission in partnership with the CNCS will implement the third year of the National Performance Measures Pilot. National Performance Measures allow the CNCS to demonstrate the aggregated impact of all AmeriCorps programs.

The CNCS National Performance Measures are split into two groups: Priority Performance Measures and Pilot Performance Measures.

- Priority Performance Measures are a subset of the original National Performance Measures Pilot with the addition of capacity building measures.
- Pilot Performance Measures are the remaining measures from the National Performance Measures Pilot with the addition of capacity building measures not included in the Priority Measures.

Applicants are strongly encouraged to utilize the National Performance Measures.

B. What AmeriCorps Applications will likely be funded in 2012?

In the 2012 competition, it is expected that a significant amount of available funds will be awarded to programs working in the six Focus Areas of Disaster Services, Economic Opportunity, Education, Environmental Stewardship, Healthy Futures, and Veterans and Military Families.

In particular, grantmaking is targeted in the Education and Disaster Services Focus Areas for greater impact and increase investment in the Veterans and Military Families Focus Area.

TIER	PERFORMANCE MEASURE TIERS
1	Programs that select Priority Performance Measures in Education, Veterans and Military Families, and Disaster Services (NOTE: Applicants and grantees that have programs that fit these Priority Measures are **required** to utilize these Measures.
2	Programs that select Priority Performance Measures in Economic Opportunity, Environmental Stewardship, Healthy Futures and Capacity Building. (NOTE: Applicants and grantees that have programs that fit these Priority Performance Measures are **required** to utilize these Measures.
3	Programs that select Pilot Performance Measures.
4	Programs in the Focus Areas with self-nominated performance measures.
5	Programs outside the Focus Areas with self-nominated performance measures.

The 2012 Frequently Asked Questions document and the National Performance Measures Instructions for each of the Focus Areas and for Capacity Building can be found on the CNCS 2012 NOFO web page:
http://www.americorps.gov/for_organizations/funding/nofa_detail.asp?tbl_nofa_id=91

A listing of the National Performance Measures is provided in Attachment D.

C. What are the 2012 Arizona state funding priorities?

Priority will be given to grant applicants that develop a program concept that includes meaningful service learning activities, **OR** youth-adult partnerships, **OR** Boomer/Encore engagement programs. **Grant applicants are highly encouraged to incorporate clear and specific reference of these elements into the body of the application narrative.**

1) Service-Learning

Working definition of service-learning: "Service-Learning is a teaching and learning strategy that integrates meaningful community service with instruction and reflection to enrich the learning experience, teach civic responsibility, and strengthen communities.

Goals of Service Learning:

- Enhance social and academic learning
- Develop character and citizenship skills
- Learn about the issues
- Develop an action plan for service
- Engage in meaningful service by working on a program that will make a difference"

(http://servicelearning.mysdhc.org/PDF/What%20is%20Service-Learning%20revised%20pdf.pdf)

Recommended Service Learning resource:
K-12 Service-Learning Project Planning Toolkit

http://www.servicelearning.org/filemanager/download/8542_K-12_SL_Toolkit_UPDATED.pdf

2) Youth-Adult Partnerships

Working definition of youth-adult partnerships: "A fostered relationship between youth and adults where both parties have equal potential in making decisions, utilizing skills, learning from one another and promoting change through civic engagement, program planning and/or community development initiatives." (http://resiliency.cas.psu.edu/pdfs/yap.pdf)

Recommended Youth-Adult partnership resources:

- Center for Nonprofits and 4-H Youth Development at the University of Wisconsin Madison Being Y-AP Savvy: A Primer on Creating & Sustaining Youth-Adult Partnerships - http://ecommons.cornell.edu/bitstream/1813/19325/2/YAP-Savvy.pdf

- Innovation Center Youth Adult Partnerships - http://www.theinnovationcenter.org/what-we-do/youth-adult-partnership

  Youth Adult Partnership model - http://www.theinnovationcenter.org/activities-toolkits-and-reports/browse-leadership-stages

- SEARCH Institute Report -http://www.search-institute.org/system/files/KelloggExecSummary_0.pdf

- Texas Network of Youth Services & Prevention and Early Intervention /Community Youth Development Division of the Texas Department of Protective and Regulatory Services. Making It Work: A guide to Successful Youth-Adult Partnerships - http://www.tnoys.org/resources/Youth%20Adult%20Partnerships%20Guide.pdf

- Youth Service America Fact Sheet http://tools.ysa.org/downloads/tipsheets/youthvoice/Youth_Adult_Partnership.pdf

3) Encore Programs

Encore Programs Defined: Encore Service Programs are programs that engage a significant number of participants age 55 or older.

Recommended Encore Program resources:

- Baby Boomer Facts: http://www.getinvolved.gov/newsroom/programs/factsheet_boomers.asp

- Report on nonprofits making use of Baby Boomer volunteers: http://www.nationalservice.gov/about/newsroom/releases_detail.asp?tbl_pr_id=657

- Report on Baby Boomers volunteering: http://www.nationalservice.gov/pdf/07_0307_boomer_report.pdf

- Engaging Baby Boomers to meet the needs of the 21st Century: http://www.nationalservice.gov/about/newsroom/statements_detail.asp?tbl_pr_id=30

What is Required of Applicants?

Upon award, the applicant **must** agree to participate in the following:

- AmeriCorps Programs **are required to have Internet and E-mail capability**. All financial and programmatic reporting to the Governor's Office and the CNCS is done via the internet.

- Statewide events designed to promote the ethic of service and further the identification of AmeriCorps, the Arizona Governor's Commission on Service and Volunteerism, and other National Service Programs.

- Statewide and regional training activities sponsored by the Governor's Commission on Service and Volunteerism such as the Annual National and Community Service Conference and quarterly program director's meetings. It is **mandatory** for AmeriCorps*State Program Managers to attend the national service leadership trainings and program director quarterly meetings. Subgrantees must also attend all mandatory CNCS sponsored events.

- Establishment of a statewide evaluation of AmeriCorps members, which may include common performance measurements, the reporting of impact data and participation in satisfaction and other survey measures. The Subgrantee must also comply with all CNCS required evaluation activities such as the Annual Accomplishment Review.

- Monitoring activities conducted by the Commission and/or the CNCS to assess the quality of the program and ensure compliance with all relevant state and federal laws and with the AmeriCorps Grant Provisions. Activities to include written reports and site visits to both the sub grantee's organization as well as any location where members are serving.

What is the Arizona Commission Commitment to Diversity and Inclusion?

The Governor's Commission on Service and Volunteerism recognizes the unique talents and abilities of all Arizonans, and seeks to create a diverse and inclusive environment in which to develop highly performing programs through the recruitment, support, and full participation of people of diverse backgrounds, including people with disabilities, in all aspects and at all levels of Arizona's AmeriCorps*State programs.

The Governor's Commission on Service and Volunteerism also recognizes the significance of Section 504 of the Rehabilitation Act of 1974, and supports Arizona AmeriCorps program compliance with this Act as recipients of federal funds and actively encourages the commitment of Arizona AmeriCorps program to diversity and inclusion.

What is the Segal AmeriCorps Education Award?

All AmeriCorps members who successfully complete their terms of service have earned and are eligible to receive the Segal AmeriCorps Education Award (Ed Award) at no additional or extra cost to the grant applicant.

AmeriCorps members serving in programs funded with Fiscal Year 2012 dollars who successfully complete a term of service will receive an Education Award from the National Service Trust of $5,550 for a year of full-time service, with correspondingly smaller awards for less-than-full-time service. The amount of the Education Award is determined on the basis of the Pell Grant award. A member has up to seven years after the term of service has ended to use the award.

Table 1: Term of Service and FY12 Education Award

Term of Service	Minimum # of Hours	FY12 Education Award
Full Time	1700	$5,550
One-Year Half Time	900	$2,775
Two-Year Half Time	900	$2,775
Reduced Half Time	675	$2,114
Quarter Time	450	$1,468
Minimum Time	300	$1,175

Who Qualifies to Transfer an Education Award?
Eligible members are able to transfer their education awards. To transfer an award, the transferring individual must have: been at least 55 years of age before beginning the term of service; begun the term on or after October 1, 2009; transferred the award before its expiration date; and earned the award in an AmeriCorps State or National Program.

Who is eligible to receive a transferred award?
The recipient of a transferred award must: be the child, foster child, or grandchild of the transferring individual; be a citizen, national, or lawful permanent resident alien of the US; have been designated as the recipient by a qualified award-earner; and complete the required process for accepting the award.

For more information on the Segal Education Award, please go to this web link:
http://www.americorps.gov/for_individuals/benefits/benefits_ed_award_faq.asp

How Do I Apply?

Applicants will be required to submit the documents and exhibits/attachments being requested as outlined in this RFGA. To prepare your application, read this document and its exhibits/attachments. Follow the instructions and guidelines found in each of the document sections. Prepare a budget and budget narrative. **Refer to the Checklist on pages 47-49 (Exhibit A) to verify inclusion of all required documentation and the proper format**. **The checklist must be signed.**

The Governor's Office for Children, Youth and Families shall be responsible for the overall management of the AmeriCorps*State Operational Grant. The Governor's Office for Children,

Youth and Families is responsible for all activities related to submission, review of applications, awarding of contracts, and all subsequent program monitoring.

Applicant Contacts

The Governor's Office for Children, Youth and Families will address questions regarding this Request for Grant Application, including technical specifications and the application process. For questions, please contact the Procurement Manager:

Sarah Bean
Procurement Manager
sbean@az.gov
fax: (602) 542-5522

Applicants may not contact the employees of the Governor's Office for Children, Youth and Families or members of the Governor's Commission on Service and Volunteerism regarding this procurement activity while the formal solicitation process is underway.

Please follow these instructions in preparing your grant application

1. Read and familiarize yourself with all sections of this Request for Grant Application (RFGA) document.

2. Attend, if necessary, **the Pre-Application Conference on October 19, 2011, at 10:00 a.m. (Arizona time) at the ADHS State Laboratory Large "igloo" conference room, 250 N. 17th Ave., Phoenix, AZ 85007**The Pre-Application Conference will clarify the contents of the RFGA in order to prevent any misunderstanding of the Governor's Office for Children, Youth and Families position. Any doubt as to the requirements of the RFGA or any apparent omission or discrepancy should be presented to the Governor's Office for Children, Youth and Families at the Conference. The Governor's Office for Children, Youth and Families will take all questions and concerns under consideration. Any material changes to the RFGA will be issued in a written amendment. Oral statements or instructions shall not constitute an amendment to the RFGA. Written amendments are posted to the Governor's website, http://gocyf.az.gov/Grants.asp. **It is the sole responsibility of the prospective applicant to view the website for updated information.** Applicants **MAY NOT CONTACT** any employee of the Governor's Office for Children, Youth and Families concerning this solicitation while the formal solicitation process is underway. **Attendance at the Pre-Application Conference is encouraged, but not mandatory.**

3. **Submit one (1) original document marked "ORIGINAL" and eight (8) additional copies of your application**. The original copy of your application should be clearly marked **"ORIGINAL**". When submitting your application, ensure your organization name and the Request for Grant Application Number **AC-VSG-13-3273-00** is CLEARLY marked on the outside of the **SEALED** envelope/package. The Governor's Office for Children, Youth and Families will not provide any reimbursement for the cost of developing or presenting applications in response to this RFGA.

4. Grant Applications must be received by the Governor's Office for Children, Youth and Families, 1700 W. Washington, Suite 101, Phoenix, Arizona, 85007 **no later than 3:00 p.m. (Arizona time), November 15, 2011**. **TELEFAXED, ELECTRONIC OR LATE APPLICATIONS SHALL NOT BE ACCEPTED.** Applicants are cautioned not to rely on next day mail services. Mail sent to the Governor's Office for Children, Youth and Families is

filtered through the Arizona Department of Administration. The Governor's Office is not responsible for packages delivered to locations other than Suite 101. All applications will be date stamped using the time clock in Suite 101 only.

5. Additional materials beyond the grant application requirements, such as promotional brochures, should not be added to the application package.

6. Applications shall be opened publicly at the time and place designated on the cover page of this document. The name of each applicant shall be read publicly and recorded.

7. Applications shall be irrevocable for 150 days after the RFGA due date and time.

8. In the event that the applications received exceed the budget limitations, the Governor's Office for Children, Youth and Families reserves the option to request a reduction in the scope of the applicant's proposed program. If such an option is exercised by the Governor's Office for Children, Youth and Families, funds shall be awarded according to priority scores. Revised budget documents will be required. The Governor's Office for Children, Youth and Families reserves the right to award contracts for less than the proposed budget amount. The Governor's Office for Children, Youth and Families also reserves the right to increase budget amounts if funds become available for additional distribution.

9. Keep a copy of this solicitation and your grant application. If awarded, the Subgrantee shall be bound to the services listed by the grant application and based upon the solicitation, including all terms, conditions, specifications, amendments, etc.

How Will the Applications be Evaluated?

A review committee will evaluate applications and select those applications deemed susceptible for an award, based upon the following criteria.

Evaluation Criteria	
Program Design	500 points
Organizational Capability	250 points
Cost Effectiveness and Budget Adequacy	250 points

Note: Applications must meet a threshold score of 650 points to be considered for funding. Priority points will be assigned to applicants after the initial screening for the evaluation criteria. Priority Points are not counted toward the 650 point threshold.

Priority Points will be awarded for applications that incorporate one of the State Priorities listed below. Applicants will be eligible for only one priority area. The priority should be clearly identified in the narrative portion of the application and marked on Exhibit C.

Service Learning	100 points
Youth-Adult Partnerships	100 points
Encore/Boomer Engagement	100 points

Those applicants not selected for funding will be notified in writing; however, pursuant to A.R.S. §41-2702 (E), all applications shall not be open for public inspection until after grants are awarded. A.R.S. §41-2702 (G) also states the evaluator assessments shall be made available for public inspection no later than thirty (30) days after a formal award is made.

Technical Requirements

Applications will be reviewed initially for compliance with technical requirements.

APPLICATIONS MISSING EXHIBITS, SOLICITATION AMENDMENTS, FINANCIAL DOCUMENTS AND ANY STATED REQUIREMENTS PRESENTED THROUGHOUT THIS RFGA SHALL BE DEEMED NON-RESPONSIVE. NON-RESPONSIVE APPLICATIONS ARE NOT SUSCEPTIBLE FOR AWARD AND SHALL NOT BE EVALUATED.

- Responses should be typed, single-spaced with one-inch margins or wider with a 12-point font used.
- Applications are NOT to be bound in spiral binders or in 3-ring notebooks. Please submit your applications either stapled in the upper left-hand corner or use a binder clip.
- Applications should be single sided, NOT duplexed.
- Number all pages and include a table of contents that follows the checklist presented on page 47- 49 (Exhibit A). The table of contents shall reference page numbers. Page numbers may be labeled or handwritten on forms not contained in the exhibit section (e.g. IRS 502(c) (3) tax exempt letter, solicitation amendments, etc.)
- **Enclose one (1) original document marked "ORIGINAL" and eight (8) additional copies.**
- A signed **Offer and Acceptance** (SPO Form 203) document must be submitted. **THIS DOCUMENT MUST HAVE AN ORIGINAL SIGNATURE.**
- Any amendments, if issued, must be submitted **SIGNED** as part of the application.
- All Exhibits and application requirements must be completed as instructed.
- The organization name and the Request for Grant Application Number **AC-VSG-13-3273-00** must be **CLEARLY** marked on the outside of the **SEALED** envelope/package.

