

**OMB Approval No. 0985-0018**

**Pension Counseling Technical Resource & Assistance  
Center  
Programmatic Supplement**

**Program Announcement and  
Grant Application Instructions**

**U.S. Administration on Aging  
2008**

**Department of Health and Human Services (HHS)**

**Administration on Aging (AoA)**

**AoA Center:** Center for Wellness and Community-Based Services

**Funding Opportunity Title: Pension Counseling Technical Resource and Assistance Center**

**Announcement Type:** initial

**Funding Opportunity Number:** HHS-2008-AoA-PX-0816

**Catalog of Federal Domestic Assistance (CFDA) Number:** 93.048

**Key Dates:** The deadline for receipt of applications is July 28, 2008

**Executive Summary:**

The Administration on Aging (AoA) plans to award up to one (1) programmatic supplement, at a federal share of approximately \$65,540, to the Technical Resource and Assistance Center grantee currently funded under the Pension Counseling and Information Program, based on a successful response to this program announcement. The intent of this program announcement is to enhance, through supplemental funding, the pension counseling support services being provided by the current grantee under the Administration on Aging Pension Counseling and Information Program.

Therefore, competition under this program announcement is limited to the current grantee, the Pension Rights Center, Washington DC.

**I. FUNDING OPPORTUNITY DESCRIPTION**

**Program History**

Since 1993, the Administration on Aging (AoA) has funded the Pension Counseling and Information Program (the Program) to help individuals understand and exercise their pension rights. The Program is founded upon two service hallmarks: trustworthy and personalized assistance, regardless of age, income or value of the pension claim; and, broad-based expertise covering all employer-sponsored pension and retirement savings plans, regardless of sponsor type (public, private) or plan type (defined benefit, defined contribution).

Since its inception, the network of pension counseling projects has been supported by a technical assistance center that delivers legal training, case consultation, operational

support and resource coordination to the counseling project network. The technical assistance project has helped the counseling projects to achieve a return on investment of more than \$5 in client benefits for every federal dollar invested, as well as permanence under the Older Americans Act.

Over the course of the Program, the AoA has worked with the technical assistance center to identify operational practices that contribute most significantly to the counseling projects' efficiency and overall success. With this funding supplement, AoA hopes to enhance the ability of the technical assistance center to increase operational consistency between the counseling projects, and to improve the quality and quantity of shared Program resources and project data across the counseling project network.

### **Project Goals, Objectives and Activities**

The Program currently funds 5 multi-state, regional pension counseling projects serving a total of 22 states. A sixth regional pension counseling project grant will be competed and funded under amended program guidelines that require expanded services through increased coordination with other regional counseling projects and the national technical assistance project. Other supplemental funding will bring current counseling project grantees into alignment with the new programmatic guidelines.

This supplement is intended to aid the technical assistance center in its support of what will now be six projects in the counseling network as they work to achieve the following set of newly expanded Program goals (as denoted by italics):

#### A. Regional Pension Counseling and Information Services.

##### 1. Counseling and Information Services.

- c. Referral Services: The purpose of a project's referral efforts is to build and utilize a cohesive region-wide network of private and public service providers to serve clients whose needs are outside the scope of counseling and information services. To meet this need, projects *must identify or establish region-wide, low- or no-cost referral networks. Applicants should detail their coordination with existing networks, such as the National Pension Lawyers Network, where available and appropriate. Referral services should cover the following areas:*
  - i. *Employee benefits litigation;*
  - ii. *Pension-related actuarial and accounting services;*
  - iii. *Drafting and filing of Qualified Domestic Relations Orders (QDROs);*
  - iv. *Counseling or advocacy services regarding health, disability, and other employer-sponsored welfare benefits*
  - v. *Counseling or advocacy services regarding Social Security Old-Age, Survivors, and Disability Insurance (OASDI) program, and other public benefit or entitlement programs;*

- vi. *Financial education, and other retirement and estate planning services;*  
*and,*
- vii *Elder rights and other consumer protection matters.*

2. Regional Service Delivery: All projects must be regional, generally requiring that a proposed project must serve a minimum of two (2) or more states (see exception, 2.b. below). Project design must provide for equivalent access to services throughout the region served (*such as through the use of a toll-free phone number, website or other no cost mechanisms*). Projects must also ensure that clients throughout the region served receive the same level and quality of services, *regardless of their proximity to a physical project office*. Preference in awarding funds will be given to applicants with an evidenced capacity to deliver regional services.
3. Exclusive Subject Matter:
4. Individuals Served: Projects must provide equivalent services and equivalent access to those services to individuals, *regardless of age or income*, who:
  - a. Reside or work in the project's service region; or who
  - b. Worked or resided in the project's service region while earning a pension, or when married to an individual earning a pension; or who
  - c. Seek pension benefits that are sponsored, administered, trusteed, or are otherwise held or distributed by an entity that *is or was* headquartered or operated within the service region.

B. Regional Outreach Activities:

1. Regional Intake and Referral Network:
  - a. Specialized Outreach Activities and Materials: The following considerations should also be addressed in the proposed regional outreach plan:
    - ii. Outreach materials (and overall project efforts) and activities address the breadth subject matter covered by the counseling projects, specifically including *competencies in both ERISA and non-ERISA pension systems*:

C. Programmatic Consistency:

1. Staffing: Certain staffing models maximize both the project's ability to provide the highest levels of counseling services, as well as the project's breadth and depth of institutional experience over time.
  - e. Staff Development: Proposed staff development plans must include at least the following components:
    - i. Specialist staff in each project location attend the annual Pension Counseling Project Training Conference in Washington, D.C. in each project year;
    - ii. At least two days of customized legal training and / or operational consultation and review at each project location will be delivered and/or coordinated by the national technical assistance project in each project year;
    - iii. *Specialist staff will attend at least 6 credit hours of supplemental pension training (CLE) in each project year; and*
    - iv. *Adequate budgetary resources to cover personnel time, tuition, travel and other expenses related to the project's staff development plan must be clearly delineated in the budget narrative.*
  - f. Infrastructure Development: *The following elements have been identified as best practices which contribute significantly to project efficiency and effectiveness in line with Program goals and should, therefore, be allocated sufficient budget resources:*
    - i. Pension Plan Information: *Proposals should outline their existing hardware and software environment, and detail any additional technology necessary to electronically capture - with optical character recognition – plan documents, summary plan descriptions and other governing plan instruments; and to share the electronic files with a central database (such as PensionHelp America) for redistribution to the larger pension counseling network.*
    - ii. Pension Law Reference Resources: *Proposals should outline their existing pension law library and detail any additional books, periodicals, and other reference materials necessary to competently research client matters across the breadth of the project's regional subject matter jurisdiction.*
2. Data Collection and Reporting: Data will be collected and reported in a manner consistent across all AoA-funded counseling projects. AoA will identify the baseline data set to be collected, and provide a low or no-cost tool to collect and report on that data. At a minimum the data set will include the number of clients served, client demographics, types and levels of services provided, legal issues presented, recoveries and other client outcomes, plan and sponsor types, and administrator contact information. Projects will collect and report data from each of their multiple locations (if applicable) and on the regional

project's activities as a whole. All projects funded under this program will submit reports to the AoA and to the national technical assistance project for consolidation and analysis. Projects will be expected to collect and retain documents and contact information for the pension plans they identify in their casework and share this information with the national technical assistance project *for redistribution to the broader pension counseling network. Current plan, sponsor and contact information will be electronically collected and transferred to a centralized database, under the guidance of the technical assistance center. Primary focus will be on those plans that are traditionally the most difficult for deferred vested participants to find, including:*

