

RURAL UTILITIES SERVICE

Distance Learning and Telemedicine Program Loan/Combination Loan-Grant Toolkit Fiscal Year 2005 Forms, Worksheets and Certifications

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According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0575-0096. The time required to complete this information collection is estimated to average 49 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Application Resources & Tips

- **APPLICATION GUIDE:** Please read and follow the *Distance Learning and Telemedicine Program Loan & Combination Loan-Grant Application Guide—Fiscal Year 2005* as you fill out the forms, worksheets and certifications in this Toolkit.
- **AS YOU FILL OUT OR SIGN EACH OF THE TOOLKIT ITEMS**, place them under the tabs of your grant application as explained by the “Putting It All Together” sections of the Combination Loan-Grant & Loan Application Guide.
- **REGULATIONS:** The Program’s regulations govern the application process, the *Guide* and this Toolkit. See the Code of Federal Regulations, **7 CFR 1703, Subparts D, E, F and G**. A copy of the regulations is posted at the DLT Web page listed below.
- **CATALOG OF FEDERAL DOMESTIC ASSISTANCE (CFDA)** Number: **10.855**
- **ONLINE RESOURCES**

DLT Program Web page	www.usda.gov/rus/telecom/dlt/dlt.htm
RUS Telecommunications General Field Representatives	www.usda.gov/rus/telecom/staff/gfr-by-state-list.htm
USDA Rural Development State Directors	www.rurdev.usda.gov/recd_map.html
State Single Points of Contact (SPOC)	www.whitehouse.gov/omb/grants/spoc.html
Grants.gov Information	www.grants.gov
Get a DUNs Number	www.grants.gov/RequestaDUNS
Census 2000 Numbers	www.census.gov/main/www/cen2000.html

- **DLT PROGRAM:** (202) 720-0413
dltinfo@usda.gov

**APPLICATION FOR
FEDERAL ASSISTANCE**

1. TYPE OF SUBMISSION: Application <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction		2. DATE SUBMITTED	Applicant Identifier
Pre-application <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction		3. DATE RECEIVED BY STATE	State Application Identifier
		4. DATE RECEIVED BY FEDERAL AGENCY	Federal Identifier

5. APPLICANT INFORMATION

Legal Name:		Organizational Unit:	
		Department:	
Organizational DUNS:		Division:	
Address:		Name and telephone number of person to be contacted on matters involving this application (give area code)	
Street:		Prefix:	First Name:
City:		Middle Name	
County:		Last Name	
State:	Zip Code	Suffix:	
Country:		Email:	

6. EMPLOYER IDENTIFICATION NUMBER (EIN): □□-□□□□□□□□	Phone Number (give area code)	Fax Number (give area code)
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8. TYPE OF APPLICATION: <input type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es) (See back of form for description of letters.) <input type="checkbox"/> <input type="checkbox"/> Other (specify)	7. TYPE OF APPLICANT: (See back of form for Application Types) Other (specify)
	9. NAME OF FEDERAL AGENCY:

10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: TITLE (Name of Program): □□-□□□□	11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:
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12. AREAS AFFECTED BY PROJECT (Cities, Counties, States, etc.):
--

13. PROPOSED PROJECT Start Date: Ending Date:	14. CONGRESSIONAL DISTRICTS OF: a. Applicant b. Project
--	--

15. ESTIMATED FUNDING:	16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?
a. Federal \$.00	a. Yes. <input type="checkbox"/> THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON DATE:
b. Applicant \$.00	
c. State \$.00	b. No. <input type="checkbox"/> PROGRAM IS NOT COVERED BY E. O. 12372
d. Local \$.00	<input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW
e. Other \$.00	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?
f. Program Income \$.00	<input type="checkbox"/> Yes If "Yes" attach an explanation. <input type="checkbox"/> No
g. TOTAL \$.00	

18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.

a. Authorized Representative		
Prefix	First Name	Middle Name
Last Name		Suffix
b. Title		c. Telephone Number (give area code)
d. Signature of Authorized Representative		e. Date Signed

INSTRUCTIONS FOR THE SF-424

Public reporting burden for this collection of information is estimated to average 45 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503.

