

Good Morning and  
Welcome everyone!

**Kimberly DuPree**

**Financial Grants Administrator**

Georgia Commission for Service and  
Volunteerism

Contact information

**[Kimberly.DuPree@dca.ga.gov](mailto:Kimberly.DuPree@dca.ga.gov)**



# GETTING STARTED!



DUNS NUMBER



SET-UP EGRANTS  
ACCOUNT

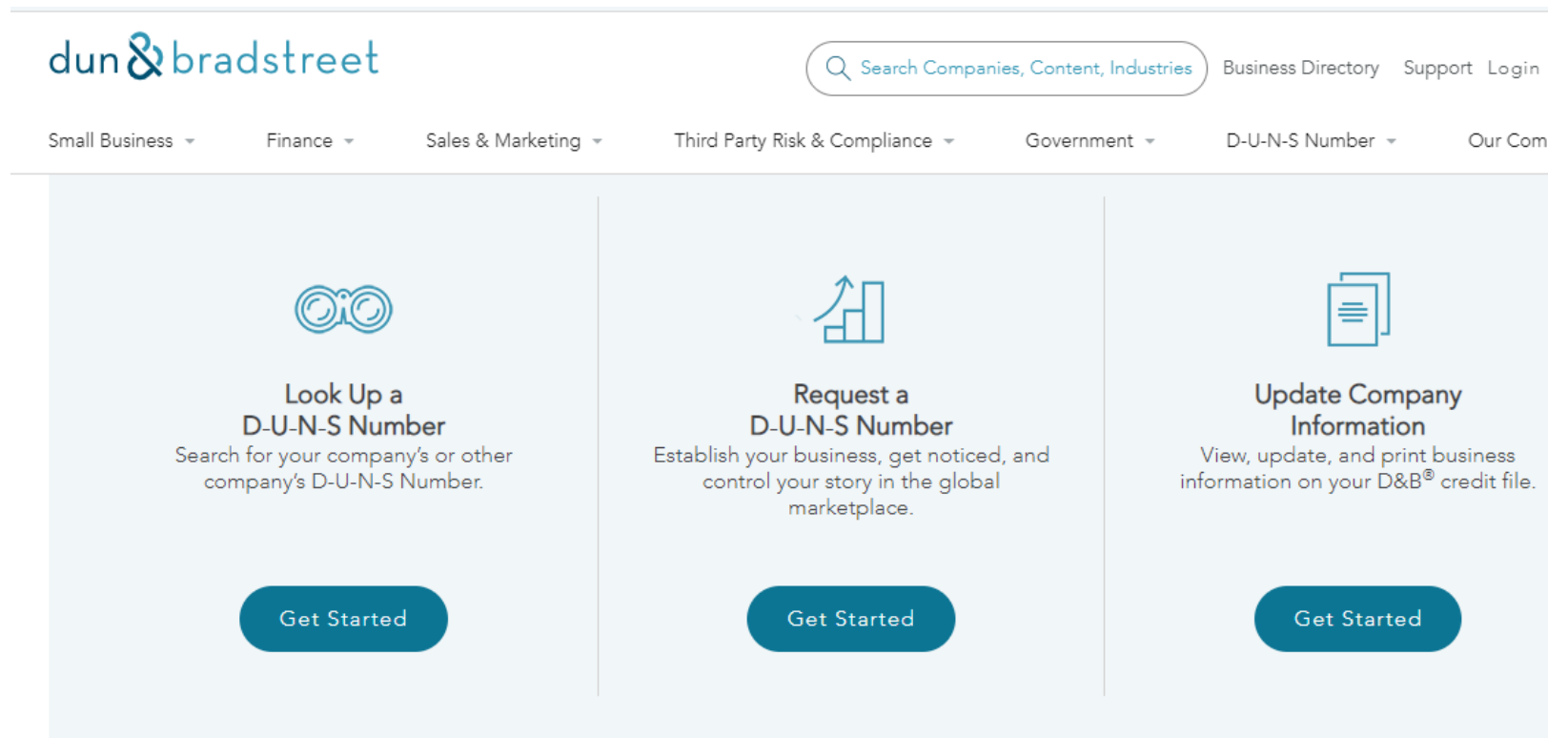


NOFO SELECTION



COMPLETION OF  
FACE SHEET

# DUNS Number



The screenshot shows the Dun & Bradstreet website header with the logo on the left and a search bar on the right containing the text "Search Companies, Content, Industries". Below the search bar are navigation links for "Business Directory", "Support", and "Login". A secondary navigation bar includes "Small Business", "Finance", "Sales & Marketing", "Third Party Risk & Compliance", "Government", "D-U-N-S Number", and "Our Com". The main content area features three columns, each with an icon, a title, a description, and a "Get Started" button. The first column has a magnifying glass icon and is titled "Look Up a D-U-N-S Number". The second column has a bar chart icon and is titled "Request a D-U-N-S Number". The third column has a document icon and is titled "Update Company Information".

- What Is a D-U-N-S Number?
  - The Dun & Bradstreet D-U-N-S Number is a unique nine-digit identifier for businesses. Organizations can request a DUNS number by calling 1-866- 705-5711 or visiting <http://fedgov.dnb.com/webform/displayHomePage.do>.

Entities must have a valid SAM registration and [DUNS and/or Unique Entity Identifier] to receive an award. See Section D.3. Unique entity identifier and System for Award Management (SAM) for more information.



Both the Commission and the Corporation will check [www.SAM.gov](http://www.SAM.gov) for registration.

- This is an annual registration
- You must use your DUNS number or Unique Entity Identifier
  - A unique 9-digit number assigned to your organization by Dun & Bradstreet
- CNCS will perform a name-based check in addition to the DUNS number

## Create an eGrants Account

1

Open

- Open the Create an eGrants Account page.

2

Open

- Open the eGrants Login page. If you are logged into the system, you'll have to log out in order to access this page.

