

**2016 AmeriCorps Planning Grant**

**APPLICATION INSTRUCTIONS AND FORMS**

****

**Proposal due June 3, 2016**

**CaliforniaVolunteers**

1400 10th Street ■ Sacramento, CA 95814

(916) 323-7646 phone ■ (916) 323-3227 fax

www.CaliforniaVolunteers.org

**Important Notice to Applicants:** There are three documents necessary to complete a 2016 AmeriCorps Planning Grant Application. Applicants must obtain required guidance and forms from the source documents listed below, available on the CaliforniaVolunteers website at <http://www.californiavolunteers.org/index.php/Grants/americorps/>.

(1) 2016 AmeriCorps Planning Grant Request for Applications (RFA),

(2) 2016 AmeriCorps Planning Grant Application Instructions and Forms, and

(3) Budget Form and Budget Narrative

**TABLE OF CONTENTS**

|  |  |
| --- | --- |
| Application Submission Overview……………………………………………………………. | **3** |
| Planning Grant Application Components |  |
| 1. Paper Application Checklist ………………………………………………………………….
 | 4 |
| 1. AmeriCorps Program Title Page……………………………………………………………..
 | 5 |
| 1. Project Narrative Instructions…………………………………………………………………
 | 6 |
| 1. Budget Narrative and Budget Form Instructions……………………………………………
 | 8 |
| 1. Organizational Self-Assessment Form………………………………………………………
 | 12 |
| 1. Authorization, Assurances, and Certification………………………………………………..
 | 13 |

APPLICATION SUBMISSION OVERVIEW

1. **Part 1: Paper Submission**

Your complete Paper Application must include all the required components listed in the “Paper Application Checklist” (on page 4) and must be received by CV on **June 3, 2016 at 5:00 P.M. PST**.

Please send your Paper Application to:

CaliforniaVolunteers

ATTN: 2016 AmeriCorps Planning Grants

1400 10th Street

Sacramento, CA 95814

1. **Part 2: Electronic Submission** (Submitting Approved Applications in eGrants)

Successful applicants selected to receive a planning grant will be required to submit their applications [Program Narrative and Budget] electronically via the CNCS web-based system, eGrants, **no later than June 15, 2016**. Because it is a unique system, it is recommended that applicants create an eGrants account immediately and be prepared to begin the eGrants application creation upon notification by CV. Successful applicants will copy and paste their approved Program Narrative and Budget into the appropriate eGrants fields. Successful applicants will receive instructions for this process attached to their notification email.

An application is only considered complete if it includes all required documents and is received by the application due date. Incomplete applications will not be considered.

**2016 AmeriCorps Planning Grant RFA**

**Paper Application Checklist**

**Instructions:** A “complete” AmeriCorps application consists of **one original of items #1-7** and **three copies of items #1-5** **in the order** as stated in the checklist below. Place a checkmark [√] next to each item included in your original application and copies of your application submitted. ***You must include a signed copy of this checklist with your application.***

Legal Applicant Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AmeriCorps Program Name: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*I’ve reviewed our AmeriCorps grant application submitted to CV and certify that all required documents included are complete, accurate, and in the required CV forms and format.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Authorized Applicant Representative Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name Title of Person Signing

|  |  |
| --- | --- |
| **√ or NA** | **Application Components** |
| **Original**(#1-7) | **Copies** (1-5) |
|  |  | 1. Paper Application Checklist
 |
|  |  | 1. AmeriCorps Planning Grant Title Page
 |
|  |  | 1. Project Narrative

□ no more than **15** double-spaced, single-sided, pages in­ portrait format□ 12 point Times New Roman font□ One-inch margins□ Use CV narrative headings in the order provided |
|  |  | 1. Budget Form [Must use CV Excel Template]
 |
|  |  | 1. Budget Narrative [Must use CV Excel Template]
 |
|  |  | 1. Organizational Self-Assessment Form [must be signed and dated by authorized agent]
 |
|  | 1. Authorization, Assurances ,and Certification [Signature Page signed & dated by authorized agent]
 |

