Checklist for Prescott Grant Application

Please see the <u>NOAA Grant Application website</u> to understand the updated application process.

Federal Grant Forms (Individual PDFs)

- 1. Project Abstract Summary *new form*
- 2. SF-424, Application for Federal Assistance
- 3. SF-424A, Budget Information, Non-Construction Programs
- 4. SF-424B, Assurances, Non-Construction Programs
- 5. CD-511, Certifications Regarding Lobbying
- 6. SF-LLL, Disclosure of Lobbying Activities (if applicable)

For Construction (only if construction cost is ≥ 50% of federal budget request).

- 7. SF-424C, Budget Information, Construction Programs
- 8. SF-424D, Assurances, Construction Programs

Budget Information

- 1. Budget narrative (no page limit)
- 2. Budget table (no page limit)
- 3. Negotiated Indirect Cost Rate Agreement (NICRA) *
- 4. Equipment quotes*
- 5. Position description

Proposal Narrative

1) Proposal Narrative (10-page limit)

- a) Goals and Objectives
- b) Project Management
- c) Project Description
 - i) Project activities and how they relate to the project's goals and objectives
 - ii) A list of the activities that will be conducted by identified personnel
 - iii) Project milestones w/ specific activities timelines
 - iv) Identify the outcomes, results, or products, and how they relate to the Prescott Grant Program goals and outreach/education efforts. See <u>NAAEE's Community Engagement</u> <u>Guidelines for Excellence</u> for tips on engagement of target audiences

^{*}Not required in your application, but will be required if selected for funding.

- v) If resubmission of previous unfunded Prescott Grant application, describe revisions as they pertain to prior Technical Review comments
- d) Describe need for Federal Assistance
- e) Identify Collaborators

2) Organizational Summary (3-page limit)

- a) See example on Prescott Grant website
- b) Include maps, statistics, organization overview, size & capacity of facility
- c) Explain your role in network & how you work w/partners
- d) Provide financial overview
- 3) Data Sharing Plan (2-page limit)
- 4) Statement of Diversity and Inclusion (2-page limit)
 - a) Hiring practices & support of employees
 - b) Discrimination policy
 - c) Outreach and education to underrepresented groups in STEM
 - d) Current organizational inequities & efforts to improve
- 5) Appendices (15-page limit)
- 6) Supporting Documentation (no page limit)
 - a) Letter of Eligibility
 - b) Results of Previous Prescott Awards in the past 3 yrs
 - c) CVs or Resume (4-page limit per CV/Resume)
 - d) Letters of Collaboration (project partners outside of organization acknowledging participation)
 - e) Letters of Reference for New Applicants Only (optional, 3-letter limit)
 - f) Cover letters for Permits, Parts Authorization Letters, IACUC Approvals, Complete Environmental Analyses

Submission Checklist for eRA Requirements

Below is a summary checklist of the items discussed in this document. All items below should be checked before you submit your application in Grants.gov. If you have any questions, please reach out to the eRA HelpDesk or the Prescott Grant Manager (arthur.wong@noaa.gov).

- 1. SAM.gov Registration and approved UEI
- 2. eRA Commons Registration
- 3. Grants.gov Registration
- 4. PD/PI Account Created
- 5. PD/PI Commons ID (Username) entered exactly on Box 4 on the SF-424
- 6. UEI entered exactly on Box 8c. of the SF-424
- 7. Congressional District formatted correctly (ex. VA-001)
- 8. All PDFs flattened
- 9. File sizes are less than 100 MB
- 10. File page sizes are 8 ½" x 11"
- 11. File names are shorter than 50 characters (including spaces)
- 12. File names do not include invalid characters (&, diacritical marks)

Application and Form Tips

Federal Grant Form SF-424

	Application for Federal Assista	ance SF-424										
	* 1. Type of Submission:	* 2. Type of Application:	If Revision, select appropriate letter(s):									
	Preapplication	New										
	Application	Continuation *	Other (Specify):									
	Changed/Corrected Application	Revision										
	* 3. Date Received:	Applicant Identifier:			Commons Username)							
	5a. Federal Entity Identifier:		5b. Federal Award Identifier:									
	State Use Only:											
	6. Date Received by State:	7. State Application I	dentifier:									
This is the augustication's	8. APPLICANT INFORMATION:											
This is the organization's name that is registered	a. Legal Name:											
in Sam.gov	* b. Employer/Taxpayer Identification Nu	mber (EIN/TIN):	* c. UEI:									

