Technical Assistance/Program Support for State Planning Grants

Program Announcement and Grant Application Instructions

U.S. Administration on Aging
2005

Department of Health and Human Services (HHS)

Administration on Aging (AoA)

AoA Office: Office of Community Based Services

Funding Opportunity Title: Technical Assistance/Program Support for State Planning Grants

Announcement Type: Initial

Funding Opportunity Number: HHS-2005-AoA-PG-0510

Catalog of Federal Domestic Assistance (CFDA) Number: 93.048

Key Dates: The deadline date for submission of applications is September 15, 2005

I.   FUNDING OPPORTUNITY DESCRIPTION

A. Summary

The Administration on Aging will award a Technical Assistance and Support grant to a private non-profit entity for the purpose of assisting States in the design of best practice models for State and Area Plans on Aging. The award will be a cooperative agreement as the Administration on Aging will be substantially involved in the development and execution of the activities of the project. The cooperative agreement will provide for technical assistance and support to States funded through a companion announcement (Planning Grants Project, HHS-2005-AoA-PG-0506). The full text of the announcement includes a description of the technical assistance project, and all the instructions necessary to prepare and submit an application to compete for this award.

B. Statutory Authority.

The statutory authority for grants under this program announcement is contained in Title IV of the Older Americans Act, (42 U.S.C. 3001 et seq.), as amended by the Older Americans Act Amendments of 2000, P.L. 106-501 (Catalog of Federal Domestic Assistance 93.048, Title IV Discretionary Projects).

C. Priority Area Description

Background

The Older Americans Act (OAA) requires State agencies/units on aging (SUAs) to develop and implement a "State Plan on Aging," with criteria outlined by the Assistant Secretary on Aging (see OAA, Section 307(a)). States are also required to develop a uniform format for their area agencies on aging (AAAs) to use in developing area plans. State plans are to be based on area plans on aging. It is the intent of the Administration on Aging (AoA) that the aging network move toward a coordinated, systematic and

consistent planning process to ensure that the plans developed for the compliance of OAA requirements are also reflective of the comprehensive planning efforts of SUAs and AAAs.

The AoA plans to fund 6-10 planning projects for a project period of three years, with the first year focusing on development of planning models. Second and third year projects will focus on model testing and model evaluation, respectively. ***This competition will provide companion technical assistance and support for the State Planning Grants project.***

Project Objectives and Activities

The purpose of this competition is to ***provide appropriate technical assistance and support to States in their efforts to demonstrate clear and purposeful methods of comprehensive State and Area planning methodologies***. One award will be made for a project period of three years. The project will be a cooperative effort among the technical consultant, AoA, and the State planning grantees. The first year of the project will be a model development year that will focus on defining steps to comprehensive planning, and developing a model(s) that includes all of the elements listed below (and other elements appropriate to comprehensive planning). The second and third years of the project will involve field-testing and refining the model.

The State planning grant model(s) will address all of the following elements of State/area planning: (1) Enhancement and inclusion of Performance Outcome Measures in State and Area Agency on Aging planning processes (including budgeting); (2) Incorporation of AoA Strategic Action Plan goals into State and Area Agency planning processes; (3) Coordination of State and Area Agency on Aging planning; (4) Incorporation of Program Development Initiatives, e.g., Aging and Disability Resource Centers (ADRCs), Evidence Based Prevention programs, etc., into full planning process (including budgeting); (5) Integration of long-term care services/planning within the State; and (6) Incorporation of internet technology (IT) systems management into planning.

The technical consultant entity will be responsible for, at a minimum, the following tasks/activities:

- Identify pertinent research for review;

- Provide a forum (at least monthly) for work sessions with Planning grantees and AoA;

- Identify potential strategies for quantifying program impacts;

- Establish an advisory group comprised of individuals with expertise in planning;

- Conduct a three day on-site conference, annually, with grantees and representatives of AoA, including: (1) securing space; (2) recording/summarizing the meeting; and (3) conducting registration activities; and

- Coordinate development of one or more State and Area Agency on Aging planning models, with input from Planning grantees, AoA and the other State Agencies on Aging.

II.   AWARD INFORMATION

Anticipated Priority Area Funding: $200,000
Anticipated Number of Grant Awards: 1
The initial budget period for this award will be from September 30, 2005 to September 29, 2006.
Anticipate project period (pending availability of funding) will be September 30, 2005 to September 29, 2008.