3

Click

- Click Don't have an eGrants account? Create an account. ...

4

Click

- Click Create a grantee account. The Become a Grant Applicant page opens.

5

Click

- Click This is my first time.

# eGRANTS

## CREATE AN EGRANTS ACCOUNT

Please click on one of the following links to create an appropriate eGrants account.

[Become a Peer Reviewer](#) →

[Create a Grantee account](#) →

[Do you already have an eGrants account? Proceed to Login](#) →

Please click on this link to continue to create a new eGrants account.

Before you begin this process, please have your organization's EIN number, Legal applicant name and DUNS number with

# eGRANTS

## BECOME A GRANT APPLICANT

Please select one of the following options below.

[I have an eGrants account...➔](#)

[This is my first time. I want to create a new account with eGrants...➔](#)

Please click on this link to continue to create a new eGrants account.

[Already have an eGrants account? Proceed to Login ➔](#)

Create New Profile Menu

Login Information

Enter EIN#

Select an Organization

Organization Information

Grantee Phone Numbers

Review and Submit

Login Information

Please enter your login information. All questions marked with an asterisk (\*) are required.

\* First Name:  ?

\* Last Name:  ?

Title:  ?

\* User Name:  (ex: rsmith, rsmith2004) ?

\* New Password:  ?

\* Retype New Password:  ?

\* Password Question:  ?

\* Password Answer:  ?

\* Email:  ?

\* Retype e-mail:  ?

If you click on "?" icon, it will open up a pop-up window with additional information in regard to that particular text filed. In order to use this function, you must turn off "pop-up blocker" which is located under "Tools" on your web browser.

You will see the pop-up window for the "New Password" text filed in the next slide.



# eGRANTS

Welcome James

6/10/2006, 9:10 PM, EDT

## Create New Profile Menu

Login Information

→ Enter EIN#

Select an Organization

Organization Information

Grantee Phone Numbers

Review and Submit

## Become a Grant Applicant

[← back](#) [next →](#)

### Enter EIN #

Please enter your organization's EIN#.