**AmeriCorps Planning Grant Title Page**

**Project Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**National Focus Area:** *Check all that apply*

[ ]  Education

[ ]  Environmental Stewardship

[ ]  Healthy Futures

[ ]  Veterans & Military Families

[ ]  Economic Opportunity

[ ]  Disaster Services

[ ]  Capacity Building

|  |
| --- |
| **Legal Applicant Organization** |
| Organization Name: |  |
| Address (please do not list P.O. Box): |  |
| City: |  |
| State: |  |
| Zip: |  |
| **Authorized Legal Applicant Contact** |
| Contact Name: |  |
| Title: |  |
| Phone: |  |
| Email: |  |
| Fax:  |  |
| **Primary Contact Person** |
| Contact Name: |  |
| Title: |  |
| Phone: |  |
| Email: |  |
| Fax:  |  |
| **Grant Request** |
| CNCS Request Amount: |  |
| CNCS Share %: |  |
| Grantee Share Amount: |  |
| Grantee Share %: |  |
| Total Operating Budget: |  |

**Program Narrative Instructions**

In no more than **15 double-spaced, single-sided pages** in­ portrait format, please address the following:

1. **Executive Summary**

Provide a one-paragraph executive summary of your proposed planning project. You may fill in the following template to complete your executive summary.

This planning grant will be used to develop an AmeriCorps program which will engage AmeriCorps members (members) to *[anticipated AmeriCorps member activities]* in *[geographic locations where member activities will take place]*. Members will address the needs of [*beneficiaries to be served*]. Program activities will primarily be in the areas of *[identify relevant National Service Focus Areas]*.

1. **Rationale and Approach/Project Design**
2. Describe why you are applying for an AmeriCorps planning grant, including but not limited to: (1) the community need you plan to address with your AmeriCorps program; and (2) your vision for how AmeriCorps members will produce significant and unique contributions to existing efforts to address the stated community need.
3. Describe your planning process andtimeline for completing the following:
4. assessing and identifying the specific community need to be addressed by your AmeriCorps program;
5. developing a theory of change/program logic model for the program to be proposed;
6. determining an appropriate intervention or program service activities to be conducted by members. The intervention should be guided by the best available research and evidence that supports its effectiveness;
7. developing aligned performance measures and a performance measurement system to collect high quality data that demonstrate impact on the target beneficiaries to be served;
8. developing plans for recruiting, selecting, and training AmeriCorps members with desired qualifications;
9. developing a member supervision plan and standards necessary to maintain both content and intervention integrity during implementation for placement sites, members, and staff;
10. creating a process for selecting organizations to serve as service locations where AmeriCorps members will conduct service activities that will ensure the most appropriate and capable organizations are selected;
11. determining an appropriate staffing structure that has the necessary content and management expertise for successful implementation;
12. building and engaging a partnership to support the mission, development, and implementation of the AmeriCorps program;
13. determining the most effective strategies/plans to ensure adequate program oversight and compliance with AmeriCorps rules and regulations; and
14. developing a cost-effective operating budget, including plans for securing diverse matching fund resources that will support your program implementation.
15. **Organizational Capability**
16. Describe the applicant organization’s experience and it’s staffing and management structure for planning and implementing the proposed planning project.
17. Identify the staff that will be responsible for managing the planning grant and overseeing planning grant activities along with his/her qualifications and relevant experience.
18. Describe other key roles staff, board of directors, administrators, and/or partners will play in the planning process.
19. **Cost Effectiveness and Budget Adequacy**
20. Discuss the adequacy of your proposed budget to support the planning activities proposed including the necessary match to support the total project cost.
21. Describe how you will secure the match needed to successfully carry out all described planning grant activities.

**Budget Form and Budget Narrative Instructions**

Please follow the instructions below to complete your CV Budget Narrative and Budget Form. The information you provide on the Budget Narrative Template (tab) will automatically populate and be summarized on the Budget Form Template (tab).

Please note that CV may request that you include description/calculation breakdowns for costs that are covered by funds outside of the grant.