Application Requirements

eGrants Account: Applicants need to establish an eGrants account by accessing this link: https://egrants.cns.gov/espan/main/login.jsp and selecting "Don't have an eGrants account? Create an account."

Your eGrants application consists of the following components. Make sure to complete each section.

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

I. Applicant Info

Information entered in the Applicant Info, Application Info, and Budget sections will populate

the SF 424 Facesheet (Attachment B)

- Select New if you are applying for the first time, have received formula funding in the past, or are a former grantee (non-formula).
- Enter, or update your contact information in the fields that appear. The contact person needs to be the person who can answer questions about the application.
- Enter or select a Program Director and Program Website URL.

II. Application Info

In the Application Info Section enter:

- Areas affected by your proposed program. Please include the two-letter abbreviation with both letters capitalized for each state where you plan to operate. Separate each two-letter state abbreviation with a comma. For city or county information, please follow each one with the two-letter capitalized state abbreviation.
- Indicate Yes or No if you are delinquent on any federal debt. If yes, send explanation as described in Section V.D.
- State Application Identifier: Enter N/A.
- State Single Point of Contact: This is pre-filled as “No, this is not applicable.”
- If you plan to request the alternative match schedule, you must submit your request as described in the Budget Section, below, at least 60 days prior to the application deadline.
- For “Project Director” please enter the project director or other person to contact on matters related to the application.
- Leave the box for “Program Initiative” blank.
- The “Estimated Funds Requested” box will be populated automatically after you complete the budget.

III. Narratives

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

- Lead from your program strengths and be explicit.
- 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 program responds to the selection criteria presented below.
- Avoid circular reasoning. The problem you describe should not be defined as the lack of the solution you are proposing.
- Explain how. Avoid simply stating that the criteria will be met. Explicitly describe how the proposed program will meet the criteria.
- Don’t make assumptions. Even if you have received funding from the Commission/ the CNCS in the past, do not assume your reviewers know anything about you, your proposed 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 program read and critique the program narrative.
- Follow the instructions and discuss each criterion in the order they are presented in the instructions. Use headings to differentiate narrative sections by criterion.

In eGrants, you will enter text for:

- Executive Summary
- Rationale and Approach (Program Design)
- Organizational Capability
- Cost Effectiveness and Budget Adequacy
- Evaluation Plan

You may not exceed 26 double-spaced pages for the Narratives, including the Executive Summary and Cover Page, as the pages print out from eGrants. Reviewers will not consider material submitted over the page limit, <u>even if eGrants allows you to enter and submit text over the limit</u>. From the Review and Submit page, print out your application prior to final submission to ensure it is not over the 26 page limit. This limit does not include the budget and performance measures, and any other required exhibits/attachments.

Note: The Narratives Section also includes fields for Clarification Information, Amendment Justification, and Continuation Changes. Please enter N/A in these fields. They may be used at a later date to enter information for clarification following review, to request amendments once a grant is awarded, and to enter changes in the narrative in continuation requests.

External and staff 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 include a brief discussion of each bullet if it pertains to your application.

A. Executive Summary

Please provide a one-paragraph executive summary of your proposed program. This summary must be one-half page or less. The summary should include who, what, where, when, and why:

- Who will be serving? Who will be served?
- What will the AmeriCorps members do?
- Where will the activity take place?
- When does the program begin and end?
- What is the expected outcome(s) of the program?

You may fill in the blanks in the following template to complete your executive summary.

[Number of] AmeriCorps members will leverage an additional [number of leveraged volunteers, if applicable] to [what the members will be doing] in [where they will be working]. At the end of the [duration of program] period, [anticipated outcome of program]. This program will focus on the focus area of [Focus Area(s)]. The federal investment of $[amount of request] will be matched with $[amount of projected match].

The CNCS will post these summaries on <u>www.nationalservice.gov</u> in the interest of transparency and Open Government.

B. Selection Criteria

Each application must clearly describe a program that will effectively deploy AmeriCorps members to solve a significant community problem.

1. Rationale and Approach/ Program Design (50 percent)

In assessing Rationale and Approach/ Program Design, reviewers will examine the degree to which the applicant demonstrates how AmeriCorps members are particularly well-suited to solving the identified community needs.

Specifically, reviewers will assess the extent to which the applicant:

- Provides persuasive evidence that the identified needs exist in the targeted community(ies).
- Describes the ways in which AmeriCorps members are a highly effective means to solving the identified community needs, including the unique value added by AmeriCorps.
- Describes how the interventions the AmeriCorps members and volunteers are or will be engaged in are both evidence-based and will have a measurable community impact. The intervention is evidence-based if programs can demonstrate community impact and solve community problems through an evidence based approach (e.g. performance data, research, theory of change).
- Describes the program components that enable the AmeriCorps members to have powerful service experiences that increase community impact and lead to continued civic participation and connectivity with other AmeriCorps and national service participants.
- Convincingly links four major elements: (1) the need(s) identified, (2) the intervention that will be carried out by AmeriCorps members and community volunteers, (3) the ways in which AmeriCorps members are particularly well-suited to deliver the intervention, and (4) the anticipated outcomes.

In discussing how you will meet the criteria, please include your response to the following:

a. Need

Describe the community need(s) you will be working on. Why did you choose this need? Provide documentation of the extent/severity of the need in the target community. Describe the target community. Why did you select this population to be served?

b. Value Added: AmeriCorps Member Roles and Responsibilities

What will members do? Give examples of specific proposed member activities. Why are the members a highly effective means to solve the identified community need? What is the added value of the AmeriCorps members' service? How many members are you requesting? What types of slots (service terms) are needed for these members? If an applicant is requesting different slot types, explain how the different slot types align with your program design and activities.

If AmeriCorps members have an expanded role such as non-supervisory leadership positions that involve differentiated allowance, you must describe the organizational and budgeted support for the expanded opportunity, including an explanation of the

differentiated living-allowance and source of funds for the differentiated living allowance.

c. Evidence-Based

Describe how the interventions the AmeriCorps members and volunteers will be engaged in are both evidence-based and will have a measurable community impact.

d. Member Experience

Describe the program components that enable the AmeriCorps members to have powerful service experiences that increase community impact and lead to continued civic participation and connectivity with other AmeriCorps and national service participants. Demonstrate how you will provide structured opportunities for participants to reflect on and learn from their service which will result in a quality member experience and promote a lifelong ethic of service and civic responsibility. Describe how your program will ensure that members are aware they are AmeriCorps members and identify as such to community members, partners, and the general public. Describe how you will connect your members with each other, with other AmeriCorps members and national service participants in the local communities in which they serve, with other AmeriCorps and national service participants in the state, and nationally. How will your program foster a sense of connection and identity with the AmeriCorps brand?

e. Overall Picture

How does your program design link: (1) the need(s) identified, (2) the intervention that will be carried out by AmeriCorps members and community volunteers, (3) the ways in which AmeriCorps members are particularly well-suited to deliver the intervention, and (4) the anticipated outcomes?

f. AmeriCorps Member Selection, Training, and Supervision

Describe your plans for recruiting members for your program. Describe how members will be included from the local communities to be served by your program. If you will be recruiting and engaging traditionally underrepresented populations, please describe the organization's history with working with those populations or how it will ensure success if this is a new population being recruited. Underrepresented populations may include new Americans, low-income individuals, rural residents, older Americans, veterans, members of faith-based organizations, communities of color, Native Americans and people with disabilities.

Describe your plan for orienting members to AmeriCorps, the community they are serving, their placement site, and to the service they will perform. Describe how you will ensure that training provided to members will prepare members to perform all the activities they will engage in during their term of service. Describe, as necessary, the ongoing training provided to members throughout their terms. What are the anticipated training topics and the timeline for member training? How and when will you ensure that members are aware of prohibited activities? What, if any, program design and/or member or staff training changes will be made to ensure a positive member experience for underrepresented populations?

Describe your plan for supervising members, and how it ensures that members will receive adequate support and guidance throughout their terms. Who will supervise the AmeriCorps members? Describe how supervisors are selected and trained. Describe

how your program provides training, oversight, and support to supervisors.

g. Outcome: Performance Measures

What is the overall change you want to see by the end of the three-year grant cycle? What demonstrable impact will your program have? How will you measure impact? How will you report on this on an annual basis? How did you determine your performance measure targets?

Current Subgrantees Only: What impact has your program had? How successful have you been in tackling the identified problem?

h. Volunteer Generation

Describe how the proposed program will recruit volunteers to expand the reach/impact in the community. How will volunteers help meet the identified community needs and what will be their role(s)? What role will AmeriCorps members have in volunteer recruitment and management? How many volunteers does the proposed program to generate and how many hours will they serve?

i. Tutoring Programs Only

If you are proposing to operate a tutoring program, describe how your process 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 a secondary school who is providing tutoring through a structured, school-managed cross-grade tutoring program.

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 [section 1111 of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 6311)], 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.

2. Organizational Capability (25 percent)

Reviewers will assess the extent to which:

- The organization has the experience, staffing, and management structure to plan, implement and evaluate the proposed program.
- The organization has secured, or describes an effective plan for securing, the financial and in-kind resources necessary to support program implementation and to demonstrate community stakeholder support.
- The organization has the ability and structure to ensure its and its subgrantees and/or service locations' compliance with AmeriCorps rules and regulations including prohibited activities.
- Current or previous AmeriCorps subgrantees filled the member positions they were awarded and retained the AmeriCorps members they enrolled or have provided an explanation for less than 100% enrollment and retention.
- Current or previous AmeriCorps grantees have met performance targets and demonstrated compliance with grant terms and conditions.

In discussing how you will meet the criteria, please include your response to the following:

a. Organizational Background and Staffing

Provide the organization's mission and a brief history. Identify the primary and secondary contacts for the grant application. Describe your organization's prior experience administering AmeriCorps grants or other federal funds. Describe your organization's experience raising funds to support service activities and initiatives. Please list all sources of organizational funding in this section, and what percent the proposed AmeriCorps program represents in your budget. If you have received support from the Commission/CNCS during the last five years, please specify what type of support you received. What percentage of your total funding comes from the Commission/CNCS?

Explain your organization's management structure and how the board of directors (if applicable), administrators, and staff members will support your program.

If you already operate an AmeriCorps program, describe how it is integrated and supported within your organization. Provide evidence that you have managed the program well, have performed satisfactorily, and have a record of compliance and responsiveness.

Who will staff the AmeriCorps program and what is their specific role? What is their relevant experience? If positions are currently vacant, please describe the desired qualifications for each open position. What are your plans for providing financial and programmatic orientation; training and technical assistance; and monitoring program and service sites for compliance?

b. 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 program once it is completed.

Who are your community stakeholders and partners? How are they involved in planning and implementing the proposed program?

c. Compliance and Accountability

How will your organization ensure compliance with AmeriCorps rules and regulations at the subgrantee and service site locations (if applicable)? How will your organization prevent and detect compliance issues in general and specifically as it relates to prohibited activities? How will your organization hold itself, subgrantees, and service site locations (if applicable) accountable if instances of risk or noncompliance are identified?

Current and Former Subgrantees Only

d. Enrollment and Retention

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. Enrollment rate is calculated as slots filled plus refill slots filled divided by slots awarded.

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 subgrantees to pursue the highest retention rate possible. Retention rate is calculated as the number of members exited with award (full or partial award) divided by the number of members enrolled.

e. Performance Targets and Demonstrated Compliance

Performance Targets: Describe your performance against objectives during your last full year of program operation. If you did not meet performance targets, provide an explanation and describe your plan for improvement.

Demonstrated Compliance: Describe any compliance issues and areas of weakness/risk identified during your last full year of program operation at your organization and service sites (if applicable). If you and service sites (if applicable) had compliance or areas of weakness/risk identified, provide an explanation and describe the corrective action taken and your plan for improvement.

NOTE: Past performance on any grants from the Governor's Office for Children, Youth and Families, other state agencies, or other grants in general shall be taken into consideration in the evaluation of your application.

3. Cost Effectiveness and Budget Adequacy (25 percent)

Reviewers will assess the extent to which:

- The budget is clear, reasonable, cost-effective, and in alignment with the program narrative.
- The requested funds do not exceed the maximum cost per Member Service Year (MSY), or for existing programs, have not increased over previous years. The amount requested is a competitive factor in the selection process.

a. Cost Effectiveness

The cost per MSY is determined by dividing the federal share of budgeted grant costs by the number of MSYs requested in the application. It does not include childcare or the cost of the education award. One MSY is equivalent to at least 1,700 service hours, a full-time AmeriCorps position. The cost per MSY will be automatically calculated once you enter your budget in eGrants.

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.

If AmeriCorps members have an expanded roles, such as non-supervisory leadership positions that involve differentiated allowance, you must describe the organizational and budgeted support for the expanded opportunity, including an explanation of the differentiated living-allowance and source of funds for the differentiated living allowance.

Demonstrate how your program has or will obtain diverse resources for program implementation. Indicate how much funding your program needs from non-Corporation sources to support the program. Indicate the non-CNCS resource commitments (in-kind and cash) that you have obtained to date and the sources of these funds. Indicate what additional commitments you plan to secure, and how you will secure them.

b. Current Subgrantees Only:
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 funds.

Cost per MSY: Current subgrantees requesting a higher cost per MSY than in the previous year must include a compelling rationale for this increased cost. This applies even if the increased cost per MSY is less than the maximum or if the increase is due to increased costs associated with the grant.

c. Special Circumstances
In applying the cost-effectiveness criteria, circumstances of individual programs may be taken into consideration, including but not limited to: program age, the extent to which your program expands to new sites; 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; whether your program or project is located in a high-cost, economically distressed community, measured by applying appropriate Federal and State data; and 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.

If an applicant feels 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.

c. Budget Adequacy
Discuss the adequacy of your budget to support your program design including how it is sufficient to support your program activities and desired outputs and outcomes. Please explain how the cost of criminal history checks and FBI checks, if applicable, are covered if they are not included in the budget.

C. 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 current subgrantees. If you are recompeting for AmeriCorps funds for the first time you must submit a summary of your evaluation efforts or plan to date in the Evaluation Summary or Plan field in eGrants. If you are a subgrantee for a

subsequent time, you must submit your evaluation report according to the instructions in V. E., below. An evaluation report may be submitted in place of an evaluation plan.