- *Defined benefit plans terminated prior to July 1, 1974;*
- *Terminated / orphaned defined contribution plans (prior to 2009);*
- *Other plans that have experienced a change in sponsor name or location, or operational status.*

*Proposals should ensure that adequate budgetary resources are dedicated for personnel, hardware, software or other resources to ensure accurate and timely collection of project data.*

3. **Shared Learning:** Projects are expected to build on the experience of existing pension counseling projects and to share their insights regarding client casework, outreach and project operations with other pension counseling projects and the national technical assistance project. No-cost tools such as the AoA Pension Counseling Listserv are available for this purpose. Proposals should detail a *methodology for accessing, learning from and contributing to the pension counseling program's shared learning environment.*

In response to this programmatic supplement announcement, the technical assistance center must submit a plan to support the Pension Counseling and Information Program's grantees in attaining these expanded programmatic requirements through the provision of: training and technical assistance; nationwide information referral and outreach; central pension plan database management, and project operations support and resource coordination.

### **Statutory Authority**

The statutory authority for grants under this program announcement is contained in Title II, Section 215 of the Older Americans Act (OAA) (42U.S.C. 3032), as amended in 2006 (P.L. 109-365).

## II. AWARD INFORMATION

Award Type:	cooperative agreement, programmatic supplemental
Estimated Federal Funds Available:	\$ 65,540
Estimated Number of Awards:	1(one)
Average Projected Award Amount:	Up to \$ 65,540
Anticipated Project Start Date:	No later than September 30, 2008
Budget Period:	One year

## III. ELIGIBILITY INFORMATION

### 1. Eligible Applicants

The purpose of this award is to enhance legal and operational support services currently being provided by the technical assistance center grantee under the Administration on Aging Pension Counseling & Information Program. Therefore, competition under this program announcement is limited to the Pension Rights Center in Washington, DC.

### 2. Cost Sharing or Matching

Under this Older Americans Act program, AoA will fund no more than 75% of the project's total cost, which means the applicant must cover at least 25% of the project's total cost with non-federal resources. In other words, for every three (3) dollars received in federal funding, the applicant must contribute at least one (1) dollar in non-federal resources toward the project's total cost, as reflected in the formula included under Item 18 in Attachment A. You can use this formula to calculate your minimum required match. A common error applicants make is to match 25% of the federal share, rather than 25% of the project's total cost. In addition, successful applicants will be accountable for all proposed match, including that above the minimum requirement.

### 3. Application Screening Criteria

All applications will be screened to assure a level playing field for all applicants. Applications that fail to meet the screening criteria described below will **not** be reviewed and will receive **no** further consideration.

In order for an application to be reviewed, it must meet the following screening requirements:

1. Applications must be submitted electronically via [www.grants.gov](http://www.grants.gov) by 11:59 p.m., Eastern Time, July 28, 2008.
2. The Project Narrative section of the Application **must be double-spaced**, on 8 ½" x 11" plain white paper with 1" margins on both sides, and a font size of not less than 11.
3. The Project Narrative **must not exceed 12 pages**.

#### IV. APPLICATION AND SUBMISSION INFORMATION

All applicants are required to submit electronically through <http://www.grants.gov> by 11:59 p.m., Eastern time, July 28, 2008.

##### 1. Address to Request Application Package

Application materials can be obtained from <http://www.grants.gov> or <http://www.aoa.gov/doingbus/fundopp/fundopp.asp>.

Application materials are also available by writing to:

U.S. Department of Health and Human Services  
Administration on Aging  
Valerie Soroka  
Office of Elder Rights  
Washington, D.C. 20201

Or by calling: 202-357-3531

Or e-mailing: [valerie.soroka@aoa.hhs.gov](mailto:valerie.soroka@aoa.hhs.gov)

Please note: AoA is requiring applications for this announcement to be submitted electronically through [www.grants.gov](http://www.grants.gov). The Grants.gov registration process can take several days. If your organization is not currently registered with [www.grants.gov](http://www.grants.gov), please begin this process immediately. **For assistance with [www.grants.gov](http://www.grants.gov), please contact them at [support@grants.gov](mailto:support@grants.gov) or 1-800-518-4726 between 7 a.m. and 9 p.m. Eastern Time.** At [www.grants.gov](http://www.grants.gov), you will be able to download a copy of the application packet, complete it off-line, and then upload and submit the application via the Grants.gov website.

Basic information and instructions for applications submitted via [www.grants.gov](http://www.grants.gov) include the following:

- You may access the electronic application for this program on [www.Grants.gov](http://www.Grants.gov). You must search the downloadable application page by the Funding Opportunity Number (HHS-2008-AoA-PC0810) or CFDA number (93.048).
- At the [www.grants.gov](http://www.grants.gov) website, you will find information about submitting an application electronically through the site, including the hours of operation. AoA strongly recommends that you do not wait until the application due date to begin the application process through [www.grants.gov](http://www.grants.gov) because of the time delay.
- All applicants must have a Dun and Bradstreet (D&B) Data Universal Numbering System number (DUNS) and register in the Central Contractor Registry (CCR). You should allow a minimum of **five days** to complete the CCR registration.
- You must submit all documents electronically, including all information included on the SF 424 and all necessary assurances and certifications.



- Prior to application submission, **Microsoft Vista and Office 2007 users** should review the grants.gov compatibility information and submission instructions provided at [www.grants.gov](http://www.grants.gov) (click on “Vista and Microsoft Office 2007 Compatibility Information”).
- **Your application must comply with any page limitation requirements described in this program announcement.**
- After you electronically submit your application, you will receive an automatic acknowledgement from [www.grants.gov](http://www.grants.gov) that contains a Grants.gov tracking number. The Administration on Aging will retrieve your application form from Grants.gov.
- We may request that you provide original signatures on forms at a later date.
- Each year organizations registered to apply for federal grants through [www.grants.gov](http://www.grants.gov) will need to renew their registration with the Central Contractor Registry (CCR). You can register with the CCR online and it will take about 30 minutes ([www.grants.gov/CCRRegister](http://www.grants.gov/CCRRegister)).