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

This is a standard form used by applicants as a required face sheet for pre-applications and applications submitted for Federal assistance. It will be used by Federal agencies to obtain applicant certification that States which have established a review and comment procedure in response to Executive Order 12372 and have selected the program to be included in their process, have been given an opportunity to review the applicant's submission.

Item:	Entry:	Item:	Entry:																
1.	Select Type of Submission.	11.	Enter a brief descriptive title of the project. If more than one program is involved, you should append an explanation on a separate sheet. If appropriate (e.g., construction or real property projects), attach a map showing project location. For preapplications, use a separate sheet to provide a summary description of this project.																
2.	Date application submitted to Federal agency (or State if applicable) and applicant's control number (if applicable).	12.	List only the largest political entities affected (e.g., State, counties, cities).																
3.	State use only (if applicable).	13.	Enter the proposed start date and end date of the project.																
4.	Enter Date Received by Federal Agency Federal identifier number: If this application is a continuation or revision to an existing award, enter the present Federal Identifier number. If for a new project, leave blank.	14.	List the applicant's Congressional District and any District(s) affected by the program or project																
5.	Enter legal name of applicant, name of primary organizational unit (including division, if applicable), which will undertake the assistance activity, enter the organization's DUNS number (received from Dun and Bradstreet), enter the complete address of the applicant (including country), and name, telephone number, e-mail and fax of the person to contact on matters related to this application.	15.	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. If both basic and supplemental amounts are included, show breakdown on an attached sheet. For multiple program funding, use totals and show breakdown using same categories as item 15.																
6.	Enter Employer Identification Number (EIN) as assigned by the Internal Revenue Service.	16.	Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State intergovernmental review process.																
7.	Select the appropriate letter in the space provided. <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">A. State</td> <td style="width: 50%;">I. State Controlled Institution of Higher Learning</td> </tr> <tr> <td>B. County</td> <td>J. Private University</td> </tr> <tr> <td>C. Municipal</td> <td>K. Indian Tribe</td> </tr> <tr> <td>D. Township</td> <td>L. Individual</td> </tr> <tr> <td>E. Interstate</td> <td>M. Profit Organization</td> </tr> <tr> <td>F. Intermunicipal</td> <td>N. Other (Specify)</td> </tr> <tr> <td>G. Special District</td> <td>O. Not for Profit Organization</td> </tr> <tr> <td>H. Independent School District</td> <td></td> </tr> </table>	A. State	I. State Controlled Institution of Higher Learning	B. County	J. Private University	C. Municipal	K. Indian Tribe	D. Township	L. Individual	E. Interstate	M. Profit Organization	F. Intermunicipal	N. Other (Specify)	G. Special District	O. Not for Profit Organization	H. Independent School District		17.	This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans and taxes.
A. State	I. State Controlled Institution of Higher Learning																		
B. County	J. Private University																		
C. Municipal	K. Indian Tribe																		
D. Township	L. Individual																		
E. Interstate	M. Profit Organization																		
F. Intermunicipal	N. Other (Specify)																		
G. Special District	O. Not for Profit Organization																		
H. Independent School District																			
8.	Select the type from the following list: <ul style="list-style-type: none"> • "New" means a new assistance award. • "Continuation" means an extension for an additional funding/budget period for a project with a projected completion date. • "Revision" means any change in the Federal Government's financial obligation or contingent liability from an existing obligation. If a revision enter the appropriate letter: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">A. Increase Award</td> <td style="width: 50%;">B. Decrease Award</td> </tr> <tr> <td>C. Increase Duration</td> <td>D. Decrease Duration</td> </tr> </table> 	A. Increase Award	B. Decrease Award	C. Increase Duration	D. Decrease Duration	18.	To be signed by the authorized representative of the applicant. A copy of the governing body's authorization for you to sign this application as 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.)												
A. Increase Award	B. Decrease Award																		
C. Increase Duration	D. Decrease Duration																		
9.	Name of Federal agency from which assistance is being requested with this application.																		
10.	Use the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested.																		

Summary Worksheet, Page 1 of 2

Please print or type.