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

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

Current subgrantees submitting an application that satisfies the CNCS definition of "same program" below, and has been funded in formula for at least one three-year cycle **must submit an evaluation plan, summary, or evaluation report when you recompete for the first time. If your project does not satisfy the definition, it will be considered new and will not be required to submit an evaluation plan, summary, or completed evaluation.**

Two programs will be considered the same if they:

- Address the same issue areas.
- Address the same priorities.
- Address the same objectives.
- Serve the same target communities and population.
- Utilize the same sites.
- Use the same program staff and members.

D. Amendment Justification

Enter N/A. This field may be used if you are awarded a grant and need to amend it.

E. Clarification Information

Enter N/A. This field may be used to enter information that requires clarification in the post-review period. Please clearly label new information added during clarification with the date.

F. Continuation Changes

Enter N/A. This field may be used to enter changes in your narratives in your continuation requests.

IV. Performance Measures

All applicants must submit performance measures with their application. See Attachment D for specific instructions for entering performance measures and Attachment I for National Performance Measures. Applicants are encouraged to select performance measures from Tier 1, 2, 3.

For more information about Performance Measures go to:
http://www.nationalserviceresources.org/star/ac

For more information about the National Performance Measures go to:
http://www.nationalserviceresources.org/national-performance-measures/home.

V. Documents

In addition to the application submitted in eGrants, you are required to provide your evaluation documents (if a current subgrantee with the same focus and performance measures), labor union concurrence (if necessary – see B., below), a federally-approved indirect cost agreement (if necessary – see C., below), and delinquency of a federal debt (if necessary – see D., below) in hard copy as part of your application to the GOCYF.

A. Evaluation

Submit any completed evaluation plan or report.

B. Labor Union Concurrence

1) If a program applicant:
   a) Proposes to serve as the placement site for AmeriCorps members; and
   b) Has employees engaged in the same or substantially similar work as that proposed to be carried out by AmeriCorps members; and
   c) Those employees are represented by a local labor organization, then the application must include the written concurrence of the local labor organization representing those employees. Written concurrence can be in the form of a letter or e-mail from the local union leadership.

2) If a program applicant:
   a) Proposes to place AmeriCorps members at sites where they will be engaged in the same or substantially similar work as employees represented by a local labor organization, then the applicant must submit a written description of how it will ensure that:
      i) AmeriCorps members will not be placed in positions that were recently occupied by paid staff.
      ii) No AmeriCorps member will be placed into a position for which a recently resigned or discharged employee has recall rights as a result of a collective bargaining agreement, from which a recently resigned or discharged employee was removed as a result of a reduction in force, or from which a recently resigned/discharged employee is on leave or strike.

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

C. Federally-approved Indirect Cost Agreement

Applicants that include a federally approved indirect cost rate amount in their budget must submit the approved indirect cost rate to the GOCYF.

D. Delinquent on Federal Debt

Any applicant that checks Yes to the question on federal debt delinquency in eGrants must submit a complete explanation to the GOCYF.

VI. Budget Instructions

A. Budget instructions regarding the AmeriCorps Member Living Allowances:

1. <u>What are the requirements regarding member living allowance?</u>

The proposed budget must include a living allowance for full-time members that are between $12,100 (minimum) and $24,200 (maximum) per member except as noted below.

This amount must be included in the proposed budget. The living allowance is not required for members serving in less than full-time terms of service. If a program chooses to provide a living allowance to a less than full-time member, it must comply with the maximum limits in the chart below.

Table 1: Minimum and Maximum Living Allowance

Service Term	Minimum # of Hours	Minimum Living Allowance	Maximum Total Living Allowance
Full-time	1700	$12,100	$24,200
One-year Half-time	900	$6,405	$12,800
Reduced Half-time	675	$4,804	$9,600
Quarter-time	450	$3,202	$6,400
Minimum-time	300	$2,135	$4,300

2. <u>What are the exceptions to the living allowance requirements?</u>
<u>Prior to September 21, 1993</u>

If a program existed prior to the National and Community Service Trust Act of 1993 (enacted September 21, 1993), the law does not require a living allowance. If an applicant chooses to offer a living allowance, it is exempt from the minimum requirement of $12,100, but not the maximum requirement of $24,200.

3. What is the Maximum Cost per Member Service Year?

Comparative costs per Member Service Year (MSY) are considered in making funding decisions. One MSY is equivalent to at least 1700 service hours, a full-time AmeriCorps position. The CNCS cost per MSY is determined by dividing the federal share of budgeted grant costs by the number of MSYs requested. It does not include child care or the value of the education award a member may earn. The maximum amount an applicant may request per MSY is determined on an annual basis. Continuation and recompeting grantees requesting a higher cost per MSY than in the previous year must include a compelling rationale for this increased cost. This applies even if the increased cost per MSY is less than the maximum.

Table 2: 2012 Maximum Cost per MSY

Grant Program	Maximum
AmeriCorps*State Operational Programs	$13,300

B. Federal Share of the Budget

For this application, a combination of AmeriCorps member slots may be requested that results in federal budget share of **not less than $66,500 minimum** (a combination of member slots that equal 5 MSY) **and a maximum of $399,000** (a combination of member slots that equal 30 MSY). **Average cost per Member Service Year (MSY) may not exceed $13,300.00.**

C. Match Requirements

Program requirements, including requirements on match are located in the AmeriCorps regulations and summarized below.

Table 3: Match Requirements in the AmeriCorps Regulations

Competition	Match Requirement
AmeriCorps*State Operational Programs	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.

- If you are applying for the first time, you must match with cash or in-kind contributions at least 24% of the program's total Operating Costs (Section I) plus Member Costs (Section II) plus Administrative Costs (Section III). If you are recompeting, please see 45 CFR 2521.40-2521.95 for the match schedule.
- The acceptable sources of matching funds are federal* (see following note), state, local, private sector, and/or other funds in accordance with applicable AmeriCorps requirements.
- In Section III of the budget, enter a brief description of the source of match. Identify each match source separately. Include dollar amount, the match classification (cash, in-kind, or Not Available) and the source type (Private, State/Local, Federal, Other or Not Available). Define all acronyms the first time they are used.

***Note*:** The CNCS legislation permits the use of non-CNCS federal funds as match for the grantee share of the budget. Please discuss your intention of using federal funds to match an AmeriCorps grant with the other agency prior to submitting your application. Section 121(e)(5) of the National Community Service Act requires that grantees that use other federal funds as match for an AmeriCorps grant report the amount and source of these funds. If you use other federal funds as match, you must ensure you can meet the requirements and purpose of both grants. The Federal Financial Report (FFR) will be used to collect the federal match data. Grantees that use federal funds as match will be required to report the sources and amounts on the FFR.

D. Preparing Your Budget

Your proposed budget should be sufficient to allow you to perform the tasks described in your 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 in Attachment A, Exhibits D and E to prepare your budget. We recommend that you prepare your budget in the same order as indicated in the Budget Worksheets in Exhibits D and E.

As you enter your detailed budget information, eGrants will automatically populate a budget summary and budget narrative report. Prior to submission be sure to review the budget checklist to ensure your budget is compliant. In addition, eGrants will perform a limited compliance check to validate the budget. If it finds any compliance issues you will receive a warning and/or error messages. You must resolve all errors before you can submit your budget.

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.
- Itemize each cost and 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 expending over $500,000 in federal funds, as required in OMB Circular A-133.

VII. 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 (Exhibit K). 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. An Authorized Representative is the person in your organization authorized to accept and commit funds on behalf of the organization. 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 ensure 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 his/her eGrants account and

proceed with Authorize and Submit. After signing off on the Authorization, Assurances, and Certifications, his/her name will override any previous signatory that may appear and show on the application as the Authorized Representative.

Note: Anyone within your organization who will be entering information in the application at any point during application preparation and submission in the eGrants system must have their own eGrants account. Individuals may establish an eGrants account by accessing this link: https://egrants.cns.gov/espan/main/login.jsp and selecting "Don't have an eGrants account? Create an account."

VIII. Survey on Ensuring Equal Opportunity for Applicants

CNCS 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 CNCS 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 example 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 in 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 example form can be found in Exhibit N.

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

1. To complete the survey while preparing your application in eGrants, go to the Main Menu, select Enter Survey on Ensuring Equal Opportunity, provide the 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.

Program Specific Requirements

The following restrictions and requirements shall apply to all applications:

I. The Governor's Office for Children, Youth and Families shall be responsible for overall management of the AmeriCorps*State Operational Program. Awardees will be provided a contact name and number for staff responsible for management of this program. Program monitoring will be the responsibility of the Governor's Office for Children, Youth and Families and fiscal monitoring will be the responsibility of the Governor's Accounting Office.

II. Keep a copy of this solicitation and your grant application. If awarded, the Subgrantee shall be bound to the services listed in the grant application and based upon the solicitation, including all terms, conditions, specifications, amendments, etc.

III. No construction costs are permitted.

IV. The Subgrantee shall submit quarterly progress narrative program reports. The reports shall be due and shall contain such information as deemed necessary by the Governor's Office for Children, Youth and Families. Failure to submit timely reports may result in suspension of reimbursement.

V. The Subgrantee shall notify the Governor's Office for Children, Youth and Families in writing, **thirty (30) calendar days in advance**, of any changes in the program that will directly affect service delivery under the terms of the contract. No changes shall be implemented without the prior written approval of a formal contract amendment issued by the Governor's Office for Children, Youth and Families.

VI. The Subgrantee shall be paid on a cost-reimbursement basis. The Subgrantee shall not request reimbursement until the cost has resulted in an actual cash expenditure. The Subgrantee may request reimbursement on either a monthly or quarterly basis for those items submitted and approved in the budget inclusively. **Subgrantee shall submit a final reimbursement request no more than for thirty (30) days after the contract end for expenses obligated prior to the date of contract termination.** All expenses must be paid prior to the final reimbursement request. Requests for reimbursement received later than thirty (30) days after the contract termination will not be paid. **If awarded a contract, your organization must have sufficient funds to meet obligations for up to sixty (60) days while awaiting reimbursements from the Governor's Office for Children, Youth and Families.**

VII. Financial reimbursements must be sent to:

Kristen Lannes
Lead Grants Auditor
Governor's Accounting Office
1700 West Washington, Suite 314
Phoenix, Arizona 85007

VIII. Programmatic reports and requests for program and budget changes must be sent to:

Patsy Kraeger,
AmeriCorps*State Program Administrator
Governor's Office for Children, Youth and Families
1700 West Washington, Suite 101
Phoenix, Arizona 85007

IX. Notwithstanding any other payment provision of this contract, failure of the Subgrantee to submit required reports when due, or failure to perform or deliver required work, supplies, or services, will result in the withholding of payment under this contract unless such failure arises due to causes beyond the control and without the fault of negligence of the Subgrantee.

X. Each successful applicant who is awarded $25,000 or more must provide the following prior to a contract being executed: (a) Dun and Bradstreet Universal Numbering System (DUNS) number for the fiscal agent; and (b) proof of current registration in the Central Contractor Registration (CCR) database. Additionally, CCR registration must be maintained for the term of the contract. The DUNS website is located at

http://fedgov.dnb.com/webform. The CCR registration information may be found at https://www.bpn.gov/ccr/default.aspx.

XI. An Applicant who takes exception to any portion of the solicitation must do so pursuant to the Uniform Instructions to Offeror. If the Applicant is taking exception to a section or sections of the Solicitation, the Applicant shall designate a section in the application entitled "Exceptions." Taking exception to the terms and conditions of the solicitation may result in an application receiving a lower evaluation score. Low evaluation scores may result in the application being determined not susceptible of award. Any exception to the terms and conditions should provide sufficient justification to detail the reason the exception is advantageous to the Governor's Office for Children, Youth, and Families and the State of Arizona.

Terms and Conditions

I. Term of Contract: The term of the contract shall commence September 1, 2012 and shall remain in effect until August 31, 2013 contingent upon final federal award, unless terminated, canceled or extended as otherwise provided herein. This is a twelve month contract with renewable options for two additional twelve month contracts, contingent upon the availability of funds. Consideration for renewal will also be based on results of program and fiscal monitoring.

II. Documents Incorporated by Reference: The State of Arizona's Uniform Instructions to Offerors (Rev 8) and Uniform Terms and Conditions (Rev 8) are incorporated into this Contract as if fully set forth herein. Applicants are encouraged to obtain these documents. Applicants may obtain copies by visiting the Arizona State Procurement Office website at http://spo.az.gov/Admin_Policy/SPM/Forms/default.asp.

III. Subgrantee Assurances: Subgrantee agrees to comply with all applicable Federal statutes, regulations, policies, guidelines, and requirements, including administrative requirements with the use of this funding. The Governor's Office for Children, Youth and Families will provide the financial, programmatic and administrative guidelines and statutory program purposes for the CNCS AmeriCorps*State Operational Grant Program funding, including guidelines for requirements of the Edward M. Kennedy Serve America Act, as amended. The Subgrantee agrees to comply with all lawful requirements imposed by the Grantor in the administration of these grant funds. General information on program guidance may be found at http://nationalservice.gov/about/open/grants.asp.

IV. Funding: Requested funding must be submitted in an all-inclusive basis. The Governor's Office for Children, Youth and Families will only reimburse costs included on the Subgrantee's approved budget.

V. Contract Renewal: The contract shall not bind nor purport to bind the Governor's Office for Children, Youth and Families for any contractual commitment in excess of the original contract period or amount. **The Governor's Office for Children, Youth and Families shall have the right, at its sole option, to renew the contract.**

VI. Key Personnel: It is essential that the Subgrantee provide an adequate staff of experienced personnel, capable of and devoted to the successful accomplishment of

work to be performed under this contract. The Subgrantee must assign specific individuals to the key programmatic and fiscal positions.

VII. Multiple Awards: In order to ensure adequate coverage of the Governor's Office for Children, Youth and Families requirements, multiple awards may be made.

VIII. Audit of Records: In accordance with A.R.S. §35-214 and §35-215, the Subgrantee shall retain and shall contractually require each subcontractor to retain all data, books and other records ("records") relating to this Contract for a period of five years after completion of the Contract. All records shall be subject to inspection and audit by the State or Federal Government at reasonable times. Upon request, the Subgrantee shall produce the original of any or all such records. Copies shall be produced upon request.

IX. Single Audit: In compliance with the Federal Single Audit Act (31 U.S.C. par., 7501-7507), as amended by the Single Audit Act Amendments of 1996 (P.L. 104 to 156), grant sub-recipients expending $500,000 or more of Federal funds from all sources during the organization's fiscal year, must have an annual audit conducted in accordance with OMB Circular #A-133, "Audits of States, Local Governments and Non-profit Organizations."

- If your organization is subject to the requirements of the A-133 Single Audit Act, then attach two copies of your organization's most recently completed A-133 Single Audit with the Management Letter, Findings and Questioned Costs to the completed application.

- If your organization is not subject to A-133, submit two copies of the most recently completed audit of financial statements, with the Management Letter, Findings and Questioned Costs.

- If your organization does not have a recently completed audit, attach the most recently prepared financial statements including a Balance Sheet, Income Statement, and Statement of Cash Flows along with a description of the source of the documents.

