

FY2011 NA S&PF Competitive Allocation Request for Proposals Application*

Project Applicant	<i>Identify the entity responsible for conducting the fiscal and performance accountability of the project. The project applicant will usually be the recipient, except for multistate proposals.</i>
Project Title	<i>Provide an appropriate title. This will be the title used on the Application for Federal Financial Assistance should the project be funded.</i>
Project Location	<i>Identify State(s), watershed(s), community(ies), counties, congressional districts, or other appropriate geographic area(s) to which project activities will be targeted.</i>
Issues/Concerns	<i>Identify the significant issue(s) or concern(s) that this proposal addresses (State, regional, and/or national objectives and priorities).</i>
Project Lead	<i>Provide the name(s) and contact information (address, phone, fax, and e-mail) of the grant administrator and the State staff who will serve as the principal contact(s) for the project.</i>
Federal Funding Requested	<i>Provide the total Federal funding requested. The minimum project proposal amount is \$30,000 Federal share. It is recommended that project proposals requiring less than \$30,000 be bundled with other projects to create a larger project. The maximum amount of Federal funding that will be awarded to any one State via this competitive process is \$1.5 million.</i>
Recipient of Funds	<i>Provide the name(s) and contact information (address, phone, fax, and e-mail) of the fund recipient. A DUNS number (current in the Central Contracting Registry) and Employer Identification Number (EIN) are required for fund recipients. For multistate projects, identify each recipient, and the mix and amount of funding to be directly awarded. If a third party is involved, provide contact information and funding amount for grant purposes.</i>
Partners	<i>List and/or describe the role of any significant partners (if applicable) who will be involved and their level of commitment. Do not list partners who will not have a material involvement in the project. Attach letters of support as appropriate.</i>
Timeline	<i>Provide a brief, approximate timeline that clearly identifies project milestones and includes an estimated date of completion. Indicate if a specific start date is critical.</i>
Abstract	<i>Provide a short summary of the project that describes its scope, expected accomplishments, and benefits. Limit the abstract to 200 words, emphasizing focus, priorities, and outcomes.</i>
Scope of Work	<i>Provide a detailed narrative that addresses each of the evaluation criteria identified on page 2 of the RFP call letter.</i>

*NOTE: Do not exceed 5 pages (excluding budget tables and concurrence letter) for the entire application.

Budget:

Provide budget information using Table 1 (Proposed Budget) and Table 2 (Cooperator Contributions). Show primary budgeted activities and matching funds. 50:50 non-Federal matching funds are required and can include in-kind contributions of partners in staff time, work performed, and materials and services donated, among other contributions. States may choose to provide grant funds to other local groups and/or partners to assist in project accomplishment.

Table 1 Directions:

1. Lines 1-7: Enter the dollar amount for each item. Additional lines can be added for budget items not listed.
2. Line 8: Identify charges not directly attributable to accomplishing the project, such as overhead. Keep the Forest Service share of indirect charges to a minimum. The indirect rate must be approved by the Federal partner.
3. Line 9: Enter the total of lines 1-8.
4. In column II, be sure to include the total budgeted share of all non-Federal cooperators.

Table 1. Proposed Budget

Categories	I <i>Forest Service's Share</i>	II <i>Cooperator's Share</i>	III <i>Total</i>
1. Personnel			
2. Fringe benefits			
3. Travel			
4. Equipment			
5. Supplies/Materials			
6. Contractual			
7. Other (identify)			
8. Indirect Costs			
9. Total Costs			

Table 2 Directions:

Include a State agency contribution as a cooperator even if this is a single-state proposal. Excluding U.S. Forest Service contributions, identify the value of all non-Federal cooperator contributions. Please value in-kind contributions and materials at reasonable and acceptable rates.

Table 2. Cooperator Contributions

Cooperator	Cash	Materials	In-Kind Services	Total
Totals				

Signatures

State Forester _____ Date: _____

State Forest Health Organization or Agency* _____ Date: _____

* Per eligibility requirements for Forest Health programs only