## 2. Content and Form of Application Submission

### a. DUNS Number

The Office of Management and Budget requires applicants to provide a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number when applying for Federal grants or cooperative agreements on or after October 1, 2003. It is entered on the SF 424. It is a unique, **nine-digit identification number**, which provides unique identifiers of single business entities. The DUNS number is *free and easy* to obtain.

Organizations can receive a DUNS number at no cost by calling the dedicated toll-free DUNS Number request line at 1-866-705-5711 or by using this link:  
[https://www.whitehouse.gov/omb/grants/duns\\_num\\_guide.pdf](https://www.whitehouse.gov/omb/grants/duns_num_guide.pdf).

### b. Project Narrative

The Project Narrative must be double-spaced, on 8 ½” x 11” paper with 1” margins on both sides, and a font size of not less than 11. You can use smaller font sizes to fill in the Standard Forms and Sample Formats. The suggested length for the Project Narrative is eight to twelve pages; twelve pages is the maximum length allowed. **AoA will not accept applications with a Project Narrative that exceeds 12 pages.**

The components counted as part of the 12 page limit include:

- Summary/Abstract
- Problem Statement
- Goal(s) and Objective(s)
- Proposed Intervention
- Special Target Populations and Organizations
- Outcomes
- Project Management
- Evaluation
- Dissemination

□ Organizational Capability

The Project Narrative is the most important part of the application, since it will be used as the primary basis to determine whether or not your project meets the minimum requirements for grants under Title IV of the Older Americans Act. The Project Narrative should provide a **clear and concise** description of your project. AoA recommends that your project narrative include the following components:

**Summary/Abstract.** This section should include a brief – no more than 265 words maximum - description of the proposed intervention and activities, including: the goal, priority area(s), target population, activities, and measurable outcomes. Detailed instructions for completing the summary/abstract are included in Attachment E of this document. *The applicant should amend its originally funded Summary/Abstract as necessary to reflect any enhancements made possible through this supplement.*

**Problem Statement.** This section should describe, in both quantitative and qualitative terms, the nature and scope of the particular problem or issue the proposed intervention is designed to address. Specifically, provide a concise description of your current project’s support activities in each of the project enhancement areas outlined below. Support activities include training and technical assistance, nationwide information referral and outreach, and project operations support and resource coordination. If your project is not currently engaged in support activities that address a particular enhancement area, state “no support activities are currently being undertaken.”

1. Regional Services.

- a. Region-wide referral networks addressing identified areas.
- b. Client access to regional service delivery through a toll-free number, website or other no-cost mechanism.
- c. Equivalent services and service levels to clients throughout the region:
  - i. regardless of their proximity to a physical project office;
  - ii. regardless of their age or income;  
and who
  - iii. have a connection to the region served based on current or past: client residency, employment, or marital history; plan sponsor operations; or plan administration.

2. Specialized Outreach Activities and Materials: Regional outreach materials and activities that emphasize the project’s competencies in target potential clients under ERISA and non-ERISA pension systems.

3. Staff Development:

- a. Specialist staff attendance at annual Pension Counseling Training Conference in Washington, D.C.;

- b. On-site legal training or operational consultation by the national technical assistance project;
- c. Specialist staff attendance at supplemental pension training (CLE) events; and
- d. Adequate resources dedicated to pension counseling staff development.

4. Data Collection and Reporting:

- a. Data is collected and reported in a manner consistent across all AoA-funded counseling projects. Reported data includes at least the number of clients served, client demographics, types and levels of services provided, legal issues presented, recoveries and other client outcomes, plan and sponsor types, and administrator contact information.
- b. Data is collected and reported from each of the project's multiple locations (if applicable) and on the regional project's activities as a whole.
- c. Reports are submitted to AoA and to the technical assistance project for consolidation and analysis.
- d. Plan documents are collected and retained; and pension plan documents and contact information is electronically shared with the national technical assistance center.

5. Pension Law Reference Resources:

6. Shared Learning:

7. Other Project Enhancements: Identify any additional issues or challenges that your regional counseling project faces that can be addressed by this supplemental funding.

**Goal(s) and Objectives.** This section should consist of a description of the project's goal(s) and major objectives in terms of the priority area(s). In responding to this announcement, we recommend that you identify as project goals, those elements from your "Problem Statement" that the proposed supplement will address, both in terms of expanded regional services to clients, and expanded project contribution to the Program as a whole.

**Proposed Intervention.** This section should provide a clear and concise description of the intervention, methodology, and activities you are proposing to accomplish your identified goals and objectives.

**Special Target Populations and Organizations.** This section should describe how the proposed intervention will affect vulnerable populations, specifically relating to identifying and responding to the need for pension counseling services among disadvantaged, hard-to-reach, and limited-English speaking populations.

**Outcomes.** This section of the project narrative must clearly identify the measurable outcome(s) that will result from the proposed intervention. (NOTE: AoA will not fund any project that does not include measurable outcomes). This section should also describe how

the project's findings might benefit the field at large, (e.g., how the findings could help other organizations throughout the nation to address the same or similar problems). List measurable outcomes in the attached Work Plan Grid (Attachment D) under "Measurable Outcomes" in addition to any discussion included in the narrative along with a description of how the project might benefit the field at large.

A "measurable outcome" is an observable end-result that describes how a particular intervention benefits consumers. It can describe a change in the degree of customer satisfaction; a change in the responsiveness or cost-effectiveness of a service delivery system; an increase in access to service for previously underserved target groups; a measurable increase in awareness, skills, and behaviors that result in protection of the financial security and consumer rights of elders; a measurable improvement in seniors' financial, emotional, physical, and mental well-being; or an increase in the number of cases closed with a favorable result for the client.

A measurable outcome is not a measurable "output" such as: the number of clients served; the number of training sessions held; the number of informational materials disseminated; or the number of service units provided.

Applicants should present the measurable outcomes presented in the originally funded application, highlighting changes or additions made possible through this supplement.

**Project Management.** This section should describe only those original elements of your originally funded project management plan that are amended or expanded by this supplement; as well as any new project management components necessitated by this supplement.

**Evaluation.** This section should describe only those original elements of your originally funded evaluation proposal that are amended or expanded by this supplement; as well as any new evaluative components necessitated by this supplement.

**Dissemination.** This section should describe only those original elements of your originally funded dissemination plan that are amended or expanded by this supplement; as well as any new dissemination components necessitated by this supplement.

**Organizational Capability Statement.** This section should describe only those original elements of your originally funded organizational capability statement that are amended or expanded by this supplement; as well as any new organizational components necessitated by this supplement.

## **Attachments**

**Work Plan.** The Project Work Plan should reflect, and be consistent with, the Project Narrative and Budget. It should include a statement of the project's overall goal, anticipated outcome(s), key objectives, and the major tasks/action steps that will be pursued to achieve the goal and outcome(s). For each major task/action step, the work

plan should identify timeframes involved (including start –and end-dates), and the lead person responsible for completing the task. Please use the Sample Work Plan format including in the Attachments.