X. Monitoring Requirements: Subgrantee acknowledges that requirements may change as governmental regulations change and assures that it will comply with applicable reporting and operational requirements related to the programmatic and financial performance of this grant.

XI. Audit Trails: Subgrantee shall maintain proper audit trails for all reports related to this contract. The Governor's Office for Children, Youth and Families reserves the right to review all program records, including fiscal and programmatic records.

XII. Fund Management: The Subgrantee must maintain funds received under this contract in separate ledger accounts and cannot mix these funds with other sources. Subgrantee must manage funds according to applicable federal regulations for administrative requirements, cost principles and audits.

The Subgrantee must maintain adequate business systems to comply with Federal requirements. The business systems that must be maintained are:

a. Financial Management
b. Procurement
c. Personnel
d. Property
e. Travel

A system is adequate if it is: 1) ***written***; 2) ***consistently followed*** – it applies in all similar circumstances; and 3) ***consistently applied*** – it applies to all sources of funds. The Governor's Office for Children, Youth and Families reserves the right to review all business systems policies.

XIII. Non-Discrimination/Civil Rights: All parties to this agreement agree to comply with Title VII of the Civil Rights Act of 1964, as amended and State Executive Order No. 09-09, which mandates that all persons, regardless of race, religion, color, age, sex, or national origin shall have equal access to employment opportunities. All parties shall comply with federal regulations that prohibit discrimination in the employment or advancement in employment of qualified persons because of physical or mental handicap. All parties shall comply with all applicable federal regulations regarding equal employment opportunity and relevant orders issued by the U.S. Secretary of Labor. Subgrantee agrees to comply, and will require any subcontractor(s) to comply with any Federal nondiscrimination requirements, which may include: Omnibus Crime Control and Safe Streets Act (Safe Streets Act) of 1968 (42 U.S.C. §3789d); the Victims of Crime Act (42 U.S.C. §10604(e)); the Juvenile Justice and Delinquency Prevention Act of 2002 (42 U.S.C. §5672(b)); the Civil Rights Act of 1964 (42 U.S.C. §2000d); Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. §794); Title II of the Americans with Disabilities Act of 1990 (42 U.S.C. §§12132); Title IX of the Education Amendments of 1972 (20 U.S.C. §1681); the Age Discrimination Act of 1975 (42 U.S.C. §6102); 28 C.F.R. pt. 35 (DOJ Regulations- Nondiscrimination on the Basis of Disability in State and Local Government Services); 28 C.F.R. pt. 42 (DOJ Regulations- Nondiscrimination; Equal Employment Opportunity; Policies and Procedures); Executive Order 13279 (equal protection of the laws for faith-based and community organizations); and 28 C.F.R. pt. 38 (DOJ Regulations- Equal Treatment for Faith-Based Organizations).

In accordance with A.R.S. §41-1461 et seq., Subgrantee shall provide equal employment opportunities for all persons, regardless of race, color, creed, religion, sex, age, national origin, disability or political affiliation. Subgrantee shall comply with the Americans with Disabilities Act.

XIV. Compliance With Applicable Laws: All parties to this agreement shall comply with all applicable federal, state and local laws.

XV. Licenses: Subgrantee shall maintain in current status all federal, state, and local licenses and permits required for the operation of the business conducted by the Subgrantee.

XVI. Amendments: Any change in the contract, including changes to the scope of work and/or material budget changes described herein, whether by modification or supplementation, must be accomplished by a formal contract amendment signed and approved by and between the duly authorized representatives of the Subgrantee and the

Governor's Office for Children, Youth and Families. The Governor's Office for Children, Youth and Families may approve or reject any request for an amendment, when necessary. Any such amendment shall specify an effective date, any increases or decreases in the amount of the Subgrantee's compensation, if applicable, and entitled as an "Amendment" and signed by the parties identified in the preceding sentence. The Subgrantee expressly and explicitly understands and agrees that no other method and/or no other document, including correspondence, acts, and oral communications by or from any person, shall be used or construed as an amendment or modification or supplementation to the contract.

XVII. Availability of Funds for the Next Fiscal Year: In accordance with A.R.S. §35-154, every payment obligation of the State under the Contract is conditioned upon the availability of funds appropriated or allocated for payment of such obligation. If funds are not allocated and available for the continuance of this Contract, this Contract may be terminated by the State at the end of the period for which funds are available. No liability shall accrue to the State in the event this provision is exercised, and the State shall not be obligated or liable for any future payments or for any damages as a result of termination under this paragraph, including purchases and/or contracts entered into by the Subgrantee in support of this Agreement. The Governor's Office for Children, Youth and Families obligation for performance of this contract beyond this fiscal year is contingent upon the availability of funds from which payment for contract purposes can be made and based on program performance.

XVIII. Subcontractors: The Subgrantee agrees and understands that <u>no</u> <u>subcontract</u> which the Subgrantee enters into with respect to performance under this contract shall in any way relieve the Subgrantee of any responsibility for performance of its duties. Notwithstanding anything to the contrary contained in this Agreement, the Subgrantee is not an employee or agent of the Governor's Office for Children, Youth and Families. In the event the Subgrantee elects to retain a subcontractor, the Subgrantee hereby agrees to hold harmless, indemnify and defend the Governor's Office for Children, Youth and Families, the State of Arizona, their officers, agents, employees, successors and assigns for any payment, loss, claim or liability including but not limited to, attorney fees associated with any subcontract entered into by the Subgrantee. **It is highly recommended by the Governor's Office for Children, Youth and Families that a Memorandum of Understanding or some other type of contract is in place between the Subgrantee and a Subcontractor for services to be performed, and in which a payment amount has been negotiated and approved, so as to avoid any misunderstanding between both parties**.

XIX. Paragraph Headings: The descriptive headings of this Contract are inserted for convenience only and shall not control or affect the meaning or construction of any of the provisions in this Contract.

XX. No Waiver: Either party's failure to insist on strict performance of any term or condition of the Agreement shall not be deemed a waiver of that term or condition even if the party accepting or acquiescing in the nonconforming performance knows of the nature of the performance and fails to object to it.

XXI. Force Majeure: If either party hereto is delayed or prevented from the performance of any act required in this Agreement by reason of acts of god, strikes, lockouts, labor disputes, civil disorder, or other causes without fault and beyond the control of the party

obligated, performance of or payment for such act will be excused for the period of the delay.

XXII. Offshore Performance of Work Prohibited: Any services that are described in the specifications or scope of work that directly serve the State of Arizona or its clients and involve access to secure or sensitive data or personal client data shall be performed within the defined territories of the United States. Unless specifically stated otherwise in the specifications, this paragraph does not apply to indirect or "overhead" services, redundant back-up services or services that are incidental to the performance of the contract. This provision applies to work performed by subcontractors at all tiers. Applicants shall declare all anticipated offshore services in the application.

XXIII. Arbitration: In accordance with A.R.S. §12-1518, the parties agree to resolve all disputes arising out of or relating to this Contract through arbitration, after exhausting applicable administrative review except as may be required by other applicable statutes (Title 41).

XXIV. Partial Invalidity: Any term or provision of this Agreement that is hereafter declared contrary to any current or future law, order, regulation or rule, or which is otherwise invalid, shall be deemed stricken from this Agreement without impairing the validity of the remainder of this Agreement.

XXV. Governing Law: This Agreement shall be governed and interpreted by the laws of the State of Arizona. The venue for any proceedings, actions, or suits arising from this Agreement shall be in Maricopa County, Arizona.

XXVI. Authority to Execute this Contract: Each individual executing this Contract on behalf of the Subgrantee represents and warrants that he or she is duly authorized to execute this Contract.

XXVII. Entire Contract: This Contract and its Exhibits/Attachments constitute the entire Contract between the parties hereto pertaining to the subject matter hereof and may not be changed or added to except by a writing signed by all parties hereto in conformity with Terms and Conditions, Section XVI, Amendments of this Contract; provided, however, that the Governor's Office for Children, Youth and Families shall have the right to immediately amend this Contract so that it complies with any new legislation, laws, ordinances, or rules affecting this Contract. The Subgrantee agrees to execute any such amendment within ten (10) business days of its receipt. All prior and contemporaneous agreements, representations, and understandings of the parties, oral or written, pertaining to the subject matter hereof, are hereby superseded or merged herein.

XXVIII. Assignment and Delegation: Subgrantee may not assign any rights hereunder without the express, prior written consent of both parties.

XXIX. Indemnification: Subgrantee shall indemnify, defend, save and hold harmless the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees (hereinafter referred to as "Indemnitee") from and against any and all claims, actions, liabilities, damages, losses, or expenses (including court costs, attorneys' fees, and costs of claim processing, investigation and litigation) (hereinafter referred to as "Claims") for bodily injury or personal injury (including death), or loss or damage to tangible or intangible property caused, or alleged to be caused, in

whole or in part, by the negligent or willful acts or omissions of Subgrantee or any of its owners, officers, directors, agents, employees or subcontractors. This indemnity includes any claim or amount arising out of or recovered under the Workers' Compensation Law or arising out of the failure of such Subgrantee to conform to any federal, state or local law, statute, ordinance, rule, regulation or court decree. It is the specific intention of the parties that the Indemnitee shall, in all instances, except for Claims arising solely from the negligent or willful acts or omissions of the Indemnitee, be indemnified by Subgrantee from and against any and all claims. It is agreed that Subgrantee will be responsible for primary loss investigation, defense and judgment costs where this indemnification is applicable. In consideration of the award of this contract, the Subgrantee agrees to waive all rights of subrogation against the State of Arizona, its officers, officials, agents and employees for losses arising from the work performed by the Subgrantee for the State of Arizona.

XXX. Public Agency Language Only - Indemnification: Each party (as "Indemnitor") agrees to indemnify, defend, and hold harmless the other party (as "Indemnitee") from and against any and all claims, losses, liability, costs, or expenses (including reasonable attorney's fees) (hereinafter collectively referred to as "Claims") arising out of bodily injury of any person (including death) or property damage, but only to the extent that such Claims which result in vicarious/derivative liability to the Indemnitee are caused by the act, omission, negligence, misconduct, or other fault of the Indemnitor, its officers, officials, agents, employees, or volunteers.

In addition, the other governmental entity shall cause its contractor(s) and subcontractors, if any, to indemnify, defend, save and hold harmless the State of Arizona, any jurisdiction or agency issuing any permits for any work arising out of this Agreement, and their respective directors, officers, officials, agents, and employees (hereinafter referred to as "Indemnitee") from and against any and all claims, actions, liabilities, damages, losses, or expenses (including court costs, attorneys' fees, and costs of claim processing, investigation and litigation) (hereinafter referred to as "Claims") for bodily injury or personal injury (including death), or loss or damage to tangible or intangible property caused, or alleged to be caused, in whole or in part, by the negligent or willful acts or omissions of the other governmental entity's contractor or any of the directors, officers, agents, or employees or subcontractors of such contractor. This indemnity includes any claim or amount arising out of or recovered under the Workers' Compensation Law or arising out of the failure of such contractor to conform to any federal, state or local law, statute, ordinance, rule, regulation or court decree. It is the specific intention of the parties that the Indemnitee shall, in all instances, except for Claims arising solely from the negligent or willful acts or omissions of the Indemnitee, be indemnified by such contractor from and against any and all claims. It is agreed that such contractor will be responsible for primary loss investigation, defense and judgment costs where this indemnification is applicable.

XXXI. Insurance Requirements: The Subgrantee and subcontractors shall procure and maintain until all of their obligations have been discharged, including any warranty periods under this Contract, are satisfied, insurance against claims for injury to persons or damage to property which may arise from or in connection with the performance of the work hereunder by the Subgrantee, his agents, representatives, employees or subcontractors.

The insurance requirements herein are minimum requirements for this Contract and in

no way limit the indemnity covenants contained in this Contract. The State of Arizona in no way warrants that the minimum limits contained herein are sufficient to protect the Subgrantee from liabilities that might arise out of the performance of the work under this contract by the Subgrantee, its agents, representatives, employees or subcontractors, and Subgrantee is free to purchase additional insurance.

A. MINIMUM SCOPE AND LIMITS OF INSURANCE

Subgrantee shall provide coverage with limits of liability not less than those stated below. Within ten (10) business days following notification of award, certificates of insurance must be submitted to the Governor's Office for Children, Youth and Families, clearly stating the applicable contract number, effective date(s) of coverage, and limits of liability required pursuant to the contract.

1. Commercial General Liability – Occurrence Form

Policy shall include bodily injury, property damage, personal injury and broad form contractual liability coverage.

• General Aggregate	$2,000,000
• Products – Completed Operations Aggregate	$1,000,000
• Personal and Advertising Injury	$1,000,000
• Blanket Contractual Liability – Written and Oral	$1,000,000
• Fire Legal Liability	$ 50,000
• Each Occurrence	$1,000,000

a. The policy shall be endorsed to include the following additional insured language: "The State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees shall be named as additional insureds with respect to liability arising out of the activities performed by or on behalf of the Subgrantee".

b. Policy shall contain a waiver of subrogation against the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Subgrantee.

2. Business Automobile Liability

Bodily Injury and Property Damage for any owned, hired, and/or non-owned vehicles used in the performance of this Contract.

Combined Single Limit (CSL)	$1,000,000

a. The policy shall be endorsed to include the following additional insured language: "The State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees shall be named as additional insureds with respect to liability arising out of the activities performed by or on behalf of the Subgrantee, involving automobiles owned, leased, hired or borrowed by the Subgrantee".

b. Policy shall contain a waiver of subrogation against the State of Arizona,

its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Subgrantee.

3. Worker's Compensation and Employers' Liability

Workers' Compensation
Employers' Liability

Each Accident	$ 500,000
Disease – Each Employee	$ 500,000
Disease – Policy Limit	$1,000,000

a. Policy shall contain a waiver of subrogation against the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Subgrantee.

b. This requirement shall not apply to: Separately, EACH Subgrantee or subcontractor exempt under A.R.S. §23-901, AND when such Subgrantee or subcontractor executes the appropriate waiver (Sole Proprietor/Independent Contractor) form.

4. Professional Liability (Errors and Omissions Liability)

Each Claim	$1,000,000
Annual Aggregate	$2,000,000

a. In the event that the professional liability insurance required by this Contract is written on a claims-made basis, Subgrantee warrants that any retroactive date under the policy shall precede the effective date of this Contract; and that either continuous coverage will be maintained or an extended discovery period will be exercised for a period of two (2) years beginning at the time work under this Contract is completed.

b. The policy shall cover professional misconduct or lack of ordinary skill for those positions defined in the Scope of Work of this contract.

B. ADDITIONAL INSURANCE REQUIREMENTS

The policies shall include, or be endorsed to include, the following provisions:

1. The State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees wherever additional insured status is required such additional insured shall be covered to the full limits of liability purchased by the Subgrantee, even if those limits of liability are in excess of those required by this Contract.
2. The Subgrantee's insurance coverage shall be primary insurance with respect to all other available sources.
3. Coverage provided by the Subgrantee shall not be limited to the liability assumed under the indemnification provisions of this Contract.