III.   ELIGIBILITY INFORMATION

1. Eligible Applicants

The award will be made to a national non-profit entity with the following qualifications:

1. Thorough and comprehensive knowledge of all aspects of applicable laws and regulations. This includes an understanding of the responsibilities of the Older Americans Act network: the Administration on Aging, State Units on Aging, Area Agencies on Aging and providers. ***In particular applicants must demonstrate a thorough knowledge of the State and Area Plan development processes***.

2. In-depth knowledge of Administration on Aging program initiatives, including Aging and Disability Resource Centers, Evidence-Based Prevention Programs, Livable Communities, Performance Based Outcomes, etc.

Demonstrated capacity in the following areas is desirable:

- Customer involvement in program planning and implementation.
- Successful development of web-based database and decision-support systems.
- Data collection and reporting on programs and services under the Older Americans Act.
- Providing customer training and user support.

Staff of the applicant entities should have the following skills:

- Extensive experience in policy, program operations and technical assistance to the Aging Network.

- Demonstrated expertise in the development of models and tools to assist state units on aging, area agencies on aging and provider organizations in developing and implementing services for older adults.

2. Cost Sharing or Matching

Under this Older Americans Act (OAA) 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 (i.e., the amount on line 15g.).   This "three-to-one" ratio is reflected in the formula included under Item 15 in Attachment B. 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.   While the matching requirement will not be used as a responsiveness criterion for purposes of screening out, applicants must show their anticipated match in their applications.

Application Screening Criteria

All applications will be screened to assure a level playing field for all applicants. Applications that fail to meet the three 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:

- Applications must be submitted electronically via www.grants.gov by midnight September 15, 2005.

- The Project Narrative section of the Application must be double-spaced, on single-sided 8 ½" x 11" plain white paper with 1" margins on both sides, and a font size of not less than 11.

- The Project Narrative must not exceed 20 pages. NOTE: The Project Work Plan, Letters of Commitment, and Vitae of Key Project Personnel **are not counted** as part of the Project Narrative for purposes of the 20-page limit.

IV.   APPLICATION AND SUBMISSION INFORMATION

1. Address to Request Application Package

Application materials can be obtained from http://www.grants.gov or www.aoa.gov.

Application kits are also available by writing to:

U.S. Department of Health and Human Services
Administration on Aging
Deborah Burns
Office of Community Based Services
Washington, D.C. 20201

Or by calling: 202-357-3581
Or by e-mailing: Deborah.Burns@aoa.hhs.gov

While applications kits may be obtained by mail, telephone or from the AoA website, **all applications for this funding opportunity MUST be submitted electronically through** www.grants.gov. You **may not**

e-mail an electronic copy of a grant application to us. On 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. **If you need assistance using Grants.gov, you may contact Arthur Miller at 202/357- 3438.**   If you have general questions about the announcement or are unable to apply electronically, please contact Deborah Burns at 202-357-3581. For additional information on Grants.gov you may also go to AoA's website at http://www.aoa.gov/doingbus/grants/grants.asp.

Please note, AoA is requiring applications for this announcement to be submitted electronically through www.grants.gov. The Grants.gov registration process can take several days. If you are not currently registered with www.grants.gov, please begin this process immediately. **For assistance with www.grants.gov, please contact AoA's Grants.gov helpdesk at 202-357-3438.** At 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.

Applications submitted via www.grants.gov: electronically via Grants.gov:

- You may access the electronic application for this program on www.grants.gov. You must search the downloadable application page by the CFDA number, 93.048.
- At the www.grants.gov website, you will find information about submitting an application electronically through the site, as well as the hours of operation. AoA strongly recommends that you do not wait until the application due date to begin the application process through Grants.gov because of the time delay.
- All applicants must have a Dun and Bradstreet (D&B) Data Universal Numbering System number 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 SF424 and all necessary assurances and certifications.
- 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 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.

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 D-U-N-S 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.