Enter your EIN #:

Enter your organizations' 9 digit  
Employer Identification Number.

Welcome James

6/10/2006, 9:16 PM, EDT

Create New Profile Menu

## Become a Grant Applicant

[back](#)[next](#)

### Select an Organization

Your EIN# already exists in our record of organizations. Please click next to proceed, or back to try another EIN.

#### List of Organizations with EIN# 000000002

- Create a new organizational profile for EIN# 000000002

OR select an existing org below

- Chicagoland Community Center - Chicago, IL

If no organizations are listed or the listed organizations do not represent your organization legal applicant name, choose "create a new organization profile" and proceed. It will take you to the next screen (slide # 11)

If you see any organizations listed, please make sure you choose the correct organization that matches your organization's legal applicant name. If there are few listed and you are not sure which one to choose, please stop the process here and contact your CNCS Program Officer to clarify which organization to choose.

6/10/2006, 9:24 PM, EDT

back save next

### Create New Profile Menu

Login Information

Enter EIN#

Select an Organization

Organization Information

Grantee Phone Numbers

Review and Submit

### Organization Information

Please enter your organization information below. All questions marked with an asterisk (\*) are required.

#### GENERAL INFORMATION

\* EIN #: 000000002

DUNS #:  -

\* Organization's Name:

\* Organization Type: Choose an Organization Type ...

Choose an Organization Type from the drop down menu.

#### ORGANIZATIONAL CHARACTERISTIC(S)

Please enter the characteristic(s) that best describe your organization.

Organizational Characteristic: [add characteristic](#)

To add organizational characteristics, please click on "add characteristics" link. You will be able to choose org. characteristics from a drop down menu.

#### CONTACT INFORMATION

\* Street Address 1:

help

logout



# eGRANTS

Welcome James

6/10/2006, 9:49 PM, EDT

## Become a Grant Applicant

← back

save

next →

### Create New Profile Menu

Login Information

Enter EIN#

Select an Organization

Organization Information

→ Grantee Phone Numbers

Review and Submit

### Grantee Phone Numbers

Please enter your phone/fax information below. All questions marked with an asterisk (\*) are required.

\* Daytime Phone:    ext.  ?

Evening Phone:    ?

Fax:    ?

Cell:    ?

Enter your contact information.



# eGRANTS

Welcome James

6/10/2006, 9:53 PM, EDT

## Create New Profile Menu

Login Information

Enter EIN#

Select an Organization

Organization Information

Grantee Phone Numbers

Review and Submit

## Become a Grant Applicant

### Please review and submit your information

Please review your information and click on the

**Organization:** Chicagoland Community Center

**EIN #:** 000000002

**Organization Type:** Non-Profit

**Organizational Characteristics:** Service/Civ

**Organizational Characteristics:** Community

[change](#)

**Username:** james

**Password Question:** City of birth

**Answer:** Chicago

**Email:** james@yahoo.com

[edit](#)

**Daytime Phone:** (773) 00

**Evening Phone:** (312) 00

**Fax:** (773) 000-0000

[edit](#)

Before you submit your request for a new eGrants account, please review the information here.

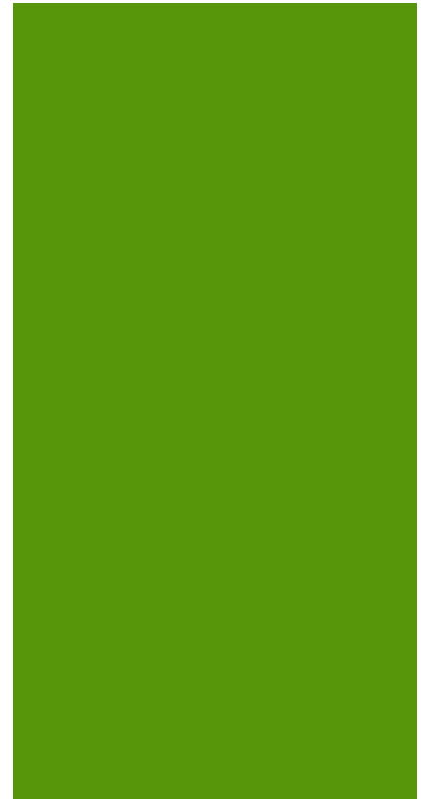
Once you submit, a message will appear notifying that you have created an eGrants account and that your "Grantee Admin" is notified – slide # 16.