C. NOTICE OF CANCELLATION

With the exception of ten (10) day notice of cancellation for non-payment of premium, any changes material to compliance with this contract in the insurance policies above shall require thirty (30) days written notice. Each insurance policy required by the insurance provisions of this Contract shall provide the required coverage and shall not be suspended, voided, canceled, or reduced in coverage or in limits except after thirty (30) days prior written notice has been given to the State of Arizona. Such notice shall be sent directly to **(Governor's Office for Children, Youth & Families, Sarah Bean, Procurement Manager, 1700 West Washington, Suite 101, Phoenix, AZ 85007)** and shall be sent by certified mail, return receipt requested.

D. ACCEPTABILITY OF INSURERS

Insurance is to be placed with duly licensed or approved non-admitted insurers in the state of Arizona with an "A.M. Best" rating of not less than A- VII. The State of Arizona in no way warrants that the above-required minimum insurer rating is sufficient to protect the Subgrantee from potential insurer insolvency.

E. VERIFICATION OF COVERAGE

Subgrantee shall furnish the State of Arizona with certificates of insurance (ACORD form or equivalent approved by the State of Arizona) as required by this Contract. The certificates for each insurance policy are to be signed by a person authorized by that insurer to bind coverage on its behalf.

All certificates and endorsements are to be received and approved by the State of Arizona before work commences. Each insurance policy required by this Contract must be in effect at or prior to commencement of work under this Contract and remain in effect for the duration of the program. Failure to maintain the insurance policies as required by this Contract, or to provide evidence of renewal, is a material breach of contract.

All certificates required by this Contract shall be sent directly to **(Governor's Office for Children, Youth & Families, Sarah Bean, Procurement Manager, 1700 West Washington, Suite 101, Phoenix, AZ 85007)**. The Governor's Office for Children, Youth and Families project/contract number and project description shall be noted on the certificate of insurance. The State of Arizona reserves the right to require complete, certified copies of all insurance policies required by this Contract at any time**. DO NOT SEND CERTIFICATES OF INSURANCE TO THE STATE OF ARIZONA'S RISK MANAGEMENT SECTION.**

F. SUBCONTRACTORS

Subgrantees' certificate(s) shall include all subcontractors as insureds under its policies **or** Subgrantee shall furnish to the State of Arizona separate certificates and endorsements for each subcontractor. All coverages for subcontractors shall be subject to the minimum requirements identified above.

G. APPROVAL

Any modification or variation from the *insurance requirements* in this Contract shall be made by the Department of Administration, Risk Management Section, whose decision shall be final. Such action will not require a formal Contract amendment, but may be made by administrative action.

H. EXCEPTIONS

In the event the Subgrantee or subcontractor(s) is/are a public entity, then the Insurance Requirements shall not apply. Such public entity shall provide a Certificate of Self-Insurance. If the Subgrantee or subcontractor(s) is/are a State of Arizona agency, board, commission, or university, none of the above shall apply.

XXXII. Confidentiality of Records: Subgrantee shall establish and maintain procedures and controls that are acceptable to the Governor's Office for Children, Youth and Families for the purpose of assuring that no information contained in its records or obtained from others in carrying out its functions under the contract shall be used by or disclosed by it, its agents, officers, or employees, except as required to efficiently perform duties under the contract. Persons requesting such information shall be referred to the Governor's Office for Children, Youth and Families. The Subgrantee also agrees that any information pertaining to individual persons shall not be divulged other than to employees or officers of the Subgrantee as needed for the performance of duties under the contract, unless otherwise agreed to in writing by the State.

XXXIII. Confidential Information: If a person believes that any portion of a proposal, bid, offer, application, specification, protest or correspondence contains information that should be withheld, then the Procurement Manager for the Governor's Office for Children, Youth and Families shall be so advised in writing (price is not confidential and will not be withheld). Such material shall be identified as confidential wherever it appears. The State, pursuant to A.A.C. R2-7-103, shall review all requests for confidentiality and provide a written determination. If the confidential request is denied, such information shall be disclosed as public information, unless the person utilizes the "Protest" provision as noted in A.R.S. §41-2611 through §41-2616.

XXXIV. Cancellation: The Governor's Office for Children, Youth and Families reserves the right to cancel the whole or any part of the contract due to failure of the Subgrantee to carry out any term, promise, or condition of the contract. The Governor's Office for Children, Youth and Families will issue a written ten (10) day notice of default to the Subgrantee for acting or failing to act as in any of the following:

- The Subgrantee provides personnel that do not meet the requirements of the contract.
- The Subgrantee fails to perform adequately the services required in the contract.
- The Subgrantee attempts to impose on the Governor's Office for Children, Youth and Families, personnel that are of an unacceptable quality.
- The Subgrantee fails to furnish the required product within the time stipulated in the contract.
- The Subgrantee fails to make progress in the performance of the requirements of the contract and/or gives the Governor's Office for Children, Youth and Families a positive indication that the Subgrantee will not or cannot perform to the requirements of the contract.

If the Subgrantee does not correct the above problem(s) within ten (10) days after receiving the notice of default, The Governor's Office for Children, Youth and Families may cancel the contract. If the Governor's Office for Children, Youth and Families cancels the contract pursuant to this clause, the State reserves all rights or claims to

damage for breach of contract.

XXXV. Cancellation for Conflict of Interest: In accordance with A.R.S. §38-511, the Governor's Office for Children, Youth and Families may within three years after execution cancel the Contract, without penalty or further obligation, if any person significantly involved in initiating, negotiating, securing, drafting or creating the Contract on behalf of the State, at any time while the Contract is in effect, becomes an employee or agent or any other party to the Contract in any capacity or a consultant to any other party of the Contract with respect to the matter of the contract. Such cancellation shall be effective when the parties to the Contract receive written notice from the Governor's Office for Children, Youth and Families, unless the notice specifies a later time.

XXXVI. Termination: The Procurement Manager for the Governor's Office for Children, Youth and Families reserves the right to terminate the contract at any time, for the convenience of the Governor's Office for Children, Youth and Families, without penalty or recourse, by giving written notice to the Subgrantee at least thirty (30) days prior to the effective date of such termination. In the event of termination pursuant to this paragraph, all documents, data, and reports prepared by the Subgrantee under the contract shall, at the option of the Governor's Office for Children, Youth and Families, become property of the State of Arizona. The Subgrantee shall be entitled to receive just and equitable compensation for that work completed prior to the effective date of termination.

XXXVII. Suspension or Debarment Status: If the firm, business or person submitting this bid or offer has been debarred, suspended or otherwise lawfully precluded from participating in any public procurement activity with any federal, state or local government, the applicant must include a letter with its application setting forth the name and address of the governmental unit, the effective date of the suspension or debarment, the duration of the suspension or debarment, and the relevant circumstances relating to the suspension or debarment. Failure to supply the letter or to disclose in the letter all pertinent information regarding a suspension or debarment shall result in rejection of the bid or offer or cancellation of a contract. The Governor's Office for Children, Youth and Families also may exercise any other remedy available by law.

XXXVIII. Suspension or Debarment Certification: By signing the offer section of the Offer and Acceptance page, SPO Form 203, the bidder or offeror certifies that the firm, business or person submitting the bid or offer has not been debarred, suspended or otherwise lawfully precluded from participating in any public procurement activity with any federal, state or local government. Signing the offer section without disclosing all pertinent information about a debarment or suspension shall result in rejection of the bid or offer or cancellation of a contract. The Governor's Office for Children, Youth and Families also may exercise any other remedy available by law.

XXXIX. Restrictions on Lobbying: The Subgrantee shall not use these funds to pay for, influence, or seek to influence any officer or employee of the State of Arizona or the federal government if that action may have an impact, of any nature, on this agreement.

XL. Fingerprinting: The provisions of A.R.S. §46-141 are hereby incorporated as provisions of this contract as they pertain to any new personnel not already covered by this requirement. When applicable, the Subgrantee shall assume the costs of fingerprint checks and may charge these costs to fingerprint its personnel. The department may

allow all or part of the costs of fingerprint checks to be included as an allowable cost in a contract.

Personnel who are employed by any Subgrantee, whether paid or not, and who are required or allowed to provide services directly to juveniles shall certify on forms provided by the Department of Public Safety and notarized whether they have ever committed any act of sexual abuse of a child, including sexual exploitation and commercial sexual exploitation, or any act of child abuse. This contract may be canceled or terminated if the fingerprint check or the certified form of any person who is employed by a Subgrantee, whether paid or not, and who is required or allowed to provide services directly to juveniles discloses that a person has committed any act of sexual abuses of a child, including sexual exploitation or commercial sexual exploitation, or any act of child abuse or that the person has been convicted of or awaiting trial on any of the following criminal offenses in this state or similar offenses in another state or jurisdiction.

XLI. Sectarian Requests: Funds may not be expended for any sectarian purpose or activity, including sectarian worship or instruction.

XLII. Ownership of Information: The Governor's Office for Children, Youth and Families reserves the right to review and approve any publications funded or partially funded through this contract. Any materials, including reports, computer programs and other deliverables, created under this Agreement are the sole property of the State of Arizona. The Contractor is not entitled to a patent or copyright on those materials and may not transfer the patent or copyright to anyone else.

XLIII. All publications funded or partially funded through this contract shall recognize the Corporation for National and Community Service and the Governor's Office for Children, Youth and Families as the funding source.

XLIV. Counterparts: This Contract may be executed in any number of counterparts, copies, or duplicate originals. Each such counterpart, copy, or duplicate original shall be deemed an original, and collectively they shall constitute one Contract.

XLV. Federal Immigration and Nationality Act: The Subgrantee shall comply with all federal, state and local immigration laws and regulations relating to the immigration status of their employees during the term of the contract. Further, the Subgrantee shall flow down this requirement to all subcontractors utilized during the term of the contract. The State shall retain the right to perform random audits of the Subgrantee and subcontractor records or to inspect papers of any employee thereof to ensure compliance. Should the State determine that the Subgrantee and/or any subcontractors be found noncompliant, the State may pursue all remedies allowed by law, including, but not limited to: suspension of work, termination of the contract for default and suspension and/or debarment of the Subgrantee.

XLVI. E-Verify Requirements: To the extent applicable under A.R.S. §41-4401, the Subgrantee and its subcontractors warrant compliance with all federal immigration laws and regulations relating to employees and warrants its compliance with Section A.R.S. §23-214, Subsection A. The Subgrantee shall require all subcontractors to abide by this provision during the term of the Contract.

Exhibits and Attachments:

- Exhibit A: Checklist
- Exhibit B: Sample SF 424 Facesheet
- Exhibit C: Funds Requested Page
- Exhibit D: Budget Worksheet (eGrants Budget Narrative Section)
- Exhibit E: Budget Checklist
- Exhibit F: Disclosure Form of Other Funding Sources
- Exhibit G: Issue Areas & Service Categories (eGrants Performance Measures Section)
- Exhibit H: Personnel Staff Overview
- Exhibit I: GOCYF Standard Data Collection Form
- Exhibit J: GOCYF Financial Systems Survey
- Exhibit K: Assurances and Certifications (eGrants Section)
- Exhibit L: Civil Rights Checklist
- Exhibit M: Survey on Ensuring Equal Opportunity for Applicants

- Attachment A: Detailed Budget Instructions (EGrants Budget Section)
- Attachment B: Sample Certificate of Insurance
- Attachment C: Facesheet Instructions(eGrants Applicant Info and Application Info Sections)
- Attachment D: National Performance Measures
- Attachment E: Performance Measures Instructions (eGrants Section)
- Attachment F: Alternative Match Instructions
- Attachment G: Beale Codes and County-Level Economic Data

EXHIBIT A
Checklist

The AmeriCorps*State Operational Grant Program

RFGA No. **AC -VSG-13-3273-00**

Name of Organization:_____

Applications missing exhibits, solicitation amendments, financial documents, and any stated requirements presented in this RFGA shall be deemed non-responsive. Non-responsive applications are not susceptible for award and shall not be evaluated.

Checklist:

Use the following list to make sure your Grant Application for the AmeriCorps*State Operational Grant Program is complete and meets the requirements specified in this request for grant applications:

Checklist, signed and attached, Exhibit A.

- ❑ **One (1) original document marked "ORIGINAL", and eight (8) additional copies.**
- ❑ Page numbers are included on all pages, in sequence and a table of contents is included with page numbers referenced.
- ❑ Applications should be in twelve point font or larger, single-spaced, with one inch margins or wider and single sided, NOT duplexed. This will not apply to eGrants documents which are submitted as part of the application.
- ❑ All original documents requiring signatures should have **ORIGINAL** signatures. The photocopies do not require original signatures.
- ❑ Do **NOT** bind your application in spiral binders or in 3-ring notebooks. Please submit your applications either stapled in the upper left-hand corner or use a binder clip.
- ❑ When submitting your application, ensure your organization name and the Request for Grant Application Number **AC-VSG-13-3273-00** is **CLEARLY** marked on the outside of the **SEALED** envelope/package.
- ❑ All applications are date stamped by the time clock in the Governor's Office for Children, Youth and Families, 1700 W. Washington, Suite 101, Phoenix, AZ 85007.
    - It is the responsibility of each applicant to ensure their application is delivered to the Governor's Office for Children, Youth, and Families **by the due date and time**. Allow for such contingencies as heavy traffic, weather, directions, parking, security, etc. Verify that your express delivery service provider delivers packages directly into Suite 101.

- Applicants are cautioned not to rely on next day U.S. Postal mail services. Mail sent to the Governor's Office for Children, Youth and Families is filtered through the Arizona Department of Administration. The GOCYF is not responsible for packages delivered to locations other than the Governor's Office for Children, Youth and Families, 1700 W. Washington, Suite 101, Phoenix, AZ 85007.

- ❑ Completed and signed Offer and Acceptance Form (SPO form 203)(RFGA, page 3).

- ❑ Solicitation Amendment(s), signed and submitted, if issued.

- ❑ **Signed**, application in eGrants which has been printed, including:

  - ❑ SF 424 Facesheet, Exhibit B (eGrants example)
  - ❑ Applicant Info
  - ❑ Narratives
  - ❑ Performance Measures, Exhibit H (eGrants example)
  - ❑ Budget, Exhibit D and Exhibit E (eGrants example)
  - ❑ Budget Narrative, Exhibit D (eGrants example)
  - ❑ Review, Authorize, and Submit
  - ❑ Survey on Ensuring Equal Opportunity for Applicants , Exhibit M
  - ❑ Assurances and Certifications, Exhibit K

  PLEASE NOTE: The final, submitted printout of the application from eGrants **will not** have the word DRAFT printed across the top of each page.

- ❑ Funds requested page, completed, signed and attached, Exhibit C.

- ❑ Disclosure Form of Other Funding Sources, Exhibit F.

- ❑ Issue Area & Service Categories (eGrants Performance Measures Section), Exhibit G.

- ❑ Personnel Staff Overview, completed and attached, Exhibit H Resumes and/or job descriptions and Organization Chart attached.