B. Project Narrative

The Project Narrative must be double-spaced, on single-sided 8 ½" x 11" plain white 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 ten to twenty pages; twenty pages is the maximum length allowed. *AoA will not accept applications with a Project Narrative that exceeds 20 pages, excluding the Project Work Plan. The Project Work Plan, Letters of Cooperation, and Vitae of Key Personnel are not counted as part of the Project Narrative for purposes of the 20-page limit, but all of the other sections noted above are included in the limit.*

The components counted as part of the 20 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
- ❑ Application Survey Form

The Project Narrative is the most important part of the application, since it will be used as the primary basis by AoA 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 300 words maximum - description of the proposed project, including: the goal, the list of objectives and the products to be developed. Detailed instructions for completing the summary/abstract are included in Attachment F of this document.

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, including how the project will potentially affect the elderly population and/or their caregivers (including specific subgroups within those populations), and possibly the health care and social services systems (e.g., the

use of health care and/or nursing home services.) (Suggested Length and Format: two to four paragraphs.)

Goals and Objectives.   This section should consist of a description of the project's goal(s) and major objectives. NOTE: Unless the project involves multiple, complex interventions, we recommend you have only one overall goal. (Suggested Length and Format: Preferably, include this information in the attached project work plan grid; alternatively, use a bulleted format or describe in one paragraph.)

Proposed Intervention.   This section should provide a clear and concise description of the intervention you are proposing to use to address the problem described in section 2. You should also describe the rationale for using the particular intervention, including factors such as: "lessons learned" for similar projects previously tested in your community, or in other areas of the country; factors in the larger environment that have created the "right conditions" for the intervention (e.g., existing social, economic or political factors that you'll be able to take advantage of, etc.). Also note any major barriers you anticipate encountering, and how your project will be able to overcome those barriers. Discuss prior planning development experience and the impact on service systems at the State and AAA level. Be sure to describe the role and makeup of any strategic partnerships you plan to involve in implementing the intervention, including other organizations, funders, and/or consumer groups. (Suggested Length and Format: Three to five pages.)

Special Target Populations and Organizations.   This section should describe how you plan to involve community-based organizations in a meaningful way in the planning and implementation of the proposal project. This section should also describe how the proposed intervention will target disadvantaged populations, including limited-English speaking populations.

Outcomes. This section of the project narrative must clearly identify the <u>measurable</u> outcome(s) that will result from the project. (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.) (Suggested Length and Format: For your measurable outcomes: preferably list them in the attached work plan grid (Attachment E) under "Measurable Outcomes"; alternatively, present them in bullet format. Narrative format for measure outcomes, as well as the description of how the project might benefit the field at large – total one to two pages).

You should keep the focus on this section on describing <u>what</u> outcome(s) will be produced by the project. You should use the Evaluation section noted below to describe <u>how</u> the outcome(s) will be measured and reported.

Your application will be scored on the clarity and nature of your proposed outcomes, not on the number of outcomes you cite. It is totally appropriate for a project to have only ONE outcome that it is trying to achieve through the intervention reflected in the project's design.

Project Management. This section should include a clear delineation of the roles and responsibilities of project staff, consultants and partner organizations, and how they will contribute to achieving the project's objectives and outcomes. It should specify who would have day-to-day responsibility for key tasks such as: leadership of project; monitoring the project's on-going progress, preparation of reports;

communications with other partners and AoA. It should also describe the approach that will be used to monitor and track progress on the project's tasks and objectives. (Suggested Length and Format: Three paragraphs.)

Evaluation. This section should describe the method(s), techniques and tools that will be used to: 1.) determine whether or not the proposed intervention achieved its anticipated outcome(s), and 2.) document the "lessons learned" – both positive and negative - from the project that will be useful to people interested in replicating the intervention, if it proves successful. (Suggested Length and Format: Five to eight paragraphs.)

Dissemination.   This section should describe the method that will be used to disseminate the project's results and findings in a timely manner and in easily understandable formats, to parties who might be interested in using the results of the project to inform practice, service delivery, program development, and/or policy-making, including and especially those parties who would be interested in replicating the project. (Suggested Length – three to five paragraphs.)

Organizational Capability Statement and Vitae for Key Project Personnel. Each application should include an organizational capability statement and vitae for key project personnel. The organizational capability statement should describe how the applicant agency (or the particular division of a larger agency which will have responsibility for this project) is organized, the nature and scope of its work and/or the capabilities it possesses. This description should cover capabilities of the applicant agency not included in the program narrative, such as any current or previous relevant experience and/or the record of the project team in preparing cogent and useful reports, publications, and other products. If appropriate, include an organization chart showing the relationship of the project to the current organization. Include short vitae for key project staff only. These vitae will not count towards the narrative page limit. Also include information about any contractual organization(s) that will have a significant role(s) in implementing project and achieving project goals.