Legal Name: _____

Organization Name: _____

Contact Person: _____

Email: _____

Phone Number: _____ Fax Number: _____

Web Site: _____

Address: _____

Grant Requested	_____
Loan Requested	_____
Other Supplemental Funding	_____
Total Project Cost	_____

What is the predominant purpose of this project?

___ Educational ___ Medical

(If the project provides both distance learning and telemedicine services, you must identify the predominant use of the system.)

Summary Worksheet, Page 2 of 2

Other than the telecommunications systems you propose in this application, what types of Internet access are available at each site?

Type Of Connection	Minimum/Maximum Information Rate Marketed (bits/second)
Dial-up modem	
Cable modem	
DSL	
Other	

Characteristics of the system proposed in this application:

	Type of Connection					Information Rate (bits/second)
	twisted pair	co-ax cable	fiber optics	wireless*	other*	
Between Project Sites						
Connections To The World						

* If wireless or other, describe the type of technology here (e.g. unlicensed spread spectrum, terrestrial 6 GHz point-to-point microwave, etc.):

Rurality Worksheet

Determine each end-user site's rurality using these guidelines.

Population Range	Regulatory Definition	Rurality Points
5000 or fewer	Exceptionally Rural Area— Any area of the United States <u>NOT</u> included within the boundaries of any incorporated or unincorporated city, village, or borough having a population in excess of 5,000 inhabitants .	45
5001 - 10,000	Rural Area— Any area of the United States included within the boundaries of any incorporated or unincorporated city, village, or borough having a population over 5,000 and not in excess of 10,000 inhabitants .	30
10,001 - 20,000	Mid-Rural Area— Any area of the United States included within the boundaries of any incorporated or unincorporated city, village, or borough having a population over 10,000 and not in excess of 20,000 inhabitants .	15
20,001 and more	Urban Area— Any area of the United States included within the boundaries of any incorporated or unincorporated city, village, or borough having a population in excess of 20,000 inhabitants .	0

If a hub also serves as an end-user site, the hub will be considered as an end-user site for the rurality criterion. **Use Census 2000 data for each town.** RUS will **not accept county-wide data**. Fill in **all spaces** for each end-user site. If RUS cannot verify an end-user site's population, we will exclude the site from the project.

	End-User Site Name	Town	State	2000 Census Population	Rurality Points
1					
2					
3					
4					
5					
Average score of all end-user sites (Total Points / # of end-user sites)					

Note: You are **NOT** restricted to 5 end-user sites. Make as many copies of this table as you need to calculate rurality. If you need more copies of this table, be sure to indicate the final, overall rurality score for ALL end-user sites.

Sample Budget

Description	Qty.	Unit Cost	Extended Cost	RUS Funds	Other
Hub Site					
1. Equipment Lease or Purchase					
a. Webcasting/streaming software	1	\$14,000	\$14,000	\$14,000	\$0
b. ITV network transmission equipment	1	15,000	15,000	15,000	0
c. Video camera package	1	25,000	25,000	25,000	0
d. Computer projection panel	1	3,500	3,500	3,500	0
2. Instructional Programming Installation/training	1	30,000	30,000	30,000	0
Site Cost			\$87,500	\$87,500	\$0
End-User Site #1					
Equipment Lease or Purchase					
a. ITV video classroom equipment	5	\$16,000	\$80,000	\$80,000	\$0
b. Webcast stations	2	12,000	24,000	24,000	0
c. Classrooms VCRs	2	250	500	500	0
d. 32" monitors/connector boxes	2	1,000	2,000	2,000	0
Site Cost			\$106,500	\$106,500	\$0
End-User Site #2					
Equipment Lease or Purchase					
a. ITV video classroom equipment	6	\$16,000	\$96,000	\$96,000	\$0
b. Webcast stations	2	12,000	24,000	24,000	0
c. Classrooms VCRs	2	250	500	500	0
d. 32" monitor/connector boxes	2	1,000	2,000	2,000	0
Site Cost			\$122,500	\$122,500	\$0
End-User Site #3					
Equipment Lease or Purchase					
a. ITV video classroom equipment	6	\$16,000	\$96,000	\$96,000	\$0
b. Webcast stations	2	12,000	24,000	24,000	0
c. Classrooms VCRs	1	250	250	500	0
d. 32" monitors/connector boxes	1	1,000	1,000	2,000	0
Site Cost			\$121,250	\$121,250	\$0
Total RUS Eligible Purposes			\$437,750	\$437,750	\$0
Ineligible Purposes					
a. Salaries	2	\$40,000	\$80,000	\$0	\$80,000
b. Recurring line costs/year	4	12,000	48,000	0	48,000
Project Grand Total			\$565,750	\$437,750	\$128,000

