



**AMERICORPS\*VISTA  
PROJECT APPLICATION**

**PART V.1  
SUPPLEMENTAL BUDGET GUIDANCE  
STANDARD PROJECTS**

All AmeriCorps\*VISTA projects, regardless of type, must complete the SF424A budget page and attach a written narrative justification for each line item, whether they are Corporation and/or non-Corporation funded. If in-kind contributions are included in the Non-Federal column, please discuss them in the Budget Narrative Justification.

While there is no specific match requirement, applicant organizations should indicate the type and level of resources they will provide to support the project in Column 5, Non-Federal Funds Requested, of the line-item budget of the Modified SF 424A.

A narrative justification for each line item, whether Corporation and/or non-Corporation funded, must accompany the budget submission. If in-kind contributions are included, please cover them in the Budget Narrative Justification.

NOTE: Several line items are estimates (education award, stipend, relocation) as they entail a choice for each AmeriCorps\*VISTA member.

### STANDARD PROJECT INSTRUCTIONS

The following line items must be completed with amounts showing in either the Member Support (6) column or Non-Federal (5) column as appropriate. You may choose to enter additional information into other line items in the Non-Federal (5) column to indicate the level of support but no other Member Support (6) items should be entered.

<b>2) VOLUNTEER EXPENSES</b>	
<b>a. PERSONNEL EXPENSES</b>	
Full-Time Living Allowances	Use the figure(s) provided by your State Office. If you are cost-sharing any of your VISTAs please enter your contribution in the Non-Federal column.
Summer Associates Living Allowances	Use the figure(s) provided by your State Office.
Education Award	AmeriCorps*VISTA members choose between an education award and a cash stipend provided after a year of service. The award is \$4725 for VISTAs and Leaders and \$1000 for Summer Associates. The cash stipend is \$1200 for VISTAs and \$2400 for most Leaders. Nationally, 60 percent of members choose the education award; 40 percent choose the cash stipend. Budget plans may reflect that ratio, or your organization's best estimate.
End of Service <b>Stipend</b>	
<b>b. FRINGE BENEFITS</b>	
Health	Use \$1600 for each VISTA slot requested, excluding Summer Associates.
FICA	FICA is calculated based on 7.65% of the <b>stipend line</b> only.

In addition, you may enter amounts into the Non-Federal (5) column for the other line items but they are not required.

## Cost-Share Information

### *What You Give...*

#### *Your Organization*

- **The living allowance** – between \$9,504 and \$10,416 per member (varies depending on cost-of-living adjustments).

### *What You Get...*

#### *AmeriCorps\*VISTA*

- **\$4,725 education award** or **\$1,200 post-service stipend.**
- **Health coverage** for all members assigned to your project – approximately \$1,600 per member.
- **Payroll services:** Members receive their paychecks directly from AmeriCorps\*VISTA.
- **Training** in project management and leadership for members and project supervisor.
- **Travel costs** associated with training.
- **Moving allowance** for members relocating to serve.
- Possible **Liability coverage** for all members, under the Federal Employees Compensation Act and the Federal Torts Claims Act.
- **Child care** for income-eligible members.
- **FICA**
- **Assistance with recruiting members.**

**Estimated total contribution per member:**  
**\$14,200**

Complete section 2) Volunteer Expenses, A) Personnel Expenses line of the Modified SF 424A for non-Federal contribution for AC\*VISTA Living Allowance(s), specifying the number of AC\*VISTA members and annual living allowance expense.