You will find more info about Grantee Admin role on slide #19.

You will also receive a automated email from eGrants about the creation of your account – slide # 17.

Your Grantee Admin will also receive an automated email notifying that you have created a new account and to give you eGrants access privileges – slide # 18.

If you are the first person to create an eGrants account from your organization, you will be assigned the "Grantee Admin" role automatically when you submit your account data, and therefore, will be able to access





## Thank you

If you have created an account for an existing organization, the grantee administrator for your organization (listed below) has been notified about your account request. The grantee administrator must grant you access before you can login to eGrants.

For additional assistance, please contact your eGrants support provider or the eGrants help desk at 888-677-7849. For more information about your support provider go to <http://www.cns.gov/egrants/ta.html> .

- James Chicagoland

[Return to CNCS website](#) 

[Go to eGrants Login](#) 

Your Grantee Administrator's name/s will be listed at the bottom of this message.  
Until your Grantee Admin assign you an eGrants user role which gives access privileges, you will not be able to access your organizations eGrants system.

- Microsoft Office Outlook Web Access
- Inbox
- Junk E-mail
- Calendar
- Contacts
- Tasks
- Folders
- Public Folders
- Options
- Log Off

Reply Reply to all Forward X Close Help

From: eGrants Administrator [egrantshelp@cns.gov]  
To: Kapila Wewegama  
Cc:  
Subject: New eGrants Account  
Attachments:

You will receive an automated email from eGrants system notifying the creation of a new account.

Sent: Tue 2/21/2006 8:33 AM

[View As Web Page](#)

This is an automated E-mail message. Please do not reply to it.

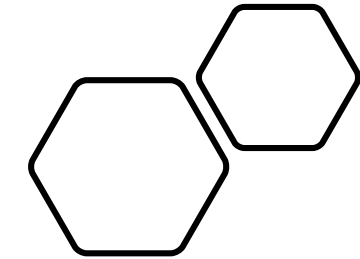
A new login account has been created for you with the username and password you have specified.

The grantee administrator(s) for your organization have been notified about your account. The administrator must complete the registration process by adding the "Grantee" role to your account. Once this is done, you will be able to access eGrants.

The grantee administrator(s) for your organization is/are listed below:

James Chicagoland                      Email: kapila@amentech.net

### 3 Different Roles assigned to eGrants Users:



#### 1. GRANTEE WITH ACCESS TO BUDGET

An eGrants user with this role will be able to access and create applications/reports in the eGrants system and will be able to view and work in all the sections.

#### 2. GRANTEE WITHOUT ACCESS TO BUDGET

An eGrants user with this role will be able to access and create applications/reports in the eGrants system and will be able to view and work in all the sections except for the budget sections.

#### 3. GRANTEE ADMIN

An eGrants user with this role will be able to access and create applications/reports in the eGrants system and will be able to view and work in all the sections. In addition, Grantee Admin eGrants users are also responsible for maintaining the eGrants account system of their organization.

- To edit the current eGrants user roles and permissions, Grantee Admin should click on "Edit User Role/Permission" link listed on their "My Account" page.
- The names of all the eGrants accounts holders for the organization will be listed on this page. To edit the user role for any of the current eGrants account holders listed there, the Grantee Admin should choose the appropriate user role from the drop down list next to the user name.
- To deny access for any of the listed eGrants users, choose "No Access" by clicking on the dropdown arrow next to the individual's name. The system doesn't allow you to remove the name of any registered eGrants users from the organization's account.



### OPTION 1

Grantee Admin logs into account after someone creates account, this link will appear on eGrants home page. They can click on this link to access the screen that list all the eGrants accounts names for their organization – slide # 23.