ADDITIONAL NARRATIVE ITEMS NOT INCLUDED IN 20 PAGE LIMIT

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 the timeframes involved (including start- and end-dates), and the lead person responsible for completing the task. A Sample Work Plan format for your use is included in the Attachments.   (Suggested Length and Format: use the sample grid; alternatively, not more than two pages preferably presented in bulleted format.)

Letters of Commitment from Key Participating Organizations and Agencies. Include confirmation of the commitments to the project (should it be funded) made by key collaborating organizations and agencies in this part of the application.   Any organization that is specifically named to have a significant role in carrying out the project should be considered an essential collaborator.

C. Budget and Budget Justification

 Instructions for the budget and budget justification are included in Attachment B.

D. 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.

E. AoA Certification

This form contains certifications that are required of the applicant organization regarding (a) lobbying; (b) debarment, suspension, and other responsibility matters; and (c) drug-free workplace requirements. Please note that a duly authorized representative of the applicant organization must attest to the applicant's compliance with these certifications.

F. Other Application Components

Survey on Ensuring Equal Opportunity for Applicants
The Office of Management and Budget (OMB) has approved a form to collect information on the number of faith-based groups applying for Federal grants. 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 (see Attachments). Please be sure to return it with your grant application.

3.   Submission Dates and Times

The deadline for the submission of applications under this program announcement is September 15, 2005. Applications must be submitted electronically by midnight, September 15, 2005.

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

Applicants applying through Grants.gov will automatically receive 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. <u>**Funding Restrictions**</u>

The following activities are not fundable activities:

- Construction and / or major rehabilitation of buildings
- Basic research (e.g. scientific or medical experiments)
- Continuation and/or expansion of existing projects, including supportive and nutrition
- Medical care, institutional care, or income maintenance
- Projects which do not involve new, innovative approaches and whose outcomes do not have the potential for nationwide dissemination and replication.

6. <u>**Other Submission Requirements**</u>

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

For applicants submitting their application through grants.gov, you will be required to 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 <u>http://www.grants.gov/CCRRegister</u> . You must also register with a Credential Provider to receive a username and password to securely submit your grant application. Information is available at <u>http://www.grants.gov/CredentialProvider</u> .

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/Method – Workplan and Activities - (35 points)
- Outcomes/Evaluation/Dissemination - (25 points)
- Level of Effort - (20 points).

A. <u>Purpose and Need for Assistance</u>   <u>Weight: 20 points</u>

1. Does the proposed project clearly and adequately respond to all elements of the priority area, as described in Part I of this Program Announcement? (15 points)

2. Does the application adequately and appropriately describe and document the key problem(s)/condition(s) relevant to its purpose? Does the proposed project demonstrate awareness of the most recent information and knowledge regarding aging programs planning? (5 points)

3. Does the applicant demonstrate thorough and comprehensive knowledge of all aspects of applicable laws and regulations? This includes an understanding of the responsibilities of the Older Americans Act network: the Administration on Aging, State Units on Aging, Area Agencies on Aging and providers. ***In particular applicants must demonstrate a thorough knowledge of the State and Area Plan development processes***.

4. Does the applicant demonstrate In-depth knowledge of Administration on Aging program initiatives, including Aging and Disability Resource Centers, Evidence-Based Prevention Programs, Livable Communities, Performance Based Outcomes, etc.

B. <u>Approach, Work Plan and Activities</u>   <u>Weight: 35 points</u>

1. Is the methodology clearly defined? Does it reflect a coherent and feasible approach for successfully addressing the identified problem and achieving the identified outcome(s)? Does it specify that the applicant will work collaboratively? Does the project take into account barriers and opportunities that exist in the larger environment that may impact on the project's success? Does the intervention optimize the use of potential partnerships with Area Agencies on Aging, provider organizations and/or consumer groups, as appropriate? (15 points)

2. Is the project work plan clear and comprehensive? 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? Does the proposal include a clear and coherent management plan? Are the roles and responsibilities of project staff, consultants and partners clearly defined and linked to specific objectives and tasks? Are the qualifications of the project staff, consultants and/or partners, and the proposed level of effort, adequate to carryout the project? (10 points)