# PART I - FACESHEET

## APPLICATION FOR FEDERAL ASSISTANCE

2. DATE SUBMITTED TO CORPORATION FOR NATIONAL AND COMMUNITY SERVICE (CNCS):			3. a. DATE RECEIVED BY STATE:	1. TYPE OF SUBMISSION: Application <input type="checkbox"/> Non-Construction <input checked="" type="checkbox"/>																				
5. APPLICANT INFORMATION			3.b. STATE APPLICATION IDENTIFIER:																					
5a. LEGAL NAME:			5d. NAME AND CONTACT INFORMATION FOR PROJECT DIRECTOR OR OTHER PERSON TO BE CONTACTED ON MATTERS INVOLVING THIS APPLICATION ( <i>give area codes</i> ):																					
5b. ORGANIZATIONAL DUNS:			NAME:																					
5c. ADDRESS ( <i>give street address, city, county, state and zip code</i> ):			TELEPHONE NUMBER: (     )     -																					
			FAX NUMBER: (     )     -																					
			INTERNET E-MAIL ADDRESS:																					
			WEBSITE:																					
6. EMPLOYER IDENTIFICATION NUMBER (EIN): <table style="width:100%; border: none;"> <tr><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td></tr> </table>																						7.a. TYPE OF APPLICANT: ( <i>enter appropriate letter in box</i> ) <input style="float: right; width: 20px; height: 20px; border: 1px solid black;" type="checkbox"/>		
8. TYPE OF APPLICATION (Check appropriate box): <input type="checkbox"/> NEW <input type="checkbox"/> NEW/PREVIOUS GRANTEE <input type="checkbox"/> CONTINUATION <input type="checkbox"/> AMENDMENT			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. Other (specify) _____																					
If Revision, enter appropriate letter(s) in box(es): <input type="checkbox"/> <input type="checkbox"/>			7.b. CNS APPLICANT CHARACTERISTICS <i>Enter appropriate code in each blank: _____, _____, _____, _____, _____</i>																					
A. AUGMENTATION: <input type="checkbox"/> B. BUDGET REVISION: <input type="checkbox"/>			9. NAME OF FEDERAL AGENCY: <b>Corporation for National and Community Service</b>																					
C. NO COST EXTENSION: <input type="checkbox"/> to _____ ( <i>enter date</i> )			10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: <table style="width:100%; border: none;"> <tr><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td><td style="border: 1px solid black; width: 20px; height: 15px;"></td></tr> </table> Name of Program _____											11. a. TITLE OF APPLICANT'S PROJECT:										
E. OTHER ( <i>specify below</i> ): <input type="checkbox"/> _____			11. b. CNCS PROGRAM INITIATIVE (IF ANY):																					
12. AREAS AFFECTED BY PROJECT ( <i>List Cities, Counties, States, etc.</i> ):																								
13. PROPOSED PROJECT:     START DATE:			END DATE:																					
14. ESTIMATED FUNDING: Check applicable box: Yr 1: <input type="checkbox"/> Yr.2: <input type="checkbox"/> or Yr 3: <input type="checkbox"/>			15. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?																					
a. FEDERAL	\$	a. YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON: DATE _____ b. NO. <input type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW																						
b. APPLICANT	\$																							
c. STATE	\$    N/A																							
d. LOCAL	\$    N/A																							
e. OTHER	\$    N/A																							
f. PROGRAM INCOME	\$    N/A																							
g. TOTAL	\$	16. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT? <input type="checkbox"/> YES    If "Yes," attach an explanation. <input type="checkbox"/> NO																						
17. 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:																				

**PART II – BUDGET - STANDARD**

<b>1) VOLUNTEER SUPPORT EXPENSES</b>						
<b>A. GRANTEE PERSONNEL EXPENSES</b> Position Title	<b>(1)</b> Annual Salary	<b>(2)</b> % Time Spent on Project	<b>(3)</b> Total Cost	<b>(4)</b> Federal Funds Requested (cash grant)	<b>(5)</b> Non-Federal Funds Requested	<b>(6)</b> Member Support (non cash)
<b>TOTAL PERSONNEL EXPENSES</b>						
b. FRINGE BENEFITS						
c. (1) GRANTEE STAFF LOCAL TRAVEL						
(2)GRANTEE STAFF LONG DISTANCE TRAVEL						
d. EQUIPMENT						
e. SUPPLIES						
f. CONTRACTUAL SERVICE						
i. OTHER						
Communication						
Printing						
Logistics						
j. INDIRECT COSTS						
<b>TOTAL VOLUNTEER SUPPORT EXPENSES</b>						
<b>2) VOLUNTEER EXPENSES</b>						
b. PERSONNEL EXPENSES						
Full-Time Living Allowances						
Summer Associates Living Allowances						
Education Award						
End of Service Stipend						
b. FRINGE BENEFITS						
Health						
FICA						
c. TRAVEL						
Relocation						
On-Site Travel						
g. OTHER:						
<b>TOTAL VOLUNTEER EXPENSES</b>			\$	\$	\$	\$
<b>TOTAL COST</b>			\$	\$	\$	\$
<b>PERCENTAGES</b>			%	%	%	%