**Budget Narrative.** The Budget Narrative should be provided using the format included as Attachment C of this Program Announcement. Applicants are encouraged to pay particular attention to Attachment B which provides an example of the level of detail sought. Please note that when more than 33% of a project’s budget falls under contractual, detailed budget narratives must be provided for each sub-contractor or sub-grant.

### **3. Submission Dates and Times**

The deadline for the submission of applications under this program announcement is July 28, 2008. Applications must be submitted electronically by 11:59 P.M., July 28, 2008.

Applications that fail to meet the application due date will **not** be reviewed and will receive **no** further consideration.

Grants.gov will automatically send applicants a tracking number and date of receipt verification electronically once the application has been successfully received and validated in Grants.gov.

### **4. Intergovernmental Review**

This funding opportunity announcement is not subject to the requirements of Executive Order 12372, “Intergovernmental Review of Federal Programs.”

### **5. Funding Restrictions**

The following activities are not fundable:

- Construction and/or major rehabilitation of buildings
- Basic research (e.g. scientific or medical experiments)
- Continuation of existing projects without expansion or new and innovative approaches

### **6. Other Submission Requirements**

Electronic submissions must be sent to: <http://www.grants.gov>.

Applicants submitting their application through [www.grants.gov](http://www.grants.gov) must register in the Central Contractor Registry (CCR) database in order to be able to submit the application. One element of the CCR is the DUNS number (see section IV.2), which must be obtained separately from CCR registration. Information about CCR is available at <http://www.grants.gov/CCRRegister>. You must also register with a Credential Provider to receive a username and password to securely submit your grant application. Information is available at <http://www.grants.gov/CredentialProvider>.

## V. APPLICATION REVIEW INFORMATION

### 1. Criteria

Applications are scored by assigning a maximum of 100 points across four criteria:

- Purpose and Need for Assistance - (20 points);
- Approach, Workplan and Activities - (30 points);
- Outcomes/Evaluation/Dissemination - (20 points); and
- Level of Effort - (30 points).

#### a. Purpose and Need for Assistance

Weight: 20 points

- Purpose and Need: Is the problem as identified consistent with the AoA Program purpose, as described in Section I of this Program Announcement? Does the applicant's assessment of current activities adequately clarify the need for the supplement? Are the "purpose and need" themes, as identified, appropriately and thoughtfully addressed throughout the proposal? (15 points)
- Targeting: To the extent that targeting is necessitated by this supplement: Does the applicant clearly identify and substantiate the target population's need for pension counseling services? Is the problem as identified for target populations consistent with the AoA Program purpose? (5 points)

#### b. Approach, Work Plan and Activities

Weight: 30 points

- Overall Approach: Does the applicant present a well thought out approach, consistent with AoA's program goals? Are the proposed goals and objectives clearly driven by the "Problem Statement?" Is the proposed intervention appropriately driven by the project's goals and objectives? (15 points)
- Work Plan and Activities: Is the project work plan clear, comprehensive, and directly related to both AoA's program purpose and to the proposed project's activities? Does it include sensible and feasible timeframes for the accomplishment of tasks presented? Does the work plan include specific objectives and tasks that are linked to measurable outcomes? Are the roles and responsibilities of project staff, consultants, and partners clearly defined and linked to specific objectives and tasks? Has the applicant adequately planned for the delivery of appropriate training and technical support for the regional counseling project staff, regional affiliates, and identified intake and support networks? (15 points)

#### c. Project Outcomes, Evaluation, and Dissemination

Weight: 20 points

- Outcomes: Are the expected project benefits and results clear, realistic, and consistent with both AoA's program purpose and the objectives of the proposed

project? Are the anticipated outcomes of the proposed project likely to be achieved, and will they directly support the staff of the counseling projects in their efforts to aid individuals in understanding and enforcing their pension rights? Are the proposed outcomes quantifiable and measurable, consistent with the definition of a project outcome contained in Section IV.2.b. of the Program Announcement? (10 points)

- ii. Evaluation: Does the approach adequately measure whether or not the project has achieved AoA's goals and objectives, as well as the project's proposed outcome(s)? Is the evaluation designed to capture and communicate "lessons learned" within and across the pension counseling community, or to those interested in replicating a pension counseling project? (5 points)
- iii. Dissemination: Will the dissemination plan get relevant and easy-to-use information in a timely manner to parties that might be interested in making use of its findings, particularly to those who might want to replicate the project? Does the proposal detail a plan for sharing its findings with all appropriate audiences? (5 points)

d. Level of Effort

Weight: 30 points

- i. Capacity: Is the applicant organization, its staff and affiliates, sufficiently knowledgeable of pension law, national service delivery, and the range of required counseling, outreach and support services to efficiently and effectively undertake the proposed intervention? Has the applicant demonstrated capacity and experience in using quantitative and/or qualitative performance outcome information to support its activity and management decisions? (5 points)
- ii. Staffing: Is the time commitment of project staff, consultants, and/or partners appropriate and adequate to carry out the project? Is the time commitment of the proposed director and other key project personnel sufficient to assure proper direction, management, and timely completion of the project? (5 points)
- iii. Budget: Is the project cost-effective and programmatically efficient, maximizing Federal and all other resources? Is the budget justified with respect to the adequacy and reasonableness of resources requested? Are budget line items clearly delineated and consistent with work plan objectives and the AoA Program purpose? (15 points)

## 2. Review and Selection Process

An independent review panel of at least three individuals will evaluate applications that pass the screening and meet the responsiveness criteria if applicable. These reviewers are experts in their field, and are drawn from academic institutions, non-profit organizations, state and local government, and federal government agencies. Based on the specific

programmatic considerations as outlined under section I, Funding Opportunity Description, the reviewers will comment on and score the applications, focusing their comments and scoring decisions on the criteria identified above.

Final award decisions will be made by the Assistant Secretary for Aging (ASA). In making these decisions, the ASA will take into consideration: recommendations of the review panel; reviews for programmatic and grants management compliance; the reasonableness of the estimated cost to the government considering the available funding and anticipated results; and the likelihood that the proposed project will result in the benefits expected.

Applicants have the option of omitting from the application specific salary rates or Social Security Numbers for individuals specified in the application budget.

## **VI. AWARD ADMINISTRATION INFORMATION**

### **1. Award Notices**

Successful applicants will receive an Approval Letter, and a Notice of Award. The Notice of Award is the authorizing document, and will be signed by the AoA grants management officer, the AoA authorizing official, and the AoA budget office. Unsuccessful applicants are notified within 30 days of the final funding decision and will receive a disapproval letter via U.S. mail.

### **2. Administrative and National Policy Requirements**

The award is subject to DHHS Administrative Requirements, which can be found in 45CFR Part 74 and 92 and the Standard Terms and Conditions implemented through the HHS Grants Policy Statement, located at <http://www.hhs.gov/grantsnet/adminis/gpd/index.htm>.