3. Does the application describe how all State Agencies on Aging (including those not awarded planning grants) will be involved in a meaningful way in the planning and implementation of the proposed project? Does the proposal address how performance measurement can be used to assist vulnerable populations? (5 points)

4. Does the proposal demonstrate innovative uses of performance measurement information? (5 points)

C. <u>Project Outcomes, Evaluation and Dissemination</u>   <u>Weight: 25 points</u>

1. Are the expected project benefits/results clear, realistic, and consistent with the objectives and purpose of the project? Are the anticipated outcomes of the proposed project likely to be achieved? (10 points)

2. Does the project evaluation reflect a thoughtful and well-designed approach that will be able to successfully measure whether or not the project has achieved its proposed outcome(s)? Does the

plan include the qualitative and/or quantitative methods necessary to reliably measure outcomes? Is the evaluation also designed to capture "lessons learned" from the overall effort that might be of use to other State and area agencies on aging, especially those who might be interested in replicating the project? (10 points)

3. 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? (5 points)

D. Level of Effort: Weight: 20 points

1. Do the proposed project director(s), key staff and consultants have the background, experience, and other qualifications required to carry out their designated roles? Project directors or key consultants should have extensive analytical expertise, including
   - Customer involvement in State Agency(SUAs) and Area Agency on Aging (AAA) program planning and implementation.
   - Successful development of web-based database and decision-support systems.
   - Data collection and reporting on programs and services under the Older Americans Act.
   - Providing customer training and user support.
   Are letters from participating organizations included, as appropriate, and do they express the clear commitment and areas of responsibility of those organizations, consistent with the work plan description of their intended roles and contributions? (15 points)

2. Is the budget justified with respect to the adequacy and reasonableness of resources requested? Is the budget request consistent with the number of SUAs, AAAs and service providers collaborating on 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? Are budget line items clearly delineated and consistent with work plan objectives? (5 points)

2. Review and Selection Process

An independent review panel of at least three individuals will evaluate applications that pass the screening. 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 copies (not the original) specific salary rates or amounts for individuals specified in the application budget and Social Security Numbers. The copies may include summary salary information.

VI.   AWARD ADMINISTRATION INFORMATION

1.   Award Notices

Successful applicants will receive an Approval letter, and a Notice of Financial Assistance Award. The Notice of Financial Assistance Award is the authorizing document, and will be signed by the AoA grants officer, the AoA authorizing official, and the AoA budget office. Unsuccessful applicants are notified 30 days after successful applicants and will receive a disapproval letter.

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 AoA Standard Terms and Conditions, which are included with each grant Award Packet..

3.   Reporting

An original and two copies of the SF-269 (Financial Status Report) and the AoA program progress report are due semi-annually. Awardees will receive a copy of the required program progress report form with their Notice of Financial Assistance Award. Final performance and SF-269 reports are due 90 days after the end of the project period. For more information see DHHS / AoA Standard Terms and Conditions.

VII.   AGENCY CONTACTS

Project Officer:
U.S. Department of Health and Human Services
Administration on Aging
Washington, DC 20201
Attn: Deborah Burns
Telephone: (202) 357-3581, e-mail: Deborah.Burns@aoa.hhs.gov

Grants Management Officer:
U.S. Department of Health and Human Services
Administration on Aging
Washington, DC 20201
Attn: Margaret Tolson
Telephone: (202) 357-3440, e-mail: Margaret.Tolson@aoa.gov

VIII. OTHER INFORMATION

A. <u>Order of Application Elements</u>

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. <u>Note</u>: The original copy of the application <u>must</u> have an original signature in item 18d on the SF 424.

2. SF 424A – Budget Information.

3. Separate Budget 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. AoA 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 Attachments for Sample Work Plan Format).

9. Organizational Capability Statement and Vitae for Key Project Personnel.

10. Letters of Commitment from Key Partners.

11. Completed Application Package Checklist

12. "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 which expires on 3/31/07.