[VIEW MY GRANTS/APPLICATIONS](#)

 [View all application/grants](#)


### OPTION 2


Your Grantee Admin also can click on "My Account" link or use the "My Account" tab on the top to access their account page to choose the "Edit User Roles/Permissions" link (slide #22) to access the screen that list all the eGrants accounts names for their organization.

[Submitting an Application](#)

[Managing My Account](#)

[Reporting to CNCS](#)

**New** 


**Continuation/Renewal** 

**Amendment** 

**Concept Paper** 

Click on the links below to access common account functions.

**My Account** 

**Equal Opportunity Survey** 

**Org has users awaiting approval** 

**Financial Status Report**

**Progress Report**

**PPVA Report**



# NOFO SELECTION PROCESS



### eGRANTS MESSAGES

**Welcome Tamara**

Welcome to eGrants!

### VIEW MY GRANTS/APPLICATIONS

- [➤ View All](#)
- [➤ 27 Awarded](#)
- [➤ 189 Closed](#)
- [➤ 1 Concept Papers](#)
- [➤ 9 Grantee edit of application or report](#)
- [➤ 9 Subapplicant edit of application](#)
- [➤ 12 Under CNCS review](#)

### VIEW MY AMERICORPS PORTAL

- [➤ Portal Home](#)

### Creating an Application

- [New ➤](#)
- [Continuation/Renewal ➤](#)
- [Amendment ➤](#)
- [Concept Paper ➤](#)

### Managing My Account

Click on the links below to access common account functions.

- [My Account ➤](#)
- [Commission Input on National Applicants ➤](#)
- [Commission Competitive Subapplication Ranking ➤](#)

### Reporting to CNCS

- [Financial Report ➤](#)
- [Progress Report ➤](#)
- [Progress Report Supplement ➤](#)



Welcome Tamara

Start New Grant App

→ Select a NOFA

Legal Applicant Info

Georgia Commission for Service  
and Volunteerism  
60 Executive Park South NE  
Atlanta, GA 30329

Start New Grant App

cancel

next →

Select a NOFA

Please select a program area and press GO. Then select a NOFA from the list provided.

If you are starting your second or third year of your grant, or if you are a Senior Corps Grantee and are beginning the first year of a 3 year grant, use the "View all application/grants" link in the MY GRANTS/APPLICATIONS Section of the Home Page to create a Continuation or a Renewal.

Select a program area ... ▼

GO

cancel

next →



Welcome Tamara

Start New Grant App

→ Select a NOFA

Legal Applicant Info

Georgia Commission for Service  
and Volunteerism  
60 Executive Park South NE  
Atlanta, GA 30329

Start New Grant App

cancel

next →

Select a NOFA

Please select a program area and press GO. Then select a NOFA from the list provided.

If you are starting your second or third year of your grant, or if you are a Senior Corps Grantee and are beginning the first year of a 3 year grant, use the "View all application/grants" link in the MY GRANTS/APPLICATIONS Section of the Home Page to create a Continuation or a Renewal.

AmeriCorps

cancel

next →

11/17/2020, 8:39 AM, EST

home

my account

help

logout



AmeriCorps

eGrants

Welcome Kimberly

Start Continuation of Application #20AC221674

Start Continuation

cancel

next

Select a NOFA

Select a NOFA

Please select a NOFA and click on the "next" button. Please refer to the application guidelines and instructions to determine the correct NOFA for your project.

**FY 2021 AmeriCorps State and Territory Commission (New and Continuations)**

**Due Date: 01/06/2021**

**Summary:** This application is for new, re-competing, or continuation state commission applicants, including territories with commissions, applying for cost reimbursement grants.