### **3. Reporting**

The SF-269 (Financial Status Report) is due annually and the AoA program progress report is due semi-annually. Final performance and SF-269 reports are due 90 days after the end of the project period. The final performance report will replace the final semi-annual report. However, the final performance report should include a discussion of the activities, progress, and achievements from the last 6 months of the project along with a summary of the overall project.

## **VII. AGENCY CONTACTS**

Project Officer:

U.S. Department of Health and Human Services

Administration on Aging

Washington, DC 20201

Attn: Valerie Soroka

Telephone: (202) 357-3531, e-mail: [valerie.soroka@aoa.hhs.gov](mailto:valerie.soroka@aoa.hhs.gov)



Director, Office of Grants Management:  
U.S. Department of Health and Human Services  
Administration on Aging  
Washington, DC 20201  
Attn: Sean Lewis  
Telephone: (202) 357-3445, e-mail: [Sean.lewis@aoa.hhs.gov](mailto:Sean.lewis@aoa.hhs.gov)

## **VIII. OTHER INFORMATION**

### **A. Application Elements**

To expedite the processing of applications, we request that you arrange the components of your application in the following order:

1. SF 424 – Application for Federal Assistance.
2. SF 424A – Budget Information.
3. Separate Budget Narrative/Justification (See Attachments for Sample Format).
4. SF 424B – Assurances. Note: Be sure to complete this form according to instructions and have it signed and dated by the authorized representative (see item 18d on the SF 424).
5. Certification
6. Proof of non-profit status
7. Copy of the applicant's most recent indirect cost agreement, as necessary.
8. Project Narrative with Work Plan (See Attachment for Sample Work Plan Format).
9. Organizational Capability Statement and Vitae for Key Project Personnel.
10. Letters of Commitment from Key Partners.
11. “Survey on Ensuring Equal Opportunity for Applicants” (Optional non-profit applicants)

### **B. The Paperwork Reduction Act of 1995 (P.L. 104-13)**

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

The project description and budget justification is approved under OMB control number 0985-0018.

Public reporting burden for this collection of information is estimated to average 10 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed and reviewing the collection information.

## **ATTACHMENTS**

**Attachment A:  
Instructions for completing the SF 424, Budget (SF  
424A), Budget Narrative and Other Required  
Forms**

**Attachment B:  
Budget Justification Format – Sample Format with  
Examples**

**Attachment C:  
Budget Justification – Sample Format**

**Attachment D:  
Project Work Plan - Sample Format**

**Attachment E:  
Instructions for Completing the  
Summary/Abstract**

**Attachment F:  
“Survey on Ensuring Equal Opportunity for  
Applicants”**

## Attachment A

### **Instructions for completing the SF 424, Budget (SF 424A), Budget Narrative, and Other Required Forms**

This section provides step-by-step instructions for completing the four (4) standard federal forms required as part of your grant application, including special instructions for completing Standard Budget Forms 424 and 424A. Standard Forms 424 and 424A are used for a wide variety of federal grant programs, and federal agencies have the discretion to require some or all of the information on these forms. AoA does not require all the information on these Standard Forms. Accordingly, please use the instructions below in lieu of the standard instructions attached to SF 424 and 424A to complete these forms.

#### **a. Standard Form 424**

1. **Type of Submission:** (Required): Select one type of submission in accordance with agency instructions.
  - Preapplication • Application • Changed/Corrected Application – If AoA requests, check if this submission is to change or correct a previously submitted application.
2. **Type of Application:** (Required) Select one type of application in accordance with agency instructions.
  - New . • Continuation • Revision
3. **Date Received:** Leave this field blank.
4. **Applicant Identifier:** Leave this field blank
- 5a **Federal Entity Identifier:** Leave this field blank
- 5b. **Federal Award Identifier:** For new applications leave blank. For a continuation or revision to an existing award, enter the previously assigned Federal award (grant) number.
6. **Date Received by State:** Leave this field blank.
7. **State Application Identifier:** Leave this field blank.
8. **Applicant Information:** Enter the following in accordance with agency instructions:

**a. Legal Name:** (Required): Enter the name that the organization has registered with the Central Contractor Registry. Information on registering with CCR may be obtained by visiting the Grants.gov website.

**b. Employer/Taxpayer Number (EIN/TIN):** (Required): Enter the Employer or Taxpayer Identification Number (EIN or TIN) as assigned by the Internal Revenue Service.

**c. Organizational DUNS:** (Required) Enter the organization's DUNS or DUNS+4 number received from Dun and Bradstreet. Information on obtaining a DUNS number may be obtained by visiting the Grants.gov website.

**d. Address:** (Required) Enter the complete address including the county.

**e. Organizational Unit:** Enter the name of the primary organizational unit (and department or division, if applicable) that will undertake the project.

**f. Name and contact information of person to be contacted on matters involving this application:** Enter the name (First and last name required), organizational affiliation (if affiliated with an organization other than the applicant organization), telephone number (Required), fax number, and email address (Required) of the person to contact on matters related to this application.

**9. Type of Applicant:** (Required) Select the applicant organization "type" from the following drop down list.

A. State Government B. County Government C. City or Township Government D. Special District Government E. Regional Organization F. U.S. Territory or Possession G. Independent School District H. Public/State Controlled Institution of Higher Education I. Indian/Native American Tribal Government (Federally Recognized) J. Indian/Native American Tribal Government (Other than Federally Recognized) K. Indian/Native American Tribally Designated Organization L. Public/Indian Housing Authority M. Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education) N. Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education) O. Private Institution of Higher Education P. Individual Q. For-Profit Organization (Other than Small Business) R. Small Business S. Hispanic-serving Institution T. Historically Black Colleges and Universities (HBCUs) U. Tribally Controlled Colleges and Universities (TCCUs) V. Alaska Native and Native Hawaiian Serving Institutions W. Non-domestic (non-US) Entity X. Other (specify)

**10. Name Of Federal Agency:** (Required) Enter U.S. Administration on Aging

**11. Catalog Of Federal Domestic Assistance Number/Title:** The CFDA number can be found on page one of the Program Announcement.

**12. Funding Opportunity Number/Title:** (Required) The Funding Opportunity Number and title of the opportunity can be found on page one of the program announcement.