## ASSURANCES -- NON-CONSTRUCTION PROGRAMS

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. 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.
2. 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.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. 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 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to non-discrimination. 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) §§ 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 non-discrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. 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.
8. Will comply, as applicable, 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.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§ 276a and 276a-7), 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 subagreements.
10. 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 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.
11. 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 (Clear Air) Implementation Plans under Section 176(c) of the Clear 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).
12. 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 river system.
13. 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 (16 U.S.C. 469a-1 et seq.).
14. 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.
15. 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.
16. 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.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
APPLICANT ORGANIZATION	DATE SUBMITTED

**CERTIFICATIONS REGARDING (A) DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS; (B) DRUG-FREE WORKPLACE REQUIREMENTS; AND (C) LOBBYING**

Applicants should refer to the regulations cited below to determine which certification(s) apply to their grant, and review the instructions included in the regulations. Signing this form complies with certification requirements under "Government-wide Debarment and Suspension (Non-procurement)", "Government-wide Requirements for Drug-Free Workplace (Grants)" in 45 CFR Part 1229, and "New Restrictions on Lobbying" in 45 CFR Part 1230. The certification(s) shall be treated as a material representation of fact upon which reliance will be placed when the Corporation determines to award the covered transaction, grant, or cooperative agreement.

**A. DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITIES**

As required by Executive Order 12549, Debarment and Suspension, and implemented at 45 CFR Part 1229, for prospective participants in primary covered transactions, as defined at 45 CFR Part 1229, Sections 1229.105 and 1229.110 -

1. The applicant certifies that it and its principals:
  - (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
  - (b) Have not, within a 3-year period preceding this application, been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
  - (c) Are not presently indicted for or otherwise criminally or civilly charged by a Federal, State or local government entity with commission of any of the offenses enumerated in paragraph 1(b) of this certification;
  - (d) Have not, within a 3-year period preceding this application, had one or more public transactions (Federal, State or local) terminated for cause or default.
2. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

**B. DRUG-FREE WORKPLAN (GRANTEES OTHER THAN INDIVIDUALS)**

As required by the Drug-Free Workplace Act of 1988, and implemented at 45 CFR Part 1229, Subpart F, for grantees, as defined at 45 CFR Part 1229, Sections 1229.605 and 1229.610 -

1. The applicant certifies that it will or will continue to provide a drug-free workplace, and will -
  - (a) Publish a statement notifying employees that unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
  - (b) Establish an on-going drug-free awareness program to inform employees about -
    - (1) The dangers of drug abuse in the workplace;
    - (2) The grantee's policy of maintaining a drug-free workplace;
    - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
    - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.
  - (c) Require that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph 1(a);
  - (d) Notify the employee in the statement required by subparagraph 1(a) that, as a condition of employment under the grant, employee will -
    - (1) Abide by the terms of the statement; and
    - (2) Notify the employer in writing of any conviction for a violation of a criminal drug statute which occurred in the workplace, no later than 5 calendar days after such conviction;
  - (e) Notify the cognizant Corporation Grants Officer within 10 calendar days after receiving notice of such conviction under subparagraph (d)(2) from the employee, or otherwise receiving actual notice. The notice shall include the title of the employee's position and the identification number(s) of the affected grant;
  - (f) Take one of the following actions, within 30 calendar days of receiving notice with respect to any employee who is so convicted -
    - (1) Take appropriate personnel action against such an employee up to and including termination consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
    - (2) Require such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State or local health, law enforcement, or other appropriate agency;
  - (g) Make a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs 1(a) through 1(f).

**C. LOBBYING**

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 45 CFR Part 1230, for organizations entering into a grant or cooperative agreement over \$100,000, as defined at 45 CFR Part 1230, Sections 1230.105 and 1230.110, the applicant certifies that:

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, 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 the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, or the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
2. 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 undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
3. The undersigned shall require that the language of this certification be included in the award documents for all subcontracts at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above certification(s). (A copy of the governing body's authorization for me to sign this certification as official representative is on file in the applicant's office)

_____ Applicant Organization	_____ Printed Name and Title of Authorized Representative
_____ Signature of Authorized Certifying Official	_____ Date