Legal Applicant Info

Georgia Commission for Service  
and Volunteerism

60 Executive Park South NE  
Atlanta, GA 30329



Welcome Kimberly

Start New Grant App

cancel

Grantee Info

Ms. Kimberly Dupree  
Georgia Commission for  
Service and Volunteerism  
60 Executive Park South NE  
Atlanta, GA 30329-2296  
Status: Grantee

FY 2021 AmeriCorps State and Territory Commission (New and Continuations)

You have applications available for continuation or renewal (re-compete) under this NOFA. Please make sure you do not mean to continue or renew one of these existing grants before creating a new grant

GA State Commission - Competitive  
ID: 20AC221680  
Grant #: 18ACHGA001

Renew this grant

No, I am sure I want to apply for a new Grant

Start New Grant App

Initial Information

Legal Applicant Info

Georgia Commission for Service and Volunteerism  
60 Executive Park South NE  
Atlanta, GA 30329

Initial Information

Please provide the following initial information needed to create an application for this NOFA. If you are creating a sub application, select a state, then a prime application. Selecting of a Prime is optional. To create a prime application, leave the state and prime application fields empty, and select either Formula or Competitive.

NOFA information

Please review the NOFA you selected. If this is not the correct NOFA, hit cancel.

**NOFA:** FY 2021 AmeriCorps State and Territory Commission (New and Continuations)

**Due Date:** 01/06/2021

**Summary:** This application is for new, recompeting, or continuation state commission applicants, including territories with commissions, applying for cost reimbursement grants.

Which State are you applying to?

Choose a State ...

Select a Prime Application ID if this is to be a sub application (optional)

First select a State

Please select...  
 Competitive  Formula



## Legal Applicant Info

Georgia Commission for Service  
and Volunteerism  
60 Executive Park South NE  
Atlanta, GA 30329

## Initial Information

Please provide the following initial information needed to create an application for this NOFA. If you are creating a sub application, select a state, then a prime application. Selecting of a Prime is optional. To create a prime application, leave the state and prime application fields empty, and select either Formula or Competitive.

## NOFA information

Please review the NOFA you selected. If this is not the correct NOFA, hit cancel.

**NOFA:** FY 2021 AmeriCorps State and Territory Commission (New and Continuations)

**Due Date:** 01/06/2021

**Summary:** This application is for new, recompeting, or continuation state commission applicants, including territories with commissions, applying for cost reimbursement grants.

Which State are you applying to?

Georgia

Select a Prime Application ID if this is to be a sub application (optional)

21AC231906 - State Formula Program

Please select...

Competitive  Formula

## Start New

 Applicant Info

Application Info

Narratives

Logic Model

Performance Measures

Program Information

Documents

Budget Section 1

Budget Section 2

Budget Section 3

Funding/Demographics


Review

Authorize and Submit

## Grant Application Info

Grant Application ID:  
21AC232056Prime Application Info:  
21AC231906 (Georgia  
Commission for Service and  
Volunteerism)NOFA: FY 2021 AmeriCorps  
State and Territory Commission  
(New and Continuations)Type: New  
Status: Subapplicant Initial  
Entry

## Legal Applicant Info

Georgia Commission for Service  
and Volunteerism  
60 Executive Park South NE  
Atlanta, GA 30329Applicant Info 

Please enter/review your applicant and program information.

NOFA information  : [change to another NOFA](#)

Please review the NOFA you selected. If needed change your NOFA selection.

**NOFA:** FY 2021 AmeriCorps State and Territory Commission (New and Continuations)**Due Date:** 01/06/2021**Summary:** This application is for new, recompeting, or continuation state commission applicants, including territories with commissions, applying for cost reimbursement grants.Applicant information **Applicant/User:** Ms. Kimberly Dupree**Authorized Representative:**

## Program information:

The program information section defines the name and location of the program, the state in which the volunteers or members will be serving, and the name and contact information for the program director.

First-time applicants: Use the "create a new program" link to enter the information about your program. (Hint: Select a unique program name for each application that you submit.)

Continuation Requests and Re compete Applicants: Use the view/edit link to review the program name and address and update as necessary and confirm that the program name associated with this request matches the program name used last year.