13. **Competition Identification Number/Title:** Leave this field blank.
14. **Areas Affected By Project:** List the largest political entity affected (cities, counties, state etc).
15. **Descriptive Title of Applicant’s Project:** (Required) Enter a brief descriptive title of the project.
16. **Congressional Districts Of:** (Required) 16a. Enter the applicant’s Congressional District, and 16b. Enter all district(s) affected by the program or project. Enter in the format: 2 characters State Abbreviation – 3 characters District Number, e.g., CA-005 for California 5th district, CA-012 for California 12<sup>th</sup> district, NC-103 for North Carolina’s 103rd district. • If all congressional districts in a state are affected, enter “all” for the district number, e.g., MD-all for all congressional districts in Maryland. • If nationwide, i.e. all districts within all states are affected, enter US-all.
17. **Proposed Project Start and End Dates:** (Required) Enter the proposed start date and end date of the project.
18. **Estimated Funding:** (Required) Enter the amount requested or to be contributed during the first funding/budget period by each contributor. Value of in-kind contributions should be included on appropriate lines, as applicable. If the action will result in a dollar change to an existing award, indicate only the amount of the change. For decreases, enclose the amounts in parentheses.

**NOTE:** Applicants should review cost sharing or matching principles contained in Subpart C of 45 CFR Part 74 or 45 CFR Part 92 before completing Item 18 and the Budget Information Sections A, B and C noted below.

All budget information entered under item 18 should cover the upcoming budget period. For sub-item 18a, enter the federal funds being requested. Sub-items 18b-18e is considered matching funds. The dollar amounts entered in sub-items 18b-18f must total at least 1/3<sup>rd</sup> of the amount of federal funds being requested (the amount in 18a). For a full explanation of AoA’s match requirements, see the information in the box below. For sub-item 18f, enter only the amount, if any, that is going to be used as part of the required match.

There are two types of match: 1.) non-federal cash and 2.) non-federal non-cash (i.e., in-kind). In general, costs borne by the applicant and cash contributions of any and all third parties involved in the project, including sub-grantees, contractors and consultants, are considered cash matching funds. Generally, most contributions from third parties will be non-cash (i.e., in-kind) matching funds. Examples of non-cash (in-kind) match include: volunteered time and use of facilities to hold meetings or conduct project activities.

**NOTE: Indirect charges** may only be requested if: (1) the applicant has a current indirect cost rate agreement approved by the Department of Health and Human Services or another

federal agency; or (2) the applicant is a state or local government agency. State governments should enter the amount of indirect costs determined in accordance with DHHS requirements. **If indirect costs are to be included in the application, a copy of the approved indirect cost agreement must be included with the application.**

**AOA’s Match Requirement**

Under this and other OAA programs, AoA will fund no more than 75 % of the **project’s total cost**, which means the applicant must cover at least 25% of the **project’s total cost** with non-federal resources. In other words, for every three (3) dollars received in federal funding, the applicant must contribute at least one (1) dollar in non-federal resources toward the project’s total cost (i.e., the amount on line 18g.). This “three-to-one” ratio is reflected in the following formula which you can use to calculate your minimum required match:

$$\frac{\text{Federal Funds Requested (i.e., amount on line 15a)}}{3} = \frac{\text{Minimum Match Requirement}}$$

For example, if you request \$100,000 in federal funds, then your minimum match requirement is \$100,000/3 or \$33,333. In this example the **project’s total cost** would be \$133,333.

A **common error** applicants make is to match 25% of the federal share, rather than 25% of the project’s total cost, so be sure to use one of the formulas above to calculate your match requirement

**19. Is Application Subject to Review by State Under Executive Order 12372 Process?**

Check c. Program is not covered by E.O. 12372

**20. Is the Applicant Delinquent on any Federal Debt?** (Required) This question applies to the applicant organization, not the person who signs as the authorized representative. If yes, include an explanation on the continuation sheet.

**21. Authorized Representative:** (Required) To be signed and dated by the authorized representative of the applicant organization. Enter the name (First and last name required) title (Required), telephone number (Required), fax number, and email address (Required) of the person authorized to sign for the applicant. A copy of the governing body’s authorization for you to sign this application as the official representative must be on file in the applicant’s office. (Certain Federal agencies may require that this authorization be submitted as part of the application.)

**b. Standard Form 424A**

NOTE: Standard Form 424A is designed to accommodate applications for multiple grant programs; thus, for purposes of this AoA program, many of the budget item columns and rows are not applicable. You should only consider and respond to the budget items for which guidance is provided below. Unless otherwise indicated, the SF 424A should reflect a one year budget.

***Section A - Budget Summary***

Line 5: Leave columns (c) and (d) blank. Enter TOTAL federal costs in column (e) and total non-federal costs (including third party in-kind contributions and any program income to be used as part of the grantee match) in column (f). Enter the sum of columns (e) and (f) in column (g).

***Section B - Budget Categories***

Column 3: Enter the breakdown of how you plan to use the federal funds being requested by object class category (see instructions for each object class category below).

Column 4: Enter the breakdown of how you plan to use the non-federal share by object class category.

Column 5: Enter the total funds required for the project (the sum of Columns 3 and 4) by object class category.

**Separate Budget Narrative/Justification Requirement**

You must submit a separate budget narrative as part of your application. **A blank sample format (and one with examples) has been included in the attachments for your use in developing and presenting your Budget Narrative.** In your budget justification, you should include a breakdown of the budget which shows the costs for all of the object class categories noted in Section B, across three columns: federal; non-federal cash; and non-federal in-kind. The justification should fully explain and justify the costs in each of the major budget items for each of the object class categories, as described below. Third party in-kind contributions designated as non-federal match contributions should be clearly identified and justified separately from the justification for the budget line items. The full budget justification should be included in the application immediately following the SF 424 forms. **The budget justification should provide a detailed breakdown of large dollar values. A separate budget justification must be completed for each year of support requested.**



Line 6a: Personnel: Enter total costs of salaries and wages of applicant/grantee staff. Do not include the costs of consultants; consultant costs should be included under 6h - Other. In the Justification: Identify the project director, if known. Specify the key staff, their titles, brief summary of project related duties, and the percent of their time commitments to the project in the budget justification.

Line 6b: Fringe Benefits: Enter the total costs of fringe benefits unless treated as part of an approved indirect cost rate. In the Justification: Provide a break-down of amounts and percentages that comprise fringe benefit costs, such as health insurance, FICA, retirement insurance, etc.

Line 6c: Travel: Enter total costs of out-of-town travel (travel requiring per diem) for staff of the project. Do not enter costs for consultant's travel - this should be included in line 6h. In the Justification: Include the total number of trips, destinations, purpose, length of stay, subsistence allowances and transportation costs (including mileage rates).

Line 6d: Equipment: Enter the total costs of all equipment to be acquired by the project. For all grantees, "equipment" is non-expendable tangible personal property having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit. If the item does not meet the \$5,000 threshold, include it in your budget under Supplies, line 6e. In the Justification: Equipment to be purchased with federal funds must be justified as necessary for the conduct of the project. The equipment must be used for project-related functions; the equipment, or a reasonable facsimile, must not be otherwise available to the applicant or its sub-grantees. The justification also must contain plans for the use or disposal of the equipment after the project ends.

Line 6e: Supplies: Enter the total costs of all tangible expendable personal property (supplies) other than those included on line 6d. In the Justification: Provide general description of types of items included.