**Section I. Program Operating Costs**

Complete Section I, Program Operating Costs, of the Budget Narrative Form by entering the “Total Amount,” “CNCS Share,” and “Grantee Share” for Parts A-I, as follows:

* 1. **Personnel Expenses**

Under “Position/Title Description,” list each staff position separately and provide position description, salary, and percentage of effort devoted to this award. Each staff person’s role listed in the budget must be described in the application narrative and each staff person mentioned in the narrative must be listed in the budget as either CNCS or Grantee Share. For Column 2, under “% of FTE Time Spent on Program”, please include the percentage of time for a full-time equivalent (FTE) employee. For example, if a part-time staff member who works 20 hours a week spends 100% of their time working on the AmeriCorps program, Column 2 should reflect 50%. This section should contain costs associated only with those staff performing direct program services. Those providing general administrative or management functions should be budgeted under Section III.

* 1. **Personnel Fringe Benefits**

Under “Purpose/Description,” identify the types of fringe benefits to be covered and the costs of benefit(s) for each staff position. Allowable fringe benefits typically include FICA, Worker’s Compensation, Retirement, SUTA, Health and Life Insurance, IRA, and 401K. You may provide a calculation for total benefits as a percentage of the salaries to which they apply or list each benefit as a separate item. If a fringe benefit amount is over 30%, please list separately. Holidays, leave, and other similar vacation benefits are not included in the fringe benefit rates but are absorbed into the personnel expenses (salary) budget line item. Uncommon or exceptionally high-cost benefits should be itemized and justified.

* 1. **1. Staff Travel**

Describe the purpose for which program staff member will travel. Provide a calculation to include itemized costs for airfare, transportation, lodging, per diem, and other travel-related expenses multiplied by the number of trips/staff. Where applicable, identify the current standard reimbursement rate(s) of the organization for mileage daily per diem, and similar supporting information. Travel rates may not exceed the federal rates set by U.S. General Services Administration: <http://www.gsa.gov/portal/content/104877>. Only domestic travel is allowable. Any out of state travel requires advance approval from CV. This category should include travel associated with local planning activities and for a mandatory one-day CV technical training to be held in Sacramento and potentially a two-day conference for two staff representatives in Sacramento.

For example: Two staff members will attend the California AmeriCorps Conference in Sacramento.

2 staff X ($250 airfare + $50 ground transportation + $250 registration fee+$100 lodging + $35 per diem) = $1,370 for California AmeriCorps conference.

**2. Member Travel** N/A.

* 1. **Equipment** N/A.
	2. **Supplies**

Include the amount of funds to purchase consumable supplies and materials. You must individually list any single item costing $1,000 or more.

* 1. **Contractual and Consultant Services**

Include costs for consultants related to the project’s operations, except training, which will be listed in Sections G. below.

* 1. **1. Staff Training**

Include the costs associated with training staff on project requirements and training to enhance the skills staff need for effective project implementation, i.e., project or financial management, team building, etc. Please include any training/conference registration in this line item.

**2. Member Training** N/A.

**h. Evaluation** N/A.

**i. Other Program Operating Costs**

Allowable costs in this budget category should include when applicable:

* Office space rental for projects operating without an approved indirect cost rate agreement that covers office space. If space is budgeted and it is shared with other projects or activities, the costs must be equitably pro-rated and allocated between the activities or projects.
* Utilities, telephone, Internet and similar expenses that are specifically used for AmeriCorps members and AmeriCorps project staff, and are not part of the organizations indirect cost/admin cost allocation pool. If such expenses are budgeted and shared with other projects or activities, the costs must be equitably pro-rated and allocated between the activities or projects.

**Section II. Member Costs**

All Member Costs are N/A.

**Section III. Administrative Costs**

1. **Subgrant Administrative Cost Allocation**

Administrative costs are general or centralized expenses of the overall administration of an organization that receives CNCS funds and do not include particular project costs. These costs may include administrative staff positions. For organizations that have an established indirect cost rate for federal awards, administrative costs mean those costs that are included in the organization’s indirect cost rate agreement. Such costs are generally identified with the organization’s overall operation and are further described in Office of Management and Budget Circulars A-21, A-87, and A-122.