- ❑ GOCYF Standard Data Collection Form, completed and attached, Exhibit I.

- ❑ GOCYF Financial Systems Survey, completed and attached, Exhibit J.

- ❑ Assurances for Non-Construction Programs, signed and attached, Exhibit K.

- ❑ Civil Rights Compliance Checklist, completed and attached, Exhibit L

- ❑ Proof of current registration in the Central Contractor Registration database.

- ❑ Additional Documents including (indicate N/A if not applicable in blank provided):
  - ❑ Evaluation Labor Union Concurrence _____
  - ❑ Federally-approved Indirect Cost Agreement _____
  - ❑ Delinquency on Federal Debt _____
  - ❑ Alternative Match Request _____

(If these documents are not applicable then do not submit. Please refer to the relevant sections in the RFGA to determine if needed for this application)

- ❑ If your organization is subject to the requirements of the A-133 Single Audit Act, submit two copies of your organizations most recently completed A-133 Single Audit with the Management Letter, Findings and Questioned Costs.

OR:

- ❑ If your organization is not subject to A-133, submit two copies of the most recently completed audited financial statements with the Management Letter, Findings and Questioned Costs.

OR:

- ❑ If your organization does not have a recently completed audit, attach the most recently prepared financial statements including a Balance Sheet, Income Statement, and Statement of Cash Flows along with a description of the source of the documents.

The point of contact concerning this application is referenced on the Offer and Acceptance Form.

_____Date_____

Signature by the Point of Contact for Application

Job Title _____

GOCYF Staff Use Only

Name: _____Date_____

Title: _____

EXHIBIT B: Facesheet Instructions

Standard Form 424 (Rev. 2-2007) 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:
INTERNET E-MAIL ADDRESS:
WEBSITE:

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:

EXHIBIT C
Funds Requested Page

1. The offeror must state a firm, fixed total guaranteed not-to-exceed amount of funds requested for Arizona Governor's Commission on Service and Volunteerism Program.

   $_____Total Funds Requested

2. Are you submitting this application for your proposed program as a faith-based organization?

   ☐ YES ☐ NO

3. What is the target population for your proposed program?

   TARGET POPULATION:_____

4. What number of participants will be served through this program?

   NUMBER TO BE SERVED:_____

5. What is the focus of the program (check all that apply)?

   ☐ Disaster Services

   ☐ Economic Opportunity

   ☐ Education

   ☐ Environmental Stewardship

   ☐ Healthy Futures

   ☐ Veterans and Military Families

6. Select State priority area, if applicable.

   ☐ Service Learning

   ☐ Youth-Adult Partnerships

   ☐ Boomer/Encore

7. Is your proposed program a continuation of an existing AmeriCorps*State program in Arizona?

   ☐ YES ☐ NO

Authorized Signature_____Date_____

Job Title _____

EXHIBIT D
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			

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

Section III. Administrative/Indirect Costs

A. CNCS-fixed Percentage Rate

Purpose	Calculation	Total Amount	CNCS Share	Grantee Share
	Totals			

B. Federally Approved Indirect Cost Rate

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

Source of Match

Source(s), Type, Amount, Intended Purpose				
	Private	**State and/or Local**	**Federal**	**Sources**
In-kind	$	$	$	.
Cash	$	$	$	
Total	$	$	$	

EXHIBIT E
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 __	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 under Staff Travel?
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 that includes the AmeriCorps logo, with the exception of safety equipment?
Yes __ No __	Are all consultant services budgeted below the maximum federal daily rate of $750/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. 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 – CNCS-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 – CNCS 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 submitted to CNCS if multi-state, state or territory without commission or Indian Tribe applicant? 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 does not exceed the federally approved rate, 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 and in the Source of Match field in eGrants?

EXHIBIT F
Disclosure of Other Funding Sources

Please list all other funding that your organization currently receives from State or Public Agencies, Federal Agencies, Non-Profit Organizations, or any other source providing funding **for the proposed program***. Use a continuation sheet if necessary. The following form may be reproduced with word processing software or another form may be created that contains all the information requested.

Type of Funding (Federal, State, local, other)	Received From	Amount	End Date (If Applicable)
TOTAL:			

***This table should include only those funds that will support the program detailed in this application.**

Authorized Signature_____ Date_____

Job Title_____

Exhibit G
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

Exhibit H
Personnel/Staff Overview

The following form may be reproduced with word processing software or another form may be created that contains all the information requested.

In addition to this overview, please attach a resume (for current personnel) or a job description (for positions to be hired) for the key individuals involved in the project.

STAFF MEMBER	BACKGROUND AND EXPERTISE OF PERSONNEL
Name: Title: What percent of time will be spent on this project:	
Name: Title: What percent of time will be spent on this project:	
Name: Title: What percent of time will be spent on this project:	
Name: Title: What percent of time will be spent on this project:	
Name: Title: What percent of time will be spent on this project:	
Name: Title: What percent of time will be spent on this project:	

Exhibit I

Governor's Office for Children, Youth and Families
Standard Data Collection Form for the Grant Management Information System (GIMS)

A. Fiscal Agency Information:

Agency Name_____ Contact Person_____

Address _____ Position _____

Address _____ Email _____

City, State, Zip _____ Phone _____x_____ Fax_____

County _____

Contract Signer_____ Position _____

Address _____ Email _____

Address _____ Phone _____x_____ Fax_____

City, State, Zip _____ County _____

Employer **I**dentification **N**umber: _____ DUNS Number: _____

Agency Classification: _____State Agency _____County Government _____ Local Government _____Schools _____ Tribal

_____ Faith Based _____ Non-Profit _____ Other _____

Have you previously conducted business with the State using this EIN: **Y** **N.** If **NO,** please go to the following website, download the State of Arizona Substitute W-9 Form and submit with your application. http://www.gao.state.az.us/onlineforms

In which Congressional (Federal) District is your agency? Enter District # _____
http://www.azredistricting.org (click on Final Maps)

In which Legislative (State) District is your agency? Enter District # _____
http://www.azredistricting.org (click on Final Maps)

Approximately how much FEDERAL funding will your organization expend in your current fiscal year? $_____

What is your organization's fiscal year-end date? _____

Accounting Method: _____ Cash _____Accrual _____Modified

Is your organization subject to the requirements of an annual independent audit in accordance with OMB Circular A-133? **Y** **N**

Please provide contact information of the audit firm conducting your audit:

Agency _____

Address _____

Phone Number _____

B. Program Agency Information:

Agency Name_____ Contact Person_____

Address _____ Position _____

Address _____ Email _____

City, State, Zip _____ Phone _____x_____ Fax_____

County _____

B. Proposed Program Information / Description:

Amount requesting: _____

Service area of proposed program: _____

Target population of proposed program: _____

Number of participants to be served: _____

Please provide a **brief** description of the **proposed program** in 1 or 2 paragraphs.

FFATA (Federal Funding Accountability and Transparency Act) Reporting Requirements

This section must be completed for any awards greater than or equal to $25,000

Name of Entity Receiving Award	
Amount of Award	
Funding Agency	
CFDA number	
Award Title	

Location: City State Congressional District

DUNS number

1) Is 80% or more of annual gross revenues from Federal awards? Yes No

2) Do you receive $25 million or more annually from Federal awards? Yes No

If you answered Yes to both questions, you must provide the following:

Names and Total Compensation of Top Five paid executives:

1#:	Name		Total Compensation	
2#:	Name		Total Compensation	
3#:	Name		Total Compensation	
4#:	Name		Total Compensation	
5#:	Name		Total Compensation	

EXHIBIT J
Governor's Office for Children, Youth and Families
Financial Systems Survey

Name of Applicant:_____

Please answer every question by filling in the circle next to the correct answer. Attach materials and document comments as required.

As stewards of federal and state funds, the Governor's Office for Children, Youth and Families awards funds to organizations (regardless of how small or large) that are both capable of achieving project goals/objectives and upholding their responsibility for properly managing funds as they achieve those objectives.

This survey will be used primarily for initial monitoring of the organization. This survey may also be used in evaluating the financial capability of the organization in the award process. Deficiencies should be addressed for corrective action and the organization should consider procuring technical assistance in correcting identified problems.

A. GENERAL INFORMATION

1. Has your organization received a Federal or State Grant within the last two years?	o YES o NO
2. Is your organization subject to the requirements of the A-133 Single Audit Act? If yes, please **attach** a complete copy of your A-133 Audit, including, but not limited to, your Management Letter, Findings and Questioned Costs.	o YES o NO
3. If your organization is not subject to the A-133, have your financial statements been audited, reviewed or compiled by an independent Certified Public Accountant within the past two years? If yes, please **attach** a complete copy of the most recent audited, reviewed or compiled financial statements. If no, please attach a copy of the most recently prepared financial statements including a balance sheet, income statement, statement of cash flows and a description of the source of the documents.	o YES o NO
4. Please **attach** a schedule showing the TOTAL federal funds (by granting agency) expended by your agency for the most recent fiscal year. Note: If your organization had an A-133 Single Audit, a copy of the "Schedule of Expenditures for Federal Awards" can be submitted	
5. Has your organization received funding from the Governor's Office for Children, Youth and Families within the past two years? If yes, specify the grant contract numbers:_____ _____ _____ _____	o YES o NO
6. Has your organization been granted tax-exempt status by the Internal Revenue Service?	o YES o NO o N/A
7. If you answered YES to question #6, under what section of the IRS code? O 501 C (3) O 501 C (4) O 501 C (5) O 501 C (6) O Other. Specify:_____	
8. Does your organization have established policies related to salary scales, fringe benefits, travel reimbursement and personnel policies?	o YES o NO

B. FUNDS MANAGEMENT

1. Which of the following describes your organization's accounting system?	o Manual o Automated o Combination
2. How frequently do you post to the General Ledger?	o Daily o Weekly o Monthly o Other
3. Does the accounting system completely and accurately track the receipt and disbursements of funds by each grant or funding source?	o YES o NO
4. Does the accounting system provide for the recording of actual costs compared to budgeted costs for each budget line item?	o YES o NO
5. Are time and effort distribution reports maintained for employees working fully or partially on state or federal grant programs which account for 100% of each employee's time?	o YES o NO
6. Is your organization familiar with Federal Cost Principles (i.e. 2 CFR 220, 2 CFR 225, and 2 CFR 230)?	o YES o NO
7. How does your organization plan to charge common/indirect costs to this grant? **NOTE**: Those organizations using an indirect cost plan/rate need to **attach** a copy of the methodology and calculations in determining the rate.	o Direct Charges o Utilizing an Indirect Cost Allocation Plan or Rate

C. INTERNAL CONTROLS

1. Are duties of the bookkeeper/accountant segregated from the duties of cash receipt or cash disbursement?	o YES o NO
2. Are checks signed by individuals whose duties exclude recording cash received, approving vouchers for payment and the preparation of payroll?	o YES o NO
3. Are all accounting entries and payments supported by source documentation?	o YES o NO
4. Are cash or in-kind matching funds supported by source documentation?	o YES o NO
5. Are employee time sheets supported by appropriately approved/signed documents?	o YES o NO
6. Does the organization maintain policies that include procedures for assuring compliance with applicable cost principles and terms of each grant award?	o YES o NO

D. PROCUREMENT

1. Does the organization maintain written codes of conduct for employees involved in awarding or administering procurement contracts?	o YES o NO
2. Does the organization conduct purchases in a manner that encourages open and free competition among vendors?	o YES o NO
3. Does the organization complete some level of cost or price analysis for every major purchase?	o YES o NO
4. Does the organization maintain a system of contract administration to ensure Subgrantee conformance with the terms and conditions of each contract?	o YES o NO
5. Does the organization maintain written procurement policies and procedures?	o YES o NO

E. CONTACT INFORMATION

Please indicate the following information. In the event that the Governor's Office for Children, Youth and Families has questions about this survey, this individual will be contacted.

Prepared By:_____

Job Title:_____

Date:_____

Phone/Fax/Email:_____

F. CERTIFICATION

I certify that this report is complete and accurate, and that the Subgrantee has accepted the responsibility of maintaining the financial systems.

_____
Signature

G. COMMENT AND ATTACHMENTS

Please use the space below to comment on any answers in Sections A – D. Please indicate the Section and Question # next to each comment.
Number of Attachments (please number each attachment): _____

COMMENTS:

EXHIBIT K

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.
- 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 includes or serves children, consult with the parents or legal guardians of children in developing and operating the program;

- Will, before transporting minor children, provide the children's parents or legal guardians with the reason for the transportation and obtain the parent's or legal guardian's permission for such transportation, consistent with state law;

- 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, including training on prohibited activities;

- 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.

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.

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.

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:

EXHIBIT L
Civil Rights Compliance Checklist

Requirement	Yes	N/A	No	Comments
An Equal Employment Opportunity Plan in accordance with 28 C.F.R §§42.301-.308 on file	☐		☐	*Date prepared*
EEOP short form submitted to OCR, DOP and DOJ if required	☐		☐	*Date submitted*
Certification form to OCR for partial or complete exemption from EEOP submitted	☐		☐	*Date submitted*
Agency notifies participants of non-discrimination on basis of race, color, national origin, religion, sex, disability and age	☐		☐	*Method of notification*
Agency notifies employees of non-discrimination on basis of race, color, national origin, religion, sex, disability and age	☐		☐	*Method of notification*
Written policies/procedures for filing discrimination complaints with GOCYF or OCR are in place	☐		☐	*Provide a copy if available*
Does the agency have 50 or more employees and receive more than $25,000?	☐		☐	*If YES, complete a and b*
a. Grievance procedures implementing Section 504 of the Rehabilitation Act of 1973, found at 28 C.F.R. Part 42, Subpart G has been adopted	☐		☐	
b. Prohibitions against disability discrimination contained in 28 C.F.R. Part 42, Subpart G Compliance Coordinator has been designated	☐		☐	
Is the agency operating an education program or activity?	☐		☐	*If YES, complete a, b, and c*
a. Procedures for prompt and equitable resolution of Title IX of the Education Amendments of 1972, found at 28 C.F.R, Part 54 have been adopted (discrimination on the basis of sex)	☐		☐	

b. Compliance coordinator with prohibitions against sex discrimination contained in 28 C.F.R., Part 54 has been designated	☐		☐	
c. Notifies applicants for admission and employment, students, and parents of non-discrimination on the basis of sex in its educational programs or activities	☐		☐	
Has the agency received any findings of discrimination by a federal or state court, or federal or state administrative agency on the grounds of race, color, religion, national origin, or sex in the past?	☐		☐	*If YES, complete a*
a. Did the agency comply with requirement to submit findings to the OCR?	☐		☐	
Has the agency taken steps to provide access to programs/activities to those with limited English proficiency?	☐		☐	*If YES, complete a*
a. Have written policies and procedures on providing language access services been developed?	☐		☐	
Does the agency provide training for employees on requirements under federal civil rights laws?	☐		☐	
Does the agency conduct religious activities?	☐		☐	*If YES, complete a, b, c and d*
a. Are religious services provided to everyone regardless of religion or religious belief?	☐		☐	
b. Are federal funds used to conduct inherently religious activities?	☐		☐	
c. Are inherently religious activities kept separate in time or place from federally-funded activities?	☐		☐	

EXHIBIT M

SURVEY ON ENSURING EQUAL OPPORTUNITY FOR APPLICANTS

OMB NO. 1894-0010 EXP 5/31/2012

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 A:
Detailed Budget Instructions
(eGrants Budget Section)

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, for Year 1 of the grant, as follows:

A. Personnel Expenses
Under "Position/Title Description," list each staff position separately and provide salary and percentage of effort as percentage of FTE devoted to this award. Each staff person's role listed in the budget must be described in the application narrative and each staff person mentioned in the narrative must be listed in the budget as either CNCS or Grantee share. 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 (please list out all benefits included in this percentage). If a fringe benefit amount is over 30%, please list covered items separately and justify the high cost. 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 will travel. Provide a calculation that includes 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, daily per diem, and similar supporting information. The standard mileage reimbursement should not exceed the federal mileage rate unless a result of applicant policy and justified in the budget narrative. Only domestic travel is allowable.