Line 6f: Contractual: Enter the total costs of all contracts, including (1) procurement contracts (except those, which belong on other lines such as equipment, supplies, etc.). Also include any contracts with organizations for the provision of technical assistance. Do not include payments to individuals on this line. In the Justification: Attach a list of contractors indicating the name of the organization, the purpose of the contract, and the estimated dollar amount. If the name of the contractor, scope of work, and estimated costs are not available or have not been negotiated, indicate when this information will be available. Whenever the applicant/grantee intends to delegate a substantial part (one-third, or more) of the project work to another agency, the applicant/grantee must provide a completed copy of Section B, SF 424A Budget Categories for each contractor, and separate budget justifications for each year of support requested.

Line 6g: Construction: Leave blank since construction is not an allowable cost under this AoA program.

Line 6h: Other: Enter the total of all other costs. Such costs, where applicable, may include, but are not limited to: insurance, medical and dental costs (i.e. for project volunteers this is different from personnel fringe benefits); non-contractual fees and travel paid directly to *individual* consultants; local transportation (all travel which does not require per diem is considered local travel); postage; space and equipment rentals/lease; printing and publication; computer use; training and staff development costs (i.e. registration fees). If a cost does not clearly fit under another category, and it qualifies as an allowable cost, then rest assured this is where it belongs. In the Justification: Provide a reasonable explanation for items in this category. For individual consultants, explain the nature of services provided and the relation to activities in the work plan. Describe the types of activities for staff development costs.

Line 6i: Total Direct Charges: Show the totals of Lines 6a through 6h.

Line 6j: Indirect Charges: Enter the total amount of indirect charges (costs), if any. If no indirect costs are requested, enter "none." Indirect charges may be requested if: (1) the applicant has a current indirect cost rate agreement approved by the Department of Health and Human Services or another federal agency; or (2) the applicant is a state or local government agency.

Justification: State governments should enter the amount of indirect costs determined in accordance with DHHS requirements. An applicant that will charge indirect costs to the grant must enclose a copy of the current rate agreement. If the applicant organization is in the process of initially developing or renegotiating a rate, it should immediately upon notification that an award will be made, develop a tentative indirect cost rate proposal based on its most recently completed fiscal year in accordance with the principles set forth in the cognizant agency's guidelines for establishing indirect cost rates, and submit it to the cognizant agency. Applicants awaiting approval of their indirect cost proposals may also request indirect costs. It should be noted that when an indirect cost rate is requested, those costs included in the indirect cost pool should not also be charged as direct costs to the grant. Also, if the applicant is requesting a rate which is less than what is allowed under the program, the authorized representative of the applicant organization must submit a signed acknowledgement that the applicant is accepting a lower rate than allowed.

Line 6k: Total: Enter the total amounts of Lines 6i and 6j.

Line 7: Program Income: As appropriate, include the estimated amount of income, if any, you expect to be generated from this project. Program Income must be used as additional costs.

***Section C - Non-Federal Resources***

Line 12: Enter the amounts of non-Federal resources that will be used in carrying out the proposed project, by source (Applicant; State; Other) and enter the total amount in Column (e). Keep in mind that if the match requirement is not met, federal dollars may be reduced.

***Section D - Forecasted Cash Needs*** - Not applicable.

***Section E - Budget Estimate of Federal Funds Needed for Balance of the Project***

Line 20: Section E is relevant for multi-year grant applications, where the project period is 24 months or longer. This section does not apply to grant awards where the project period is less than 17 months.

**Section F - Other Budget Information**

Line 22: Indirect Charges: Enter the type of indirect rate (provisional, predetermined, final or fixed) to be in effect during the funding period, the base to which the rate is applied, and the total indirect costs. Include a copy of your current Indirect Cost Rate Agreement.

Line 23: Remarks: Provide any other comments deemed necessary.

**c. Standard Form 424B - Assurances**

This form contains assurances required of applicants under the discretionary funds programs administered by the Administration on Aging. Please note that a duly authorized representative of the applicant organization must certify that the organization is in compliance with these assurances.

**d. Certification Regarding Lobbying**

This form contains certifications that are required of the applicant organization regarding lobbying. Please note that a duly authorized representative of the applicant organization must attest to the applicant's compliance with these certifications.

**e. Other Application Components**

**Survey on Ensuring Equal Opportunity for Applicants**

The Office of Management and Budget (OMB) has approved an HHS form to collect information on the number of faith-based groups applying for a HHS grant. Non-profit organizations, excluding private universities, are asked to include a completed survey with their grant application packet. Attached you will find the OMB approved HHS “Survey on Ensuring Equal Opportunity for Applicants” form (Attachment G). Your help in this data collection process is greatly appreciated.

**Proof of Non-Profit Status**

Non-profit applicants must submit proof of non-profit status. Any of the following constitutes acceptable proof of such status:

A copy of a currently valid IRS tax exemption certificate.

A statement from a State taxing body, State attorney general, or other appropriate State official certifying that the applicant organization has a non-profit status and that none of the net earnings accrue to any private shareholders or individuals.

A certified copy of the organization’s certificate of incorporation or similar document that clearly establishes non-profit status.

**1. Indirect Cost Agreement**

Applicants that have included indirect costs in their budgets must include a copy of the current indirect cost rate agreement approved by the Department of Health and Human Services or another federal agency. This is optional for applicants that have not included indirect costs in their budgets.

**Attachment B: Budget Narrative, Page 1 – Sample Format with EXAMPLES**

Object Class Category	Federal Funds	Non-Federal Cash	Non-Federal In-Kind	III. TOTAL	<u>Justification</u>
Personnel	\$40,000		\$5,000	\$45,000	Project Supervisor (name) = .3FTE @ \$50,000/yr = \$15,000 Project Director (name) = 1FTE @ \$30,000 = \$30,000
Fringe Benefits	\$12,600	0	0	\$12,600	Fringes on Supervisor and Director @ 28% of salary.  FICA (7.65%) = \$3,442 Health (12%) = \$5,400 Dental (5%) = \$2,250 Life (2%) = \$900 Workers Comp Insurance (.75%) = \$338 Unemployment Insurance (.6%) = \$270
Travel	\$3,000	0	\$ 967	\$3,967	Travel to Annual Grantee Meeting: Airfare: 1 RT x 2 people x \$750/RT = \$1,500 Lodging: 3 nights x 2 people x \$100/night = \$ 600 Per Diem: 4 days x 2 people x \$40/day = \$ 320  Out-of-Town Project Site Visits Car mileage: 3 trips x 2 people x 350 miles/trip x \$ .365/mile = \$ 767 Lodging: 3 trips x 2 people x 1 night/ trip x \$50/night = \$300 Per Diem: 3 trips x 2 people x 2days/trip x \$40/day = \$480

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**Attachment B: Budget Narrative, Page 2 - Sample Format with EXAMPLES**

<b>Object Class Category</b>	<b>Federal IV. Funds</b>	<b>Non-Federal Cash</b>	<b>Non-Federal In-Kind</b>	<b><u>TOTAL</u></b>	<b><u>Justification</u></b>
<b>Equipment</b>	0	0	0	0	No equipment requested
<b>Supplies</b>	\$1,500		\$2,000	\$3,500	Laptop computer for use in client intakes = \$1,340 Consumable supplies (paper, pens, etc.) \$100/mo x 12 months = \$1,200 Copying \$80/mo x 12 months = \$960
<b>Contractual</b>	\$200,000	\$50,000	0	\$250,000	Contracts to A,B,C direct service providers (name providers) adult day care contractor = \$75,000 respite care contractor in home= \$75,000 respite care contractor-NF = \$50,000 personal care/companion provider = \$50,000  See detailed budget justification for each provider (and then provide it!)