The CNCS fixed rate allows you to charge administrative costs up to a cap without a federally approved indirect cost rate and without documentation supporting the allocation. If you choose the CNCS Fixed Percentage Method (Section IIIA in eGrants), you may charge, for administrative costs, a fixed 5% of the total of the CNCS funds expended. In order to charge this fixed 5%, the grantee match for administrative costs may not exceed 10% of all direct cost expenditures.

1. To determine the CNCS share for Section III:  Multiply the sum of the CNCS funding shares of Sections I and II by 0.0526. This is the maximum amount you can request as CNCS share. The 5% maximum is calculated by multiplying the sum of the CNCS’s share of Section I and Section II by the factor 0.0526.  The factor 0.0526 is used to calculate the maximum amount of federal funds that may be budgeted for administrative (indirect) costs, rather than 0.0500, as a way to mathematically compensate for determining Section III costs when the total budget (Sections I + II + III) is not yet established.  (If 0.0500 was used, the resulting Section III costs would be less than the maximum 5% of total costs that are permitted under the CNCS’s regulations.) As allowed by CNCS, CaliforniaVolunteers retains 20% of the federal share of administrative costs.
2. To determine the maximum Grantee share for Section III:  Then multiply the total (both CNCS and grantee share) of Sections I and II by 10% (0.10) and enter this amount as the grantee share for Section III A.

3. Enter the sum of the CNCS and grantee shares under Total Amount.

**Calculation of CV/Grantee Share of Federal Administrative Costs**

As allowed by CNCS, CaliforniaVolunteers elects to retain a share of the 5% of the federal funds available for administrative costs. To calculate these fractional shares, within Section III of the subgrant budget, **one-fifth (20%) of the federal dollars budgeted for administrative costs are allocated to CV’s share and four-fifths (80%) of the federal dollars budgeted for administrative costs are allocated to the program’s share. Because programs budget the 5% administrative maximum by multiplying the CNCS’s share of Section I and Section II costs by the factor 0.0526, the allocation between commission and program shares would be calculated as follows:**

([Section I CNCS Share] + [Section II CNCS Share] x 0.0526) x (0.20) = CV Share

([Section I CNCS Share] + [Section II CNCS Share] x 0.0526) x (0.80) = Subgrantee Share

1. **Federally Approved Indirect Cost Rate Method**

If you have a Federally Approved Indirect Cost (IDC) rate and choose to use it, the IDC rate will constitute documentation of your administrative costs, including the 5% maximum payable by the CNCS. Specify the Cost Type for which your organization has current documentation on file, i.e., Provisional, Predetermined, Fixed, or Final indirect cost rate. Supply your approved IDC rate (percentage) and the base upon which this rate is calculated (direct salaries, salaries and fringe benefits, etc.). It is at your discretion whether or not to claim your entire IDC rate to calculate administrative costs. If you choose to claim a lower rate, please include this rate in the Rate Claimed field.

1. Determine the base amount of direct costs to which you will apply the IDC rate, including both the CNCS and grantee shares, as prescribed by your established rate agreement (i.e., based on salaries and benefits, total direct costs, or other). Then multiply the appropriate direct costs by the rate being claimed. This will determine the total amount of indirect costs allowable under the grant.
2. To determine the CNCS share: Multiply the sum of the CNCS funding share in Sections I and II by 0.0526. This is the maximum amount you can claim as the CNCS share of indirect costs.
3. To determine the Grantee share: Subtract the amount calculated in step 2 (the CNCS administrative share) from the amount calculated in step 1 (the Indirect Cost total). This is the amount the applicant can claim as grantee share for administrative costs.

**NOTE: If you choose this method, you must submit documentation of your IDC along with your required hardcopy documents to CV.**

**Section IV. Sources and Types of Match Contributions**

In the “Source and Types of Match Contributions” table that appears at the bottom of th*e Budget Narrative*, enter the specific source of match, the match type [State/Local, Federal, or Private], the amount of cash and the dollar amount of in-kind, and a brief description of the intended purpose of the match (e.g. personnel expenses, travel, etc.). Define any acronyms the first time they are used.