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:
Application Package Checklist

Attachment B:
Budget Instructions

Attachment C:
Budget Justification Format – Sample Format with Examples

Attachment D:
Budget Justification – Sample Format

Attachment E:
Project Work Plan - Sample Format

Attachment F:
Instructions for Completing the Summary/Abstract

Attachment G:
"Survey on Ensuring Equal Opportunity for Applicants"

Attachment A:
Grant Application Package Checklist

The checklist below identifies the items that must be included in your mail-in application submission. Please check-off each item to ensure your submission is complete, and include a copy of the completed checklist in your application package. The components of your submission should be ordered in the same sequence as the items listed below.

I have checked my application package to ensure that it includes:

❑ One original application plus two copies, with the SF 424 as the first page of each copy of the application.

❑ SF 424 – Application for Federal Assistance.

❑ SF 424A – Budget Information.

❑ Budget Justification.

❑ SF 424B - Assurances.

❑ AoA Certification. Be sure this form is completed according to the instructions, signed and dated by the authorized representative (see item 18d on SF 424).

❑ Proof of non-profit status (if applicable)

❑ A copy of the current indirect cost rate agreement approved by the Department of Health and Human Services or another federal agency. (if applicable)

❑ Project Narrative, including Summary/Abstract

❑ Completed Grant Application Package Checklist

❑ Receipt of Application Acknowledgement Card (Optional)

❑ "Survey on Ensuring Equal Opportunity for Applicants" (non-profit applicants only)

Instructions for completing the Budget (SF424A) and Budget Justification

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. Please note that single-sided copies of all required forms must be used in submitting your application.

1. Standard Form 424

Item 1. Mark "Non-Construction" under "Application".

Item 2. Fill in the date you submit the application. The three "Identifier" boxes to the right of Items 2 through 4 should be left blank.

Item 3. Not applicable – Mark "NA".

Item 4. Leave blank.

Item 5. Enter the legal name of the applicant organization; the name of the primary organizational unit responsible for managing the project; the organization's DUNS number (received from Dun and Bradstreet); the applicant's address; and the name and telephone number of the person to contact on matters related to this application.

Item 6. Enter the Employer Identification Number (EIN) of the applicant organization that has been assigned to the organization by the Internal Revenue Service. Please include the suffix to the EIN if known.

Item 7. Enter the appropriate letter in the box provided.

Item 8. Check the "New" box.

Item 9. Enter - Administration on Aging

Item 10. Enter – 93.048
Item 11. Enter the title of the project.

Item 12. List only one entity - it should be the largest political entity affected.

Item 13. Enter the start and end date for the upcoming budget period for the project. (NOTE: The start date usually coincides with the date AoA issues the grant award to the applicant organization, with the end date usually being 12 months later.)

Item 14. Enter the Congressional District(s) affected by the project.

Item 14a. Enter the Congressional District where the applicant organization is located.

Item 14b. Leave Blank

Item 15. **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 15 and the Budget Information Sections A, B and C noted below.

All budget information entered under item 15 should cover the upcoming budget period. For sub-item 15a, enter the federal funds being requested. Sub-items 15b-15e is considered matching funds. The dollar amounts entered in sub-items 15b-15f must total at least $1/3^{rd}$ of the amount of federal funds being requested (the amount in 15a). For a full explanation of AoA's match requirements, see the information in the box below. For sub-item 15f, enter only the amount, if any that is going to be used as part of the required match.

There are three types of match: 1.) non-federal cash; 2.) non-federal non-cash (i.e., in-kind); and program income. 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 consider 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. A third form of non-federal match is projected program income derived from activities of the project such as participant fees and sale of publications. Only program income that is to be used, as part of the required match should be shown on Line 15.

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 15g.). This "three-to-one" ratio is reflected in the following formula which you can use to calculate your minimum required match:

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

For example, if you request $100,000 in federal funds, then your <u>minimum</u> match requirement is $100,000/3 or $33,333.

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.
If the required non-federal share is not met by a funded project, AoA will disallow any unmatched federal dollars.

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.

<u>Item 16</u>. Check b. No - Program is not covered by E.O. 12372

<u>Item 17</u>. This item applies to the applicant organization. Categories of debt include delinquent audit disallowances, loans, and taxes.

<u>Item 18</u>. To be signed by the authorized representative of the applicant organization. A document attesting to that sign-off authority must be on file in the grantee's office.

2. 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. For your convenience, these non-applicable columns and rows have been shaded-out on the form. You should only consider and respond to the budget items for which guidance is provided below.

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.