The Commission expects all applicants to include funds in this line item for travel for staff and site staff to attend CNCS-sponsored technical assistance meetings. Budgets must include a minimum of $2,000 in this line. Please itemize the costs. For example: Two staff members will attend the CNCS National Trainings: 2 staff X $750 airfare + $50 ground transportation + (1 day) X $400 lodging + $35 per diem = $2,470 for CNCS National Trainings.

C. 2. Member Travel
Describe the purpose for which members will travel. Provide a calculation that includes itemized 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 CNCS 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. and H., below. Payments to individuals for consultant services under this grant should not exceed $750 per day (excluding costs for travel, supplies, etc.). The $750 daily rate is a ceiling, and we anticipate budgeted daily rates at considerably lower levels. Indicate the daily rate, number of days, and total cost for consultants you are proposing to use and their contractual services. Daily rates over the maximum amount should be justified in the narrative.

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 maximum daily rate limit of $750.

G. 2. Member Training
Include the costs associated with member training to support them in carrying out their service activities. 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:

- Criminal history background checks for all members and for all employees or other individuals who receive a salary, education award, living allowance, or stipend or similar payment from the grant (federal or non-federal share).
- Office space rental for projects operating without an approved indirect cost rate agreement that covers office space. 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 organization's indirect cost allocation pool. If such expenses are budgeted and shared with other projects or activities, the costs must be equitably pro-rated and allocated between the activities or projects.
- 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.
- Multi-state 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) and the amount of living allowance they will receive, allocating appropriate portions between the CNCS share (CNCS Share) and grantee match (Grantee Share).

The minimum and maximum living allowance amounts are provided below.

Minimum and Maximum Living Allowance

Service Term	Minimum # of Hours	Minimum Living Allowance	Maximum Total Living Allowance
Full-time	1700	$12,100	$24,200
One-year Half-time	900	$6,405	$12,800
Reduced Half-time	675	$4,804	$9,600
Quarter-time	450	$3,202	$6,400
Minimum-time	300	$2,135	$4,300

In eGrants, 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. In addition, enter the number of members for which you are not requesting funds for a living allowance, but for which you are requesting education awards.

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.** Unless exempted by the IRS, all projects must pay FICA for any member receiving a living allowance, even when CNCS does not supply the living allowance. If exempted, please note in the narrative. 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 accidents.
- **Health Care.** You must offer or make available 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 CNCS funds. You may choose to provide health care benefits to less-than-full-time members from other sources (i.e., non-federal) but the cost cannot be included in the budget. 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. CNCS 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 CNCS 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 choose one of two methods to calculate allowable administrative costs – a CNCS-fixed percentage rate method or a federally approved indirect cost rate method. Regardless of the option chosen, the CNCS share of administrative costs is limited to 5% of the total CNCS funds **actually expended** under this grant.

A. CNCS-Fixed Percentage Method
Five Percent Fixed Administrative Costs Option

The CNCS-fixed percentage rate method 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 CNCS-fixed percentage rate method (Section IIIA in eGrants), you may charge, for administrative costs, a fixed 5% of the total of the CNCS 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 maximum CNCS share for Section III: Multiply the sum of the CNCS funding shares of Sections I and II by 0.0526. This is the maximum amount you can request as Corporation share. The factor 0.0526 is used to calculate the 5% 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. Enter this amount as the CNCS share for Section III A.

2. To determine the Grantee share for Section III: 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 CNCS 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 is 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. 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, adjust the calculation above, as appropriate.

B. Federally Approved Indirect Cost Rate

If you have a federally approved indirect cost rate and choose to use it, the rate will constitute documentation of your administrative costs, including the 5% maximum payable by CNCS. 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 CNCS and Grantee 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 CNCS share: Multiply the sum of the CNCS funding share in Sections I and II by 0.0526. This is the maximum amount you can claim as the CNCS share of indirect costs.

3. To determine the Grantee share: Subtract the amount calculated in step 2 (the CNCS administrative share) from the amount calculated in step1 (the Indirect Cost total). This is the amount the applicant can claim as grantee share for administrative costs.

Source of Match

In the "Source of Match" field that appears at the end of Budget 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) **for your entire match.** Define any acronyms the first time they are used.

ATTACHMENT B
Sample Certificate of Insurance

Prior to commencing services under this contract, the contractor must furnish the state certification from insurer(s) for coverages in the minimum amounts as stated below. The coverages shall be maintained in full force and effect during the term of this contract and shall not serve to limit any liabilities or any other contractor obligations.

Name and Address of Insurance Agency:	Company Letter:	Companies Affording Coverage:
	A	
	B	
Name and Address of Insured:	C	
	D	

LIMITS OF LIABILITY MINIMUM - EACH OCCURRENCE		COMPANY LETTER	TYPE OF INSURANCE	POLICY NUMBER	DATE POLICY EXPIRES
Bodily Injury Per Person Each Occurrence Property Damage OR Bodily Injury and Property Damage Combined			Comprehensive General Liability Form Premises Operations Contractual Independent Contractors Products/Completed Operations Hazard Personal Injury Broad Form Property Damage Explosion & Collapse (If Applicable) Underground Hazard (If Applicable)		
Same as Above			Comprehensive Auto Liability Including Non-Owned (If Applicable)		
Necessary if underlying is not above minimum			Umbrella Liability		
Statutory Limits			Workmen's Compensation and Employer's Liability		
			Other		

State of Arizona and the Department named above are added as additional insureds as required by statute, contract, purchase order, or otherwise requested. It is agreed that any insurance available to the named insured shall be primary of other sources that may be available.

It is further agreed that no policy shall expire, be canceled or materially changed to affect the coverage available to the state without thirty (30) days written notice to the State. This Certificate is not valid unless countersigned by an authorized representative of the insurance company.

Name and Address of Certificate Holder:

Date Issued: _____

_____

Authorized Representative

ATTACHMENT C
Facesheet Instructions
(eGrants Applicant Info and Application Info Sections)

Modified Standard Form 424 (Rev. 11/02 to conform to eGrants)

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
School (K-12)
Local Education Agency
State Education Agency

Higher Education
Vocational/Technical College
Community College
2-year College
4-year College
Hispanic Serving College or University
Historically Black College or University
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
Local Government-Municipal
Health Department
Law Enforcement Agency
Governor's Office
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 a competitive AmeriCorps State or National grant before. If your organization had a state formula grant, check “New.”
- Check “New Application/Previous Grantee” if your organization has held an AmeriCorps State or National grant in the past and this 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.

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 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). Please include the two-letter abbreviation with both letters capitalized for each state where you plan to operate. Separate each two letter state abbreviation with a comma. For city or county information, please follow each one with the two-letter capitalized state abbreviation.

13. (See item 8) “New” application or “New application/previous grantee:” Enter the dates for the proposed three-year project period. “Continuation” or “Amendment” application: Enter the dates of the approved three-year 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 **during this budget period** 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.
b.	**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**	The amount of the applicant share that is coming from income generated

Income 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

ATTACHMENT D
National Performance Measures- Tier Levels

NATIONAL PERFORMANCE MEASURES *Tier 1: Priority Measures (in Disaster Services, Education, and Veterans and Military Families)*
Disaster Services
(new) D1: Number of individuals that received CNCS-supported services in disaster preparedness
(new) D2: Number of individuals that received CNCS-supported services in disaster response
(new) D3: Number of individuals that received CNCS-supported services in disaster recovery
(new) D4: Number of individuals that received CNCS-supported services in disaster mitigation
Education
ED21: Number of children that completed participation in CNCS-supported early childhood education programs
ED23: Number of children demonstrating gains in school readiness in terms of social and/or emotional development
ED24: Number of children demonstrating gains in school readiness in terms of literacy skills
ED25: Number of children demonstrating gains in school readiness in terms of numeracy (math) skills
ED2: Number of students that completed participation in CNCS-supported K-12 education programs
ED4A: Number of disadvantaged youth/mentor matches that were sustained by the CNCS-supported program for at least the required time period
ED5: Number of students with improved academic performance in literacy and/or math
(new) ED27: Number of students in grades K-12 that participated in the mentoring or tutoring or other education program, including CNCS-supported service learning, who demonstrated improved academic engagement
ED6: Number of students that improved their school attendance over the course of the CNCS-supported program's involvement with the student
Veterans and Military Families
V1: Number of veterans that received CNCS-supported assistance
(new) V8: Number of veterans' family members that received CNCS-supported assistance
V7: Number of family members of active duty military service members that received CNCS-supported assistance
(new) V9: Number of active duty military service members that received CNCS-supported assistance
V2: Number of veterans engaged in service opportunities as a National Service Participant or volunteer.
V10: Number of military family members engaged in service opportunities as a National Service Participant or volunteer.
Tier 2: Priority Measures (in Economic Opportunity, Environmental Stewardship, Healthy Futures and Capacity Building)
Economic Opportunity1
O5: Number of economically disadvantaged individuals, including homeless individuals, receiving housing services

O11: Number of economically disadvantaged individuals, including homeless individuals, transitioned into safe, healthy, affordable housing
Environmental Stewardship2
EN4: Number of acres of national parks, state parks, city parks, county parks, or other public and tribal lands that are improved
EN5: Number of miles of trails or waterways (owned/maintained by national, state, county, city or tribal governments) that are improved and/or created
Healthy Futures3
H8: Number of homebound OR older adults and individuals with disabilities receiving food, transportation, or other services that allow them to live independently
(new) H9: Number of homebound OR older adults and individuals with disabilities who reported having increased social ties/perceived social support
H10 (formerly O6): Number of individuals receiving emergency food from food banks, food pantries, or other nonprofit organizations
H11 (formerly O7): Number of individuals receiving support, services, education and/or referrals to alleviate long-term hunger
(new) H12: Number of individuals that reported increased food security of themselves and their children (household food security) as a result of CNCS-supported services
Capacity Building
(new) G3-3.1: Number of community volunteers recruited by CNCS-supported organizations or National Service Participants
(new) G3-3.2: Number of community volunteers managed by CNCS-supported organizations or National Service Participants
(new) G3-3.3: Number of organizations implementing three or more effective volunteer management practices as a result of capacity building services provided by CNCS-supported organizations or National Service Participants

1. The following Economic Opportunity measures may also be used to report on your program's performance in providing services in the Disaster Services focus area,
2. The following Environmental Stewardship measures may also be used to report on your program's performance in providing services in the Disaster Services focus area,
3. The following Healthy Futures measures may also be used to report on your program's performance in providing services in the Disaster Services focus area,

Tier 3: Pilot Measures
Education
ED1: Number of students who start in a CNCS-supported education program
ED3A: Number of disadvantaged youth/mentor matches that are commenced by CNCS-supported programs
ED7: Number of students with no or decreased disciplinary referrals and suspensions over the course of the CNCS-supported programs' involvement
ED8: Number of youth with decreased substance abuse, arrest, or gang involvement
ED9: Number of students graduating from high school on time with a diploma
ED10: Number of students entering post-secondary institutions

ED11: Number of students earning a post-secondary degree
ED12: Number of CNCS-Supported National Service Participants who begin serving as teachers through a Teacher Corps program
ED13: Number of CNCS-Supported National Service Participants who completed serving as teachers through a Teacher Corps program
ED14: Number of individuals teaching in high need schools
ED15: Number of students in CNCS-supported teacher classrooms with improved academic performance
ED17: Number of teachers remaining in the education field, but not teaching in a school (school support staff, school administration, district administration policy, education nonprofits, etc.) after their term of service
ED18: Number of teachers who have had a positive impact on student learning as determined by observation-based assessments of teacher performance
ED19: Number of individuals receiving certification to teach in schools after their term of service
ED20: Number of children who start in a CNCS-supported early childhood education program
ED22: Number of children accessing high quality early childhood education programs
ED26: Number of students acquiring a GED
Economic Opportunity
O1: Number of economically disadvantaged individuals receiving financial literacy services
O2: Number of economically disadvantaged individuals receiving job training and other skill development services
O3: Number of economically disadvantaged individuals receiving job placement services
O4: Number of housing units developed, repaired, or otherwise made available for low-income individuals, families or people with disabilities
O9: Number of economically disadvantaged individuals with improved financial knowledge
O10: Number of economically disadvantaged individuals placed in jobs
O12: Number of economically disadvantaged National Service Participants who are unemployed prior to their term of service
O13: Number of economically disadvantaged National Service Participants who have not obtained their high school diploma or equivalent prior to the start of their term of service
O14: Number of National Service Participants who have their high school diploma or equivalent but have not completed a college degree prior to their term of service
O15: Number of economically disadvantaged National Service Participants that secure employment during their term of service or within one year after finishing a CNCS-supported program
O16: Number of National Service Participants that obtain a GED/diploma while serving in CNCS-supported programs or within one year after finishing serving in CNCS-supported programs
O17: Number of National Service Participants that complete a college course within one year after finishing a CNCS-supported program
Environmental Stewardship
EN1: Number of housing units of low-income households and structures weatherized or retrofitted to significantly improve energy efficiency
EN2: Number of low-income households home and public building energy audits conducted
EN3: Number of individuals receiving education or training in energy-efficient and environmentally-