ORGANIZATIONAL SELF-ASSESSMENT FORM

**Applicant Organization Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Below are questions regarding your current/future policies and procedures and necessary fiscal procedures for managing an AmeriCorps Grant. Please answer each question to the best of your knowledge. If you have additional information, please provide it in the designated space below.

|  |  |  |
| --- | --- | --- |
|  | **YES** | **NO** |
| 1. Applicant has a written Policies and Procedures Manual that governs fiscal and programmatic activities.
 |  |  |
| 1. Applicant has systems for general financial management tasks which include:

bank reconciliations, process for review of budget to actual, and monitoring sub-grantees (if applicable). |  |  |
| 1. Applicant has a plan or system to ensure they will comply with all AmeriCorps Provisions and CV Requirements upon receipt of grant.
 |  |  |
| 1. Your organization has a process to keep the policies and procedures current to reflect changes or updates in laws, regulations, guidance, and funding requirements associated with managing an AmeriCorps grant.
 |  |  |
| 1. Applicant has policy for maintaining supporting documentation for all expenditures to ensure a clear audit trail.
 |  |  |
| 1. Applicant has dedicated fiscal staff who are qualified and capable of supporting this grant.
 |  |  |
| 1. Applicant has a practice for capturing staff/member time on split-funded projects.
 |  |  |
| 1. Applicant understands that this is a reimbursement-based grant and has the ability to manage cash flow. (Applicants are advised they need to ensure they have funds available to cover start-up costs prior to the receipt of the first invoice payment.)
 |  |  |
| 1. Applicant has the ability to track matching funds as both revenue and expenditures in their accounting system.
 |  |  |
| 1. Applicant has a system or plan to ensure that members are eligible to serve.
 |  |  |
| 1. Applicant has a system or plan to ensure that staff will receive adequate training to perform their duties.
 |  |  |
| 1. Applicant understands that this grant is subject to the requirements of applicable OMB Circulars (A-21, A-87, A102, A110, A122, and A133) and can meet the requirements of these circulars as they apply to your organization.
 |  |  |

Additional information or clarification of any of the above responses (optional): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***I am authorized by the legal applicant agency to verify that the statements in this application are true, complete, and correct to the best of my knowledge. I understand that any material misrepresentation may be grounds for rejection of this application.***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (please print) Position/Title (please print)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

**Authorization, Assurances, and Certifications**

Read the Authorization, Assurances, and Certifications carefully. The person who authorizes the application must be the applicant’s Authorized Representative or his/her designee. An Authorized Representative is the person in your organization authorized to accept and commit funds on behalf of the organization. A copy of the governing body’s authorization for this official representative to sign must be on file in the applicant’s office.

**By signing and submitting this application, as the duly authorized representative of the applicant, you certify that the applicant will comply with the Assurances and Certifications described below.**

**a) Inability to certify**

Your inability to provide the assurances and certifications listed below will not necessarily result in denial of a grant. You must submit an explanation of why you cannot do so. We will consider your explanation in determining whether to enter into this transaction. However, your failure to furnish an explanation will disqualify your application.

**b) Erroneous certification or assurance**

The assurances and certifications are material representations of fact upon which we rely in determining whether to enter into this transaction. If we later determine that you knowingly submitted an erroneous certification or assurance, in addition to other remedies available to the federal government, we may terminate this transaction for cause or default.

**c) Notice of error in certification or assurance**

You must provide immediate written notice to us if at any time you learn that a certification or assurance was erroneous when submitted or has become erroneous because of changed circumstances.

**d) Definitions**

The terms “covered transaction”, “debarred”, “suspended”, “ineligible”, “lower tier covered transaction”, “participant”, “person”, “primary covered transaction”, “principal”, “proposal”, and “voluntarily excluded” as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. An applicant shall be considered a “prospective primary participant in a covered transaction” as defined in the rules implementing Executive Order 12549. You may contact us for assistance in obtaining a copy of those regulations.

**e) Assurance requirement for subgrant agreements**

You agree by submitting this proposal that if we approve your application you shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by us.

**f) Assurance inclusion in subgrant agreements**

You agree by submitting this proposal that you will obtain an assurance from prospective participants in all lower tier covered transactions and in all solicitations for lower tier covered transactions that the participants are not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction.