Select a program:

Select an existing program ... [enter new](#) | [view/edit](#) 

\* Program Director:

Dupree, Kimberly [enter new](#) | [view/edit](#) 

Program Website URL:



- Start New
- Applicant Info
- Application Info
- Narratives
- Logic Model
- Performance Measures
- Program Information
- Documents
- Budget Section 1
- Budget Section 2
- Budget Section 3
- Funding/Demographics
- Review
- Authorize and Submit

Grant Application Info

Grant Application ID:  
21AC232077

Prime Application Info:  
21AC231906 (Georgia  
Commission for Service and  
Volunteerism)

NOFA: FY 2021 AmeriCorps  
State and Territory Commission  
(New and Continuations)

Type: New  
Status: Subapplicant Initial  
Entry

Legal Applicant Info

Georgia Commission for Service  
and Volunteerism  
60 Executive Park South NE  
Atlanta, GA 30329

Application Info

Please enter the requested application information below.

Areas affected by the program (Max. 1000 chars) List Cities, Counties or States ?

[Empty text area for listing affected areas]

Program Start and End Dates

Proposed Start Date: 08 / 01 / 2021 ?

Proposed End Date: 07 / 31 / 2022 ?

Other

The Application is Subject to Review by **State Executive Order 12372** Process.  
 Yes  No ?

If yes, please enter the date of the review. Month / Day / Year...

Applicant is Delinquent on any federal debt.  
 Yes  No ?

If yes, please explain. (Max. 240 chars)  
 [Empty text area for explanation]

State Application Identifier: [Empty text box] ?