<div style="border:1px solid black; padding:10px;">

Separate Budget Justification Requirement

You must submit a separate budget justification 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 Justification.** 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 and program income 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.**

</div>

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

<u>Justification</u>: Include the total number of trips, destinations, purpose, length of stay, subsistence allowances and transportation costs (including mileage rates).

<u>Line 6d</u>: <u>Equipment</u>: 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. <u>In the Justification</u>: 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.

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

<u>Line 6f</u>: <u>Contractual</u>: 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. <u>In the Justification</u>: 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, Budget Categories for each contractor, along with supporting information and justifications.

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

<u>Line 6h</u>: <u>Other</u>: 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; <u>local</u> 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. <u>In the Justification</u>: 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.

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

<u>Line 6j</u>: <u>Indirect Charges</u>: 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 that you wish to designate as match (equal to the amount shown for Item 15(f) on Form 424). Note: Any program income indicated at the bottom of Section B and for item 15(f) on the face sheet of Form 424 will be included as part of non-Federal match and will be subject to the rules for documenting completion of this pledge. If program income is expected, but is not needed to achieve matching funds, do not include that portion here or on Item 15(f) of the Form 424 face sheet. Any anticipated program income that will not be applied as grantee match should be described in the Level of Effort section of the Program Narrative.

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). Do not include program income unless it is used to meet the match requirement. Keep in mind that if program income used to meet the match requirement and the projected level of program income is not met, thereby decreasing the level of match, the amount of federal funds available to the grantee may be reduced if the match falls below required levels.

Section D - Forecasted Cash Needs - Not applicable.

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

Line 20: NOTE: Leave this line blank. Section E is relevant only 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: <u>Indirect Charges</u>: 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: <u>Remarks</u>: Provide any other comments deemed necessary.

Indirect Cost Agreement

State 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 state applicants that have not included indirect costs in their budgets.

Attachment C: Budget Justification, Page 1 – Sample Format with EXAMPLES

Object Class Category	Federal Funds	Non-Federal Cash	Non-Federal In-Kind	TOTAL	Justification
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

Attachment C: Budget Justification, Page 2 - Sample Format with EXAMPLES

Object Class Category	Federal Funds	*Non-Federal Cash*	Non-Federal In-Kind	*TOTAL*	Justification
Equipment	0	0	0	0	No equipment requested
Supplies	$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

Contractual	$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!)

Other	$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

Indirect Charges	0	0	0	0	None
TOTAL	$265,700	$60,800	$27,767	$354,267	

75% of Total Cost

(Federal $)

25% of Total Cost

(Required Match)

Object Class Category	Federal Funds	Non-Federal Cash	Non-Federal In-Kind	TOTAL	Justification
Personnel					
Fringe Benefits					
Travel					
Equipment					

Object Class Category	Federal Funds	Non-Federal Cash	Non-Federal In-Kind	TOTAL	Justification
Supplies					
Contractual					
Other					
Indirect Charges					

TOTAL					

Goal:																		

Measurable Outcome(s):																		

Major Objectives	Key Tasks	Lead Person	Timeframe (Start and End Date by Month)												
1.															
2.															

Attachment E: 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.														

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 note 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 F

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 300 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.

SURVEY ON ENSURING EQUAL OPPORTUNITY FOR APPLICANTS

Purpose: This form is for applicants that are nonprofit private organizations (not including private universities). Please complete it to assist the Federal government in ensuring that all qualified applicants, small or large, non-religious or faith-based, have an equal opportunity to compete for Federal funding. Information provided on this form will not be considered in any way in making funding decisions.

Instructions for Submitting Survey
If submitting hard copy, please place the completed survey in an envelope labeled "Applicant Survey." Seal the envelope and include it with your application package.

If submitting electronically, please include the Number assigned to your e-application in the box above entitled "*Enter relevant Grant Announcement Title and Number,*" in addition to the grant announcement title and number. Place and seal the completed survey in an envelope labeled "Applicant Survey" and mail it to the hard copy receipt point for the application. **SEE INSTRUCTIONS ON BACK.**

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

Survey Instructions on Ensuring Equal Opportunity
for Applicants

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:** Paperwork Reduction Act Clearance Officer, U.S. Department of Health and Human Services, Washington, D.C. 20201. **If you have comments or concerns regarding the status of your individual submission of this form, write directly to:** the Program Official at the Agency where the form was submitted