**g) Assurance of subgrant principals**

You may rely upon an assurance of a prospective participant in a lower-tier covered transaction that is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless you know that the assurance is erroneous. You may decide the method and frequency by which you determine the eligibility of your principals. You may, but are not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

**h) Non-assurance in subgrant agreements**

If you knowingly enter into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the federal government, we may terminate this transaction for cause or default.

**i) Prudent person standard**

Nothing contained in the aforementioned may be construed to require establishment of a system of records in order to render in good faith the assurances and certifications required. Your knowledge and information is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

**ASSURANCES**

As the duly authorized representative of the applicant, I certify, to the best of my knowledge and belief, that the applicant:

1. Has the legal authority to apply for federal assistance, and the institutional, managerial, and financial capability (including funds sufficient to pay the non-federal share of project costs) to ensure proper planning, management, and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the state, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM’s Standards for a Merit System of Personnel Administration (5 CFR 900, Subpart F).
6. Will comply with all federal statutes relating to nondiscrimination. These include but are not limited to: Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color, or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. 1681-1683, and 1685-1686). which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), which prohibits discrimination on the basis of disability (d) The Age Discrimination Act of 1975, as amended (42 U.S.C. 6101-6107), which prohibits discrimination on the basis of age; (e) The Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) The Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) sections 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290dd-3 and 290ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the National and Community Service Act of 1990, as amended; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of federal participation in purchases.
8. Will comply with the provisions of the Hatch Act (5 U.S.C. 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C 276a and 276a-77), the Copeland Act (40 U.S.C 276c and 18 U.S.C. 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. 327-333), regarding labor standards for Federally assisted construction sub-agreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires the recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is $10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved state management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C 1451 et seq.); (f) conformity of federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16U.S.C. 469a-l et seq.).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§ 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984, as amended, and OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations.
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, application guidelines, and policies governing this program.
* Will comply with all rules regarding prohibited activities, including those stated in applicable Notice, grant provisions, and program regulations, and will ensure that no assistance made available by CNCS will be used to support any such prohibited activities.

 Will comply with the nondiscrimination provisions in the national service laws, which provide that an individual with responsibility for the operation of a project or program that receives assistance under the national service laws shall not discriminate against a participant in, or member of the staff of, such project or program on the basis of race, color, national origin, sex, age, political affiliation, disability, or on the basis of religion. (NOTE: the prohibition on religious discrimination does not apply to the employment of any staff member paid with non-CNCS funds or paid with CNCS funds but employed with the organization operating the project prior to or on the date the grant was awarded. If your organization is a faith-based organization that makes hiring decisions on the basis of religious belief, your organization may be entitled, under the Religious Freedom Restoration Act, 42 U.S.C. § 2000bb, to receive federal funds and yet maintain that hiring practice, even though the national service legislation includes a restriction on religious discrimination in employment of staff hired to work on a CNCS-funded project and paid with CNCS grant funds. (42 U.S.C. §§ 5057(c) and 12635(c)). For the circumstances under which this may occur, please see the document “Effect of the Religious Freedom Restoration Act on Faith-Based Applicants for Grants” on CNCS’s website at: <http://www.usdoj.gov/archive/fbci/effect-rfra.pdf>.