Sample Pro-Forma

Revenues/Appropriations	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Distance Learning										
Telemedicine										
Total Revenues										
Expenses/Expenditures										
Fixed (excl. deprec. & amortization)										
Variable (incl. taxes)										
Transmission										
Salaries										
Training										
Administrative										
Total Expenses										
Earnings before interest and depreciation										
Less: Debt Service										
Interest Expense										
Principal Repayment										
Net Cash Flow										
Supplemental Information										
Depreciation Expense										
Amortization Expense										

Pro-Forma Narrative and Assumptions

(required of all applicants, even if an organization is funded by a state or local government on an appropriation or equivalent basis)

Provide a detailed narrative explaining the 10-year projected pro-forma, including any assumptions used in its development. This document should correspond exactly to any other references in the application.

Sample documentation might include but is certainly not limited to:

Revenues/Budgeted Appropriations:

- Subscriber growth based on _____ (demographics, new developments, school participation)
- Growth of revenues based _____ (percentage of subscriber growth possibly)
- Long-term contracts generating revenues
- Market and industry expectations

Expenses:

- Operating expenses projected as a function of sales based on specific industry averages
- Long-term contracts with telecommunications carrier
- Salaries based on the number of employees
- Decrease in expenses (%) based on efficiency/learning curve
- Property tax rate used

Equal Opportunity and Nondiscrimination Certification

All grants and loans made under 7 CFR 1703 are subject to the nondiscrimination provisions of Title VI of the Civil Rights Act of 1964, as amended, (7 CFR 15); Section 504 of the Rehabilitation Act of 1973, as amended, (29 U.S.C. 901 et seq.; 7 CFR 15b); and the Age Discrimination of 1975, as amended (42 U.S.C. 6101 et seq.; 45 CFR 90), and as amended by Executive Order 11375 Amending Executive Order 11246, Relating to Equal Employment Opportunity (3 CFR, 1966, 1970 Comp., p. 684).

As a prospective primary participant recipient of financial assistance from RUS, this organization commits to carry out RUS' established policy to comply with the requirements of the above laws and executive orders to the effect that no person in the United States shall, "on the basis of race, color, national origin, handicap, or age, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under the RUS Distance Learning and Telemedicine Loan and Grant Programs."

The _____ (Grantee/Borrower) hereby certifies that, as a prospective recipient under the said Distance Learning and Telemedicine Loan and Grant Program, it will comply with the above referenced laws, regulations and Executive Orders.

(Date)

(Signature)

(Type or Print Name)

(Title)

Certificate Regarding Architectural Barriers

All facilities financed with RUS grants and/or loans funds that are open to the public, or in which physically handicapped persons may be employed or reside, must be designed, constructed, and/or altered to be readily accessible to, and usable by handicapped persons. Standards for these facilities must comply with the Architectural Barriers Act of 1968, as amended, 42 U.S.C. 4151 et seq.) and with the Uniform Federal Accessibility Standards (UFAS), (Appendix A to 41 CFR subpart 101-19.6).

As a prospective primary participant recipient of financial assistance from RUS, this organization commits to carry out RUS' established policy to comply with the requirements of the above referenced law to the effect that all facilities must be readily accessible to and usable by handicapped persons.

The _____ (Grantee/Borrower) hereby certifies, that, as a prospective recipient under the Distance Learning and Telemedicine Grant and Loan Program, it is in compliance, or will be in compliance upon completion of the project, with the above referenced law.