conscious practices, including but not limited to sustainable energy and other natural resources, and sustainable agriculture
EN6: Number of tons of materials collected and recycled
Healthy Futures
H1: Number of individuals who are uninsured, economically disadvantaged, medically underserved, or living in rural areas utilizing preventive and primary health care services and programs
H2: Number of clients to whom information on health insurance, health care access and health benefits programs is delivered
H3: Number of clients enrolled in health insurance, health services, and health benefits programs
H4: Number of clients participating in health education programs
H5: Number of children and youth engaged in in-school or afterschool physical education activities with the purpose of reducing childhood obesity
H6: Number of children and youth receiving nutrition education with the purpose of reducing childhood obesity
H7: Number of clients receiving language translation services at clinics and in emergency rooms
Veterans and Military Families
V3: Number of veterans assisted in pursuing educational opportunities
V4: Number of veterans assisted in receiving professional certification, licensure, or credentials
V6: Number of housing units developed, repaired, or otherwise made available for veterans
Capacity Building
(new) G3-3.4 Number of organizations that received capacity building services from CNCS-supported organizations or national service participants
(new) G3-3.5: Number of staff and community volunteers that received training (of one or more types) as a result of capacity building services provided by CNCS-supported organizations or national service participants
(new) G3-3.6: Number of organizations that completed a community assessment identifying goals and recommendations with the assistance of CNCS-supported organizations or national service participants
(new) G3-3.7: Hours of service contributed by community volunteers who were recruited by CNCS-supported organizations or national service participants
(new) G3-3.8: Hours of service contributed by community volunteers who were managed by CNCS-supported organizations or national service participants
(new) G3-3.9: Number of organizations reporting that capacity building activities provided by CNCS-supported organizations or national service participants have helped to make the organization more efficient
(new) G3-3.10: Number of organizations reporting that capacity building activities provided by CNCS-supported organizations or national service participants have helped to make the organization more effective
(new) G3-3.11: Number of new systems and business processes (technology, performance management, training, etc.) or enhancements to existing systems and business processes put in place as a result of capacity building services provided by CNCS-supported organizations or

national service participants
(new) G3-3.12: Number of organizations that monitored their progress towards the goals identified in their community assessment with the assistance of CNCS-supported organizations or national service participants
(new) G3-3.13: Number of additional activities completed and/or program outputs produced by the program as a result of capacity building services provided by CNCS-supported organizations or national service participants in a) Disaster Services, b) Economic Opportunity, c) Education, d) Environmental Stewardship, e) Healthy Futures and/or f) Veterans and Military Families
(new) G3-3.14: Number of organizations that have experienced an increase in requests for their programs and services as a result of capacity building services provided by CNCS-supported organizations or national service participants
(new) G3-3.15: Number of additional types of services offered by organizations as a result of capacity building services provided by CNCS-supported organizations or national service participants in a) Disaster Services, b) Economic Opportunity, c) Education, d) Environmental Stewardship, e) Healthy Futures and/or
f) Veterans and Military Families
(new) G3-3.16: Dollar value of cash resources leveraged by CNCS-supported organizations or national service participants
(new) G3-3.17: Dollar value of in-kind resources leveraged by CNCS-supported organizations or national service participants
(new) G3-3.18: Number of new beneficiaries that received services as a result of capacity building efforts in: Disaster Services, Economic Opportunity, Education, Environmental Stewardship, Healthy Futures, and/or Veterans and Military Families
(new) G3-3.19: Number of new beneficiaries from one or more targeted or underserved populations (counts by target population, e.g., racial or ethnic group) that received services as a result of capacity building efforts in: Disaster Services, Economic Opportunity.

ATTACHMENT E

Performance Measures Instructions
(eGrants Performance Measures Section)

AmeriCorps Performance Measures

To begin entering performance measures, from your eGrants grant application page select Performance Measures.

All applicants must complete Steps 1-6. Then, if you are:

- Entering applicant-determined performance measures, follow steps 7A-18A.
- Opting in to the National Performance Measures, follow steps 7B-17B.

Step 1: Select Characteristics.

To begin, click one or more boxes in the "Grant Characteristics"

Step 2: Select Focus Areas

Select the Focus Area in which your primary service activity fits. If your primary service activity does not fit into a Focus Area, select "Other" and skip to **Step 5**. You may select multiple Focus Areas to represent significant areas of AmeriCorps member activity. Do not include multiple Focus Areas to describe the same activity. Select the Focus Area that best describes the activity.

Step 3: Choose whether to Opt-in to National Performance Measures:

Although eGrants will allow you to select all of your Focus Areas at once, we suggest starting with one Focus Area that represents your primary activity and then repeating **Step 2 – Step 6** for additional Focus Areas if applicable.

When you select a Focus Area, eGrants automatically pre-populates the selection "No" in response to the question "Will you be using a national performance measure related to this Focus Area?"

- Leave this selection as "No" if you do not want to participate in the National Performance Measures for that Focus Area.

- Change the selection to "Yes" if you want to opt-in to the National Performance Measures for that Focus Area.

You may consult the "National Performance Measures Instructions" in the Notice of Funding Opportunities (NOFO) or the relevant resource packets (http://www.nationalserviceresources.org/national-performance-measures/home) before making your participation decision.

If you selected "Other" as your only Focus Area, you will skip this step as there are no National Performance Measures for "Other".

Step 4: Complete the MSY Chart(s)
For each Focus Area selected, complete a Member Service Years (MSY) Chart. Click the "view/edit MSY Slots" orange link. There are two sets of numbers to enter in each MSY Chart. First, for each slot type, enter the number of members that will be providing service in that Focus Area.

Second, enter the percent of time that members of each slot type will spend on activities in that Focus Area. Use whole numbers to represent the percent. Do not use a % or a decimal. eGrants will calculate the total MSYs for each slot type, then aggregate the MSYs for the entire chart in the "Total MSYs Devoted to Priority" field at the bottom of the chart.

Note that MSYs in each Focus Area should be mutually exclusive. Do not double count MSYs. The total MSYs across all Focus Areas selected should not exceed the total MSYs requested in the budget.

Step 5: Add a Service Category
Select your Primary Service Category from the pop-up menu. The Service Category you select will determine the Indicator drop-down options in later steps.

If this is the first or only Service Category you select, eGrants will automatically check "Primary" to indicate this is your primary activity. To select more than one Service Category, simply click the "add a service category" link. Only one Service Category can be indicated as the primary per Focus Area. You may add additional service categories if appropriate for your program design.

Step 6: Add a Performance Measure
You must create at least one aligned set of Performance Measures representing your Primary Service Activity, which is achieved through either National Performance Measures or applicant-determined performance measures.

If you have opted-in to National Performance Measures, you will see the links for both "add a national performance measure" and "add a performance measure." If you have not opted-in to National Performance Measures, you will only see the link for "add an applicant performance measure."

Chose National Performance Measures or Applicant- Performance Measures or

- Follow the instructions **7A – 17A for** each aligned set of applicant-determined measures you need to create.

- Follow the instructions for **7B – 17B** for each aligned set of national performance measures you need to create.

Applicant Performance Measures

Step 7A: Add a Performance Measure
Follow the instructions for **7A – 18A** for each applicant-determined performance measure you will create. Begin by creating the Performance Measure Output and then repeat steps 13A-18A to create an aligned Intermediate Outcome.

Step 8A: Select a Focus Area
The Focus Area drop-down box will consist of all the focus areas that were initially select in the main Focus Area section.

Step 9A Add Performance Measurement Title
Give this performance measure a title—usually 3-4 words that describe the activity—and enter it in the text box.

Step 10A: Select a Service Category
Service Category is a drop-down menu of choices based on your earlier identification of Service
Categories; select one and continue by pressing the "go" button

Step 11A: Describe Strategies to Achieve Result
Briefly describe how you will achieve this result. Keep statements to one or two paragraphs with a maximum of 4,000 characters.

Step 12A: Select a Result Type
You will need to select the Result Type that you intend to track for this activity – output or intermediate outcome – and click "Add New Results Section." You should begin each aligned
measure with the selection of an Output Measure.

Step 13A: Write a Result Statement
Enter 1-2 sentences stating the expected Result.

Step 14A: Select an Indicator
Select an Indicator from the drop- down menu. If the options provided do not include the Indicator you are measuring, select "other" and describe the Indicator in the text box that will appear. If this is the case, the applicant should make a note in the performance measures section of the Rationale and Approach narrative and should identify the numbers and titles of the pilot measures the applicant intends to opt into as well as the targets and instruments for the for these indicators. Applicants will have an opportunity to enter these measures in eGrants during the clarification process.

Step 15A: Write a Target Description
In 250 characters or less, include a description of the target. Be sure to include how you determine what is counted in this target. For example: 100 parents will attend the eight-week parenting skills/drop-out prevention class.

Step 16A: Select a Target Number or Percent
Write a number in the Target box from your target statement— and indicate whether it is a whole
number or percent—for example, of how many things or services will be created or provided. Output targets often use a number (#) rather than a percent. If you included a number in your Target Description, this number in the Target Number or Percent field and the number in the Target Description should match.

Step 17A: Identify your Instruments
Describe the Instruments that will be used to measure your output/outcome in 250 characters or less. These are specific tools to collect information such as a behavior checklist, tally sheet, attitude questionnaire, or interview protocol.

Step 18A: Write a Performance Measure Statement
Provide the expected result and target combined into one or two sentences in 1,000 characters or less.

Once you have completed the output performance measurement information, do the same for your intermediate outcome and/or additional measures, if necessary. Begin by identifying the Result Type as “intermediate outcome” and complete Steps 13A through 18A again. If you would like to enter an “end outcome”, you may do so by completing Steps 13A through 18A again. End outcomes are not required.

National Performance Measures

Follow the instructions for **7B –17B** for each aligned set of National Performance Measures you need to create. You will use these instructions to complete measures if you have opted in to National Performance Measures for any Focus Area. Please refer to National Performance Measures Instructions for complete instructions for aligning measures.

- If you select the Education Focus Area and opt-in to National Performance Measures, you are only allowed to select National Performance Measures. You are not allowed to add any additional, applicant-determined measures.

- If you select the Healthy Futures, Economic Opportunity, Environmental Stewardship or Veterans Focus Areas, you will enter your National Performance Measures. If you choose, you may add additional, applicant-determined Measures after you enter the National Performance Measures.

Step 7B: Add a National Performance Measure
First select the Focus Area. Only those Focus Areas that were checked as participating in the National Performance Measures will be displayed.

Step 8B: Add a Performance Measurement Title
Give this performance measure a title — usually 3-4 words that describe the activity — and enter it in the text box. Continue by pressing the "go" button.

Step 9B: Describe Strategies to Achieve Result
Briefly describe how you will achieve this result. Keep statements to one or two paragraphs with a maximum of 500 characters.

Step 10B: Select a Result Type
You will need to select the Result Type that you intend to track for this activity – output or
intermediate outcome– and click "Add New Results Section." You should begin each aligned measure with the selection of an Output Measure.

Step 11B: Select the Indicator
This is where you select your National Performance Measure. There is a drop-down list containing the National Performance Measures for the Focus Areas that you have selected.

Once you select your first National Performance Measure, eGrants will provide onscreen instructions about other National Performance Measures you must use in conjunction with this measure or if you need to add an applicant-determined intermediate outcome.
If you need to add an applicant-determined intermediate outcome measure, you will select
"Other" from the pop-up list.

Step 12B: Write Result Statement
Enter 1-2 sentences stating the expected result.

Step 13B Write a Target Description
In 250 characters or less, include a description of the target. Be sure to include how you determine what is counted in this target. For example: 100 parents will attend the eight-week parenting skills/drop-out prevention class.

Step 14B: Select a Target Number
Write the number in the Target box from your target description. You are only allowed to use a number.

Step 15B: Identify your Instruments
Describe the Instruments that will be used to measure your output/outcome in 250 characters or less. These are specific tools to collect information such as a behavior checklist, tally sheet, attitude questionnaire, or interview protocol. Check for guidance on appropriate instruments posted at the National Performance Measures resource page: http://nationalserviceresources.org/national-performance-measures/home

Step 16B: Write a Performance Measures Statement
Provide the expected result and target combined into one or two sentences (1,000 characters or less).

Step 17B: Create Aligned Measure
Now that you have completed the output performance measurement information, do the same for your intermediate outcome. Begin by identifying the Result Type, and then complete Steps **11B to 16B** again.

Once you complete entering an aligned measure as defined by the National Performance Measure, you will return to Step 7 and create any other aligned measures to report member activities in Focus Areas or other areas of service either by:

- **Following Steps 7A – 18A for an applicant-determined measure or**
- Following Steps 7B – 17B for an aligned National Performance Measure.

NOTE:
The 2012 Frequently Asked Questions document, and the National Performance Measures Instructions for each of the Focus Areas and Capacity Building can now be found on the 2012 NOFO page:
http://www.americorps.gov/for_organizations/funding/nofa_detail.asp?tbl_nofa_id=91

ATTACHMENT F:
Alternative Match Instructions

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 minimums in years thereafter, are maintained. See 45 CFR §§ 2521.35–2521.90 for the specific regulations.

Special Circumstances for an Alternative Match Schedule: Under certain circumstances, applicants may qualify to meet alternative matching requirements that increase over the years to 35% instead of 50% as specified in the regulations at §2521.60(b). To qualify, you must demonstrate that your program is either located in a rural county or in a severely economically distressed community as defined below.

A. Rural County: In determining whether a program is rural, CNCS 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 K for the Table of Beale codes.

B. Severely Economically Distressed County: In determining whether a program is located in a severely economically distressed county, CNCS will consider the following list of county-level characteristics. See Attachment K 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.
- The areas served by the program lack basic infrastructure such as water or electricity.

C. Program Location: Except when approved otherwise, CNCS 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 request. CNCS will, in its sole discretion, determine whether some other address is more appropriate for determining a program's location.

If your program is located in one of these areas, see the instructions below for applying for this alternative match schedule. You must submit your request to the alternative schedule at least 60 days before the AmeriCorps application is due. CNCS will review your request and notify you within 30 days if you qualify for the alternative schedule and

provide instructions for entering your budget into eGrants under the Alternative Match Schedule.

If approved for the alternative schedules, programs will base their budget in the upcoming application on the approved alternative match. The alternative match requirement will be in effect for whatever portion of the three-year project period remains or if applying as a new grantee, for the upcoming three-year grant cycle.

D. Instructions for the Alternative Match Schedule: Programs operating in one state must send their requests to the State Commission for review and approval. The Commission will then forward the approved request to CNCS for consideration.

Submit with applications to the GOCYF

Send your request in memo format. You must respond to each item below. Please include both the item and your response in your request.

1. Basis of Request

a. Identify the basis for your request as either a rural county or a severely economically distressed community as described above.
b. Describe where your program operates and include the address of the legal applicant.

2. Rural Counties

c. Describe the economic conditions.
d. Confirm that your county has a Beale code of 6, 7, 8, or 9.

3. Economically Distressed Counties:

e. Provide your county per-capita income, poverty, and unemployment levels.
f. Demonstrate that your county per-capita income, poverty, and unemployment levels are above or below the national averages. Identify the data source(s) used to make your determination.
g. Provide any other statistics you deem relevant to demonstrate your county is economically distressed.

4. Program Location: If you believe the location of your program should not be based on the address of the legal applicant, describe your justification for requesting an alternative location(s).

5. Other: Provide any other justification and information for your request that is not presented in the responses to the above.

ATTACHMENT G:
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.

LOCAL ECONOMIC INFOMATION

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.

WEBSITE ADDRESS	EXPLANATION
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.**
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.**

WEBSITE ADDRESS	EXPLANATION
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.**

END OF SOLICITATION
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