* Will comply with all other federal statutes relating to nondiscrimination, including any self-evaluation requirements. These include but are not limited to: (a)Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color, or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. 1681-1683, and 1685-1686). which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), which prohibits discrimination on the basis of handicaps (d) The Age Discrimination Act of 1975, as amended (42 U.S.C. 6101-6107), which prohibits discrimination on the basis of age; (e) The Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) The Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) sections 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; and (i) the requirements of any other nondiscrimination statute(s) which may apply to the application.
* Will provide, in the design, recruitment, and operation of any AmeriCorps program, for broad-based input from – (1) the community served, the municipality and government of the county (if appropriate) in which the community is located, and potential participants in the program; and (2) community-based agencies with a demonstrated record of experience in providing services and local labor organizations representing employees of service sponsors, if these entities exist in the area to be served by the program;
* Will, prior to the placement of participants, consult with the appropriate local labor organization, if any, representing employees in the area who are engaged in the same or similar work as that proposed to be carried out by an AmeriCorps program, to ensure compliance with the nondisplacement requirements specified in section 177 of the NCSA;
* Will, in the case of an AmeriCorps program that is not funded through a State, consult with and coordinate activities with the State Commission for the state in which the program operates.
* Will ensure that any national service program carried out by the applicant using assistance provided under section 121 of the National and Community Service Act of 1990 and any national service program supported by a grant made by the applicant using such assistance will address unmet human, educational, environmental, or public safety needs through services that provide a direct benefit to the community in which the service is performed;
* Will comply with the nonduplication and nondisplacement requirements set out in section 177 of the National and Community Service Act of 1990, and in CNCS’s regulations at § 2540.100;
* Will comply with the grievance procedure requirements as set out in section 176(f) of the National and Community Service Act of 1990 and in CNCS’s regulations at 45 CFR § 2540.230;
* Will provide participants in the national service program with the training, skills, and knowledge necessary for the projects that participants are called upon to perform;
* Will provide support services to participants, such as information regarding G.E.D. attainment and post-service employment, and, if appropriate, opportunities for participants to reflect on their service experiences;
* Will arrange for an independent evaluation of any national service program carried out using assistance provided to the applicant under section 121 of the National and Community Service Act of 1990 or, with the approval of CNCS, conduct an internal evaluation of the program;
* Will apply measurable performance goals and evaluation methods, which are to be used as part of such evaluation to determine the program’s impact on communities and persons served by the program, on participants who take part in the projects, and in other such areas as required by CNCS;
* Will ensure the provision of a living allowance and other benefits to participants as required by CNCS;
* Has not violated a Federal criminal statute;
* If a state applicant, will ensure that the State subgrants will be used to support national service programs selected by the State on a competitive basis;
* If a state applicant, will seek to ensure an equitable allocation within the State of assistance and approved national service positions, taking into consideration such factors as the locations of the programs, population density, and economic distress;
* If a state applicant, will ensure that not less than 60% of the assistance will be used to make grants to support national service programs other than those carried out by a State agency, unless CNCS approves otherwise.

**CERTIFICATIONS**

**Certification – Debarment, Suspension, and Other Responsibility Matters**

This certification is required by the government-wide regulations implementing Executive Order 12549, Debarment and Suspension, 2 CFR Part 180, Section 180.335, *What information must I provide before entering into a covered transaction with a Federal agency?*

As the duly authorized representative of the applicant, I certify, to the best of my knowledge and belief, that neither the applicant nor its principals:

* Is presently excluded or disqualified;
* Has been convicted within the preceding three years of any of the offenses listed in § 180.800(a) or had a civil judgment rendered against it for one of those offenses within that time period;
* Is presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission or any of the offenses listed in § 180.800(a); or
* Has had one or more public transactions (Federal, State, or local) terminated within the preceding three years for cause or default.

**Certification – Drug Free Workplace**

This certification is required by CNCS’s regulations implementing sections 5150-5160 of the Drug-Free Workplace Act of 1988 (P.L. 100-690), 45 CFR Part 2545, Subpart B. The regulations require certification by grantees, prior to award, that they will make a good faith effort, on a continuing basis, to maintain a drug-free workplace. The certification set out below is a material representation of fact upon which reliance will be placed when the agency determines to award the grant. False certification or violation of the certification may be grounds for suspension of payments, suspension or termination of grants, or government-wide suspension or debarment (see 45 CFR Part 2542, Subparts G and H).