(Date)

(Signature)

(Type or Print Name)

(Title)

Certificate Regarding Flood Hazard Area Precautions

In accordance with 7 CFR Part 1788, if the project is in an area subject to flooding, flood insurance must be provided to the extent available and required under the National Flood Insurance Act of 1968, as amended by the Flood Disaster Protection Act of 1973, as amended (42 U.S.C. 4001 through 4128). If applicable, the insurance must cover, in addition to the buildings, any machinery, equipment, fixtures, and furnishings contained in the buildings. RUS will comply with Executive Order 11988, Floodplain Management (3 CFR, 1977 Comp., p. 117), and 7 CFR 1794.41, of this chapter in considering the application for the project.

Please check the appropriate line below:

___ a) The project is not located in a 100 year flood plain; therefore, no Flood Insurance is required.

___ b) The project is located in a 100 year flood plain and the required insurance is or will be provided by:

The _____ (Grantee/Borrower) hereby certifies, that, as a prospective recipient under the Distance Learning and Telemedicine Loan and Grant Program, it is in compliance, or will be in compliance during construction and/or installation of equipment and upon completion of the project, with the above referenced law.

(Date)

(Signature)

(Type or Print Name)

(Title)

Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 Certification

(Grantee/Borrower) assures that it will comply with the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended (Uniform Act), 42 U.S.C. 4601-4655, and with implementing Federal regulations in 49 CFR Part 24 and 7 CFR Part 21.

Specifically, _____ (Grantee/Borrower) assures that:

Whenever Federal financial assistance is used to pay for any part of the cost of a program or project which will result in the displacement of any person;

(a) Fair and reasonable relocation payments and assistance shall be provided to or for displaced persons in accordance with sections 202, 203, and 204 of the Uniform Act,

(b) Relocation assistance programs offering the services described in section 205 of the Uniform Act shall be provided to displaced persons, and

(c) Within a reasonable period of time prior to displacement, comparable replacement dwellings will be available to displaced persons in accordance with section 205(c) (3) of the Uniform Act.

(Date)

(Signature of President or Authorized Official of Ultimate Recipient)

Certification Regarding Drug-Free Workplace Requirements (Grants/Loans)

Alternative I – For Grantees/Borrowers Other than Individuals

This certification is required by the regulations implementing Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (P.L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.), 7 CFR Part 3017, Subpart F, Section 3017.600, Purpose. The January 31, 1989, regulations were amended and published as Part II of the May 25, 1990, Federal Register (pages 21681-21691). Copies of the regulations may be obtained by contacting the Department of Agriculture agency offering the grant/loan.

ALTERNATIVE I

A. The grantee/borrower certifies that it will or will continue to provide a drug-free workplace by:

- (a) Publishing a statement notifying employees that unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee/borrower's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) Establishing an ongoing drug-free awareness program to inform employees about:
 - (1) The dangers of drug abuse in the workplace;
 - (2) The grantee/borrower's policy of maintaining a drug-free workplace;
 - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
 - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- (c) Making it a requirement that each employee to be engaged in the performance of the grant/loan be given a copy of the statement required by paragraph (a);
- (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant/loan, the employee will:
 - (1) Abide by the terms of the statement; and
 - (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than 5 calendar days after such conviction;
- (e) Notifying the Agency in writing, within 10 calendar days after receiving notice under subparagraph (d) (2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant/loan officer on whose grant/loan activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant/loan;

(f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted:

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

(g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

B. The grantee/borrower may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant/loan:

Place of Performance:

_____ *Street Address* _____ *City*

_____ *County* _____ *State* _____ *Zip Code*

___ **Check if there are workplaces on file that are not identified here.**

_____ *Organization Name*

_____ *Name and Title of Authorized Representative*

_____ *Signature* _____ *Date*

Certification Regarding Debarment, Suspension, and Other Responsibility Matters – Primary Covered Transactions

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 7 CFR Part 3017, Section 3017.510, Participants' Responsibilities. The regulations were published as Part IV of the January 30, 1989, Federal Register (pages 4722-4733). Copies of the regulations may be obtained by contacting the Department of Agriculture agency offering the proposed transaction.

(1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:

(a) are not presently debarred, suspended, proposed for Debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;

(b) have not within a 3-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and

(d) have not within a 3-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause or default.

(2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Organization Name

Name & Title of Authorized Representative

Signature

Date

***Certification Regarding Lobbying for Contracts, Grants,
Loans, and Cooperative Agreements***

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant or loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. (Copies of this form may be obtained from RUS.)