**Attachment B: Budget Narrative, Page 3 – Sample Format with EXAMPLES**

<b>Other</b>	\$10,000	\$8,000	\$19,800	\$37,800	Local conference registration fee (name conference) = \$ 200 Printing brochures (50,000 @ \$ .05 ea) = \$ 2,500 Video production = \$19,800 Video Reproduction = \$ 3,500 NF Respite Training Manual reproduction \$3/manual x \$2000 manuals = \$ 6,000 Postage \$150/mo x 12 months = \$ 1,800 Caregiver Forum meeting room rentals \$200/day x 12 forums = \$ 2,400 Respite Training Scholarships = \$1,600
<b>Indirect Charges</b>	0	0	0	0	None
<b>TOTAL</b>	\$267,100	\$58,000	\$27,767	\$352,267	

75% or less  
of Total  
Cost  
**(Federal \$)**

25% or more of Total  
Cost  
**(Required Match)**

**Attachment C: Budget Narrative – Page 1 – Sample Format**

Object Class Category	Federal Funds	Non-Federal Cash	Non-Federal In-Kind	V. TOTAL	<u>Justification</u>
Personnel					
Fringe Benefits					
Travel					
Equipment					



**Attachment C: Budget Narrative – Page 2 – Sample Format**

Object Class Category	Federal Funds	Non-Federal Cash	Non-Federal In-Kind	VI. TOTAL	<u>Justification</u>
Supplies					
Contractual					
Other					
Indirect Charges					
<b>TOTAL</b>					

## Attachment D: Project Work Plan, Page 1 – Sample Format

<b>Goal:</b>														
<b>Measurable Outcome(s):</b>														
Major Objectives	Key Tasks	Lead Person	Timeframe (Start and End Date by Month)											
			1	2	3	4	5	6	7	8	9	10	11	12
1.														
2.														

**Attachment D: Project Work Plan, Page 2 – Sample Format**

Major Objectives	Key Tasks	Lead Person	Timeframe (Start and End Date by Month)														
			1	2	3	4	5	6	7	8	9	10	11	12			
3.																	
4.																	

**Attachment D: Project Work Plan, Page 3 – Sample Format**

Major Objectives	Key Tasks	Lead Person	Timeframe (Start and End Date by Month)												
			1	2	3	4	5	6	7	8	9	10	11	12	
5.															
6.															

**NOTE:** Please do not infer from this sample format that your work plan must have 6 major objectives. If you need more pages, simply repeat this format on additional pages.

## Attachment E

### Instructions for Completing the Project Summary/Abstract

- All applications for grant funding must include a Summary/Abstract that concisely describes the proposed project. It should be written for the general public.
- To ensure uniformity, please limit the length to no more than 265 words on a single page with a font size of not less than 11, doubled-spaced.
- The abstract must include the project's goal(s), objectives, overall approach (including target population and significant partnerships), anticipated outcomes, products, and duration. The following are very simple descriptions of these terms, and a sample Compendium abstract.

**Goal(s)** – broad, overall purpose, usually in a mission statement, i.e. what you want to do, where you want to be

**Objective(s)** – narrow, more specific, identifiable or measurable steps toward a goal. Part of the planning process or sequence (the “how”). Specific performances which will result in the attainment of a goal.

**Outcomes** - measurable results of a project. Positive benefits or negative changes, or measurable characteristics that occur as a result of an organization's or program's activities. (outcomes are the end-point)

**Products** – materials, deliverables.

- A model abstract/summary is provided below:

The grantee, Okoboji University, supports this three year Dementia Disease demonstration (DD) project in collaboration with the local Alzheimer's Association and related Dementias groups. The goal of the project is to provide comprehensive, coordinated care to individuals with memory concerns and to their caregivers. The approach is to expand the services and to integrate the bio-psycho-social aspects of care. The objectives are: 1) to provide dementia specific care, i.e., care management fully integrated into the services provided; 2) to train staff, students and volunteers; 3) to establish a system infrastructure to support services to individuals with early stage dementia and to their caregivers; 4) to develop linkages with community agencies; 5) to expand the assessment and intervention services; 6) to evaluate the impact of the added services; 7) to disseminate project information. The expected outcomes of this DD project are: patients will maintain as high a level of mental function and physical functions (thru Yoga) as possible; caregivers will increase ability to cope with changes; and pre and post – project patient evaluation will reflect positive results from expanded and integrated services. The products from this project are: a final report, including evaluation results; a website; articles for publication; data on driver assessment and in-home cognitive retraining; abstracts for national conferences.

## Attachment F

### Survey Instructions on Ensuring Equal Opportunity for Applicants

**Applicant Organization's Name:** \_\_\_\_\_

**Applicant's DUNS Number:** \_\_\_\_\_

**Grant Name:** \_\_\_\_\_ **CFDA Number:** \_\_\_\_\_

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

Yes

No

2. 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

3. 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

4. Is the applicant a faith-based/religious organization?

Yes

No

5. Is the applicant a non-religious community-based organization?

Yes

No

6. Is the applicant an intermediary that will manage the grant on behalf of other organizations?

Yes

No

7. Has the applicant ever received a government grant or contract (Federal, State, or local)?

Yes

No

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

Yes

No

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

1. 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.

2. 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.
3. Annual budget means the amount of money your organization spends each year on all of its activities.
4. Self-identify.
5. An organization is considered a community-based organization if its headquarters/service location shares the same zip code as the clients you serve.
6. An “intermediary” is an organization that enables a group of small organizations to receive and manage government funds by administering the grant on their behalf.
7. Self-explanatory.
8. Self-explanatory.

### **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 1890-0014. 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:** U.S. Department of Education, Washington, D.C. 2202-4651.

**If you have comments or concerns regarding the status of your individual submission of this form, write directly to:** Joyce I. Mays, Application Control Center, U.S. Department of Education, 7<sup>th</sup> and D Streets, SW, ROB-3, Room 3671, Washington, D.C. 20202-4725

OMB No. 1890-0014 Exp. 1/31/20