As the duly authorized representative of the grantee, I certify, to the best of my knowledge and belief, that the grantee will provide a drug-free workplace by:

1. Publishing a drug-free workplace statement that:
	1. Notifies employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee’s workplace;
	2. Specifies the actions that the grantee will take against employees for violating that prohibition; and
	3. Informs employees that, as a condition of employment under any award, each employee will abide by the terms of the statement and notify the grantee in writing if the employee is convicted for a violation of a criminal drug statute occurring in the workplace within five days of the conviction;
2. Requiring that a copy of the statement described in paragraph (A) be given to each employee who will be engaged in the performance of any Federal award;
3. Establishing a drug-free awareness program to inform employees about:
	1. The dangers of drug abuse in the workplace;
	2. The grantee’s policy of maintaining a drug-free workplace;
	3. Any available drug counseling, rehabilitation, and employee assistance programs; and
	4. The penalties that the grantee may impose upon them for drug abuse violations occurring in the workplace;
4. Providing us, as well as any other Federal agency on whose award the convicted employee was working, with written notification within 10 calendar days of learning that an employee has been convicted of a drug violation in the workplace;
5. Taking one of the following actions within 30 calendar days of learning that an employee has been convicted of a drug violation in the workplace:
	1. Taking appropriate personnel action against the employee, up to and including termination; or
	2. Requiring that the employee participate satisfactorily in a drug abuse assistance or rehabilitation program approved for these purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
6. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (A) through (E).

**Certification - Lobbying Activities**

As required by Section 1352, Title 31 of the U.S. Code, as the duly authorized representative of the applicant, I certify, to the best of my knowledge and belief, that:

1. No federal appropriated funds have been paid or will be paid, by or on behalf of the applicant, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer of Congress in connection with the awarding of any federal contract, the making of any federal loan, the entering into of any cooperative agreement, or modification of any federal contract, grant, loan, or cooperative agreement;
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 applicant will submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions;
3. The applicant will require that the language of this certification be included in the award documents for all subcontracts at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients will certify and disclose accordingly.

**Certification - Grant Review Process (State Commissions Only)**

I certify that in conducting our review process, we have ensured compliance with the National and Community Service Act of 1990, CNCS's peer review requirements, and all state laws and conflict of interest rules.

**Erroneous certification or assurance**

The assurances and certifications are material representations of fact upon which we rely in determining whether to enter into this transaction. If we later determine that you knowingly submitted an erroneous certification or assurance, in addition to other remedies available to the federal government, we may terminate this transaction for cause or default.

**Notice of error in certification or assurance**

You must provide immediate written notice to us if at any time you learn that a certification or assurance was erroneous when submitted or has become erroneous because of changed circumstances.

**Definitions**

The terms “debarment”, “suspension”, “excluded”, “disqualified”, “ineligible”, “participant”, “person”, “principal”, “proposal”, and “voluntarily excluded” as used in this document have the meanings set out in 2 CFR Part 180, subpart I, “Definitions.” A transaction shall be considered a “covered transaction” if it meets the definition in 2 CFR part 180 subpart B, “Covered Transactions.”

**Assurance requirement for subgrant agreements**

You agree by submitting this proposal that if we approve your application you shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by us.

**Assurance inclusion in subgrant agreements**

You agree by submitting this proposal that you will obtain an assurance from prospective participants in all lower tier covered transactions and in all solicitations for lower tier covered transactions that the participants are not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction.

**Assurance of subgrant principals**

You may rely upon an assurance of a prospective participant in a lower-tier covered transaction that is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless you know that the assurance is erroneous. You may decide the method and frequency by which you determine the eligibility of your principals. You may, but are not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

**Non-assurance in subgrant agreements**

If you knowingly enter into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the federal government, we may terminate this transaction for cause or default.

**Prudent person standard**

Nothing contained in the aforementioned may be construed to require establishment of a system of records in order to render in good faith the assurances and certifications required. Your knowledge and information is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

**Authorization, Assurances, and Certification**

***Please complete this form and include in the application.***

**assurance SIGNATURE:**

By signing this assurances page, you certify that you agree to perform all actions and support all intentions in the Assurances section.

**Applicant Organization Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Program Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name and Title of Authorized Applicant Representative

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Applicant Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

**cERTIFICATION signature:**

By signing this certification page, you certify that you agree to perform all actions and support all intentions in the Certification sections of this application. The three Certifications are:

* Certification: Debarment, Suspension and Other Responsibility Matters
* Certification: Drug-Free Workplace
* Certification: Lobbying Activities

**Applicant Organization Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Program Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name and Title of Authorized Applicant Representative

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Applicant Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date