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Organization Name

Name & Title of Authorized Representative

Signature

Date

Non Duplication of Services Certificate

As a prospective primary participant recipient of assistance from RUS, this organization commits to carry out RUS' established policy to comply with the requirements that no facilities using financial assistance will duplicate adequate established telemedicine services and/or distance learning services.

The _____ (Grantee/Borrower) hereby certifies that as a prospective recipient under the said Distance Learning and Telemedicine Loan and Grant Program, that it will not use RUS grant and/or loan funds to duplicate any adequate established services as referenced above.

(Date)

(Signature)

(Type or Print Name)

(Title)

**Distance Learning and Telemedicine Loan & Grant Program
Environmental Questionnaire/Certification**

Environmental Project Summary:

(This description should encompass all construction in the project, no matter the source of funding. It should provide details of how the project will impact the environment (wetlands, farmlands, floodplain, cultural environment, endangered species, environmental quality, and historic preservation). If you need additional space, continue on white bond paper and insert between the first and second pages.)

If the construction proposed in this application, as described above, will not impact the environment or historic preservation, **you may sign the certification indicating that no adverse impact and skip filling out the questionnaire.**

CERTIFICATION

I hereby certify that the construction proposed in this application will not adversely impact the environment or historic preservation.

(Signature and Date)

(Print or Type Title)

QUESTIONNAIRE

Note: Respond to all questions completely, to ensure expeditious processing of the Distance Learning and Telemedicine application. The information requested herein is required by Federal law.

Important: Any activity related to the project that may adversely affect the environment or limit the choice of reasonable development alternatives shall not be undertaken prior to the completion of Rural Utilities Service's environmental review process.

Legal Name of Applicant _____

Signature (type, sign, & date) _____

The applicant's representative certifies to the best of his/her knowledge and belief that the information contained herein is accurate. Any false information may result in disqualification for consideration of financial assistance or the rescission of financial assistance.

I. Project Description – Details of construction, including but not limited to internal modifications of existing structures, or installation of telecommunications transmission facilities (defined in 7 CFR 1703.102), including satellite uplinks or downlinks, microwave transmission towers, and cabling.

1. Describe the portion of the project, and site locations (including legal ownership of real property), involving internal modifications, or equipment additions to buildings or other structures (e.g., relocating interior walls or adding computer facilities) for each site.

2. Describe the portion of the project, and site locations (including legal ownership or real property), involving construction of transmission facilities, including cabling, microwave towers, satellite dishes, or disturbance of property of 0.99 acres or greater for each project site.

3. Describe the nature of the proposed use of the facilities and whether any hazardous materials, air emissions, wastewater discharge, or solid waste will result.

4. State whether any project site(s) contain or are near properties listed or eligible for listing in the National Register of Historic Places, and identify any historic properties. (You must supply evidence that the State Historic Preservation Officer (SHPO) has cleared development regarding any historical properties).

5. Provide information on whether any facility(ies) or site(s) are located in a 100-year floodplain. Include a National Flood Insurance Map reflecting the location of the project site(s).

II. For projects that involve construction of transmission facilities, including cabling, microwave towers, satellite dishes, or physical disturbance of real property of .99 acres or greater, the following information must be submitted (7 CFR 1703.109(i)(3)).

1. A map (preferably a U.S. Geological Survey map) of the area for each site affected by construction (include as an attachment).

2. A description of the amount of property to be cleared, excavated, fenced, or otherwise disturbed by the project and a description of the current land use and zoning and any vegetation for each project site affected by construction.

3. A description of buildings or other structures (i.e., transmission facilities), including dimensions, to be constructed or modified.

4. A description of the presence of wetlands or existing agricultural operations and/or threatened or endangered species or critical habitats on or near the project site(s) affected by construction.

5. Describe any actions taken to mitigate any environmental impacts resulting from the proposed project (use attachment if necessary).

Note: You may submit a copy of any environmental review, study assessment, report or other document prepared in connection with obtaining permits, approvals, or other financing for the proposed project from State, local or other Federal bodies. Such material, to the extent relevant, may be used to meet the requirements herein.