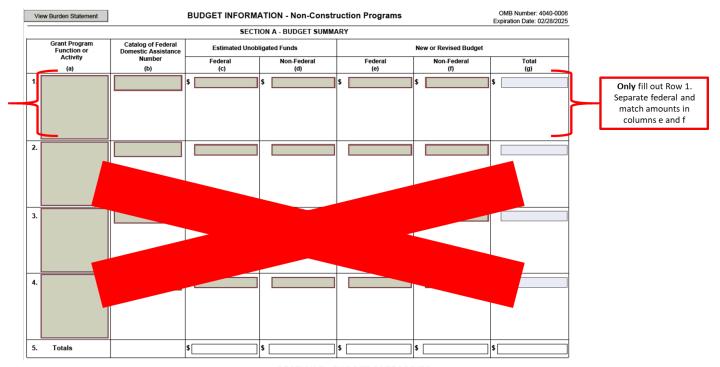
Application for Federal Assistance SF-424 List Congressional 16. Congressional Districts Of: Districts individually, do * a. Applicant * b. Program/Project not write ALL. Click add Attach an additional list of Program/Project Congressional Districts if needed. attachment for multiple Delete Attachment Add Attachment 17. Proposed Project: * a. Start Date: * b. End Date: 18. Estimated Funding (\$): * a. Federal Fill out a. Federal, b. b. Applicant * c. State Applicant, and g. TOTAL d. Local ONLY. Whole dollars, no e. Other cents * f. Program Incom g. TOTAL Choose either a or b. * 19. Is Application Subject to Review By State Under Executive Order 12372 Process? Check Intergovernmental a. This application was made available to the State under the Executive Order 12372 Process for review on b. Program is subject to E.O. 12372 but has not been selected by the State for review. Review (SPOC List) for c. Program is not covered by E.O. 12372. your State * 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.) https://www.whitehouse.gov/wpcontent/uploads/2023/06/SPOC-list-No as-of-2023.pdf If "Yes", provide explanation and attach 21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001) ** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions. Authorized Representative: • Prefix: * First Name: Middle Name * Last Name: Suffix: Make sure the signature * Title: matches the person * Telephone Number: Fax Number: identified as the * Email: Authorized

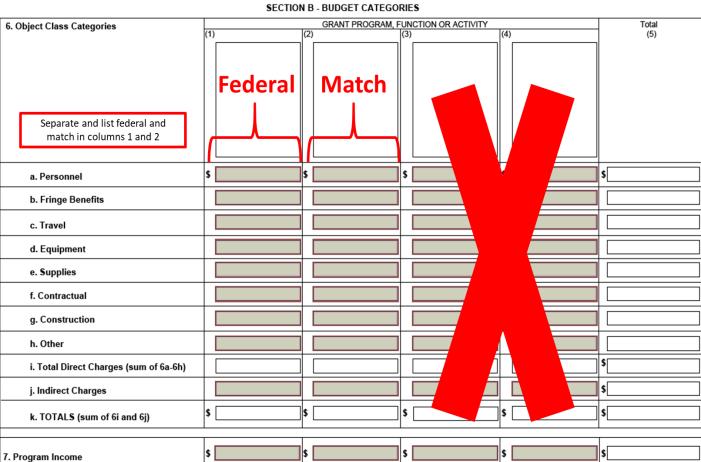
* Date Signed:

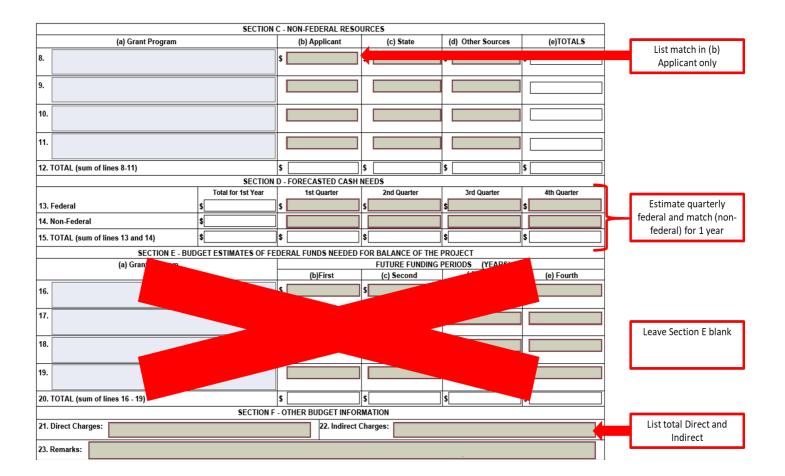
* Signature of Authorized Representative

Representative

FOR SINGLE YEAR (One, 12-Month Period) SF-424A







FOR 2 YEARS (Two, 12-Month Periods) SF-424A

View Burden Statement

BUDGET INFORMATION - Non-Construction Programs

OMB Number: 4040-0006 Expiration Date: 02/28/2025

SECTION A - BUDGET SUMMARY									
Grant Program Catalog of Federal Function or Domestic Assistance Activity Number		Estimated Unob		New or Revised Budget					
		Number	Federal	Non-Federal	Federal	Non-Federal	Total		
\vdash	(a)	(b)	(c)	(d)	(e)	(f)	(g)		
1	YR 1 FEDERAL		\$	\$	\$	\$	\$		
2	YR 1 MATCH								
3	YR 2 FEDERAL								
4	YR 2 MATCH								
5	Totals		\$	\$	\$	\$	s		

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SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY							Total	
a. object state sangettes	(1)	1)				(3))	(5)
		YR 1 FEDERAL		YR 1 MATCH		YR 2 FEDERAL		YR 2 MATCH	
a. Personnel	\$		\$		\$		\$		\$
b. Fringe Benefits									
c. Travel	L								
d. Equipment									
e. Supplies									
f. Contractual									
g. Construction									
h. Other									
i. Total Direct Charges (sum of 6a-6h)									\$
j. Indirect Charges									\$
k. TOTALS (sum of 6i and 6j)	\$		\$		\$		\$		\$
7. Program Income	\$		\$		\$		\$		\$

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SECTION C - NON-FEDERAL RESOURCES									
(a) Grant Program		(b) Applicant		(c) State	L	(d) Other Sources		(e)TOTALS	
8. YR 1 Match (Applicant column)	\$		\$		\$		\$		
9. YR 2 Match (Applicant column)									
10.									
11.									
12. TOTAL (sum of lines 8-11)	\$		\$		\$		\$		
SECTION	ΙĎ	- FORECASTED CASH	NE	ED\$	_		_		
Total for 1st Year	Τ	1st Quarter	Τ	2nd Quarter	Ι.	3rd Quarter	Γ	4th Quarter	
13. Federal \$	\$		\$		S		\$		
14. Non-Federal YR 1 Match \$	1		ī				П		
15. TOTAL (sum of lines 13 and 14)	\$		\$		\$		\$		
SECTION E - BUDGET ESTIMATES OF F	EDE	ERAL FUNDS NEEDED	FO	OR BALANCE OF THE	PF	OJECT	_		
(a) Grant Program	FUTURE FUNDING PERIODS (YEARS)								
	\perp	(b)First	\perp	(c) Second	L	(d) Third	L	(e) Fourth	
16. YR 2 Federal only ((b) First Column)	\$		\$		\$		\$		
17.			1		1				
18.	Ī		1		ı				
19.	Ī		1		1				
20. TOTAL (sum of lines 16 - 19)	\$		\$		\$		\$		
SECTION F - OTHER BUDGET INFORMATION									
21. Direct Charges:	21. Direct Charges: 22. Indirect Charges:								
23. Remarks:									

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Form Tips

- SF424 #19. This program is eligible for coverage under E.O. 12372. Choose "a" or "b". Please check "Intergovernmental Review of Federal Programs (SPOC List)" for your state's requirement.
- List of Grants.gov Form Instructions.

Budget Tips

- All dollar amounts listed in your budget should be the same in the budget narrative, budget table, SF-424 and SF-424A.
- Budget table- provide a breakdown for a supplies budget of \$5,000 or more.
- <u>'Other' category</u>- show how you estimated this cost regardless of the amount (e.g., you estimate \$1,000 for sample analyses, please show how you calculated that amount).
- The Authorized Representative must be the same person for **ALL** of the signed forms and should be the person that logs into the Grants.gov workspace. All form signatures will become the name listed on the Grants.gov workspace.
- If no fringe or indirect costs are budgeted, please provide a sentence stating that indirect costs are not needed and the reason why (e.g., "Indirect costs are not needed and will be covered by another part of our program").
- SAM.gov registration must be current when submitting the application. You should
 ensure it remains current through September of the following year by proactively renewing
 your registration before it expires. If it expires at any point during the year, the renewal can
 take a lot longer and may delay receiving an award

Resources

Prescott Cost-Share Calculator

Independent Sector

NFWF Indirect Cost Calculator

Budget Narrative Guidance for NOAA Grants

OMB Uniform Guidance at 2 CFR part 200, IV to determine Cognizant Agency for individualized NICRA

NOAA NICRA contact, Jennifer Jackson, NOAA Grants Management Division jennifer.jackson@noaa.gov.

Proposal Tips

- Example documents can be found at the bottom of the <u>Prescott FAQs page</u>
- High Priority Pathogens List 2011
- DO NOT include IRS documents regarding 501c3 status nor Stranding Agreement (the Eligibility Letter replaces your Stranding Agreement)

Registration Tips

- System for Award Management (SAM) required to do business with the U.S. government (minimum 10 days for full registration). SAM will issue a 12-character unique entity identifier (UEI) used to complete your full SAM registration and which serves as the official organization identifier in other federal systems
- Grants.gov required to submit grant applications through the federal-wide grant portal
- <u>eRA Commons</u> required to do business with NIH and some agency partners such as NOAA (4 weeks for full registration)

Resources

SAM.gov Help Desk 866-606-8220 https://sam.gov/content/about/contact

Grants.gov Help Desk 800-518-4726 support@grants.gov

eRA Commons Help Desk 866-504-9552 (Toll-free) 301-402-7469 (Phone) https://www.era.nih.gov/need-help