Start New

Applicant Info

Application Info

Narratives

Logic Model

Performance Measures

Program Information

Documents

Budget Section 1

Budget Section 2

Budget Section 3

Funding/Demographics

Review

Authorize and Submit

Start Application Info

Applica

Please en

Areas af

Progra

## PART I - FACE SHEET

<b>APPLICATION FOR FEDERAL ASSISTANCE</b> <small>Modified Standard Form 424 (Rev.02/07 to conform to the Corporation's eGrants System)</small>		<b>1. TYPE OF SUBMISSION:</b> Application <input checked="" type="checkbox"/> Non-Construction														
<b>2a. DATE SUBMITTED TO CORPORATION FOR NATIONAL AND COMMUNITY SERVICE (CNCS):</b> [REDACTED]	<b>3. DATE RECEIVED BY STATE:</b> [REDACTED]	<b>STATE APPLICATION IDENTIFIER:</b> [REDACTED]														
<b>2b. APPLICATION ID:</b> [REDACTED]	<b>4. DATE RECEIVED BY FEDERAL AGENCY:</b> [REDACTED]	<b>FEDERAL IDENTIFIER:</b> [REDACTED]														
<b>5. APPLICATION INFORMATION</b>																
<b>LEGAL NAME:</b> [REDACTED] <b>UEI NUMBER:</b> [REDACTED] <b>DUNS NUMBER:</b> [REDACTED] <b>ADDRESS (give street address, city, state, zip code and county):</b> [REDACTED] County: [REDACTED]	<b>NAME AND CONTACT INFORMATION FOR PROJECT DIRECTOR OR OTHER PERSON TO BE CONTACTED ON MATTERS INVOLVING THIS APPLICATION (give area codes):</b> <b>NAME:</b> [REDACTED] <b>TELEPHONE NUMBER:</b> [REDACTED] <b>FAX NUMBER:</b> [REDACTED] <b>INTERNET E-MAIL ADDRESS:</b> [REDACTED]															
<b>6. EMPLOYER IDENTIFICATION NUMBER (EIN):</b> [REDACTED]	<b>7. TYPE OF APPLICANT:</b> 7a. Non-Profit 7b. Community-Based Organization															
<b>8. TYPE OF APPLICATION (Check appropriate box).</b> <input checked="" type="checkbox"/> NEW <input type="checkbox"/> NEW/PREVIOUS GRANTEE <input type="checkbox"/> CONTINUATION <input type="checkbox"/> AMENDMENT If Amendment, enter appropriate letter(s) in box(es): <input type="checkbox"/> <input type="checkbox"/> A. AUGMENTATION            B. BUDGET REVISION C. NO COST EXTENSION    D. OTHER (specify below):	<b>9. NAME OF FEDERAL AGENCY:</b> <b>Corporation for National and Community Service</b>															
<b>10a. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER:</b> 94.006 <b>10b. TITLE:</b> AmeriCorps State	<b>11.a. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:</b> Americorps [REDACTED] <b>11.b. CNCS PROGRAM INITIATIVE (IF ANY):</b>															
<b>12. AREAS AFFECTED BY PROJECT (List Cities, Counties, States, etc):</b> The areas affected by this program are DeKalb County, Rockdale County, Gwinnett County, Douglas County, and Hall County.	<b>13. PROPOSED PROJECT: START DATE: 09/01/20    END DATE: 07/31/21</b>															
<b>15. ESTIMATED FUNDING: Year #: 1</b> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 70%;">a. FEDERAL</td> <td style="text-align: right;">\$ 52,630.00</td> </tr> <tr> <td>b. APPLICANT</td> <td style="text-align: right;">\$ 72,570.00</td> </tr> <tr> <td>c. STATE</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>d. LOCAL</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>e. OTHER</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>f. PROGRAM INCOME</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>g. TOTAL</td> <td style="text-align: right;">\$ 125,200.00</td> </tr> </table>	a. FEDERAL	\$ 52,630.00	b. APPLICANT	\$ 72,570.00	c. STATE	\$ 0.00	d. LOCAL	\$ 0.00	e. OTHER	\$ 0.00	f. PROGRAM INCOME	\$ 0.00	g. TOTAL	\$ 125,200.00	<b>14. CONGRESSIONAL DISTRICT OF:</b> a.Applicant <input type="checkbox"/> GA 13    b.Program <input type="checkbox"/> GA 13	
a. FEDERAL	\$ 52,630.00															
b. APPLICANT	\$ 72,570.00															
c. STATE	\$ 0.00															
d. LOCAL	\$ 0.00															
e. OTHER	\$ 0.00															
f. PROGRAM INCOME	\$ 0.00															
g. TOTAL	\$ 125,200.00															
<b>16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?</b> <input type="checkbox"/> YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON: DATE: <input checked="" type="checkbox"/> NO. PROGRAM IS NOT COVERED BY E.O. 12372																
<b>17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?</b> <input type="checkbox"/> YES if "Yes," attach an explanation. <input checked="" type="checkbox"/> NO																
<b>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.</b>																
<b>a. TYPED NAME OF AUTHORIZED REPRESENTATIVE:</b> [REDACTED]	<b>b. TITLE:</b> [REDACTED]	<b>c. TELEPHONE NUMBER:</b> [REDACTED]														
<b>d. SIGNATURE OF AUTHORIZED REPRESENTATIVE:</b> [REDACTED]		<b>e. DATE SIGNED:</b> 06/10/20														

# Application Components

The completed application will consist of the following components, described in more detail below:

A. Standard Form 424

B. Executive Summary

C. Narratives:

- 1. Program Design
- 2. Organizational Capability
- 3. Cost-Effectiveness and Budget Adequacy

D. Standard Form 424A Budget

E. Authorization, Assurances, and Certifications

A. Standard Form 424 You can find the Standard Form (SF) 424 and instructions here:

[http://www.grants.gov/agencies/forms\\_instruction\\_information.jsp](http://www.grants.gov/agencies/forms_instruction_information.jsp)

Questions?



Thank you  
everyone!

**Kimberly DuPree**

**Financial Grants Administrator**

Georgia Commission for Service and  
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The logo features a stylized orange and pink shape with a green leaf-like element above it, followed by the word "Georgia" in a serif font with a registered trademark symbol. To the right, the words "Department of" are in a smaller sans-serif font, followed by a green line-art silhouette of a city skyline. Below this, the words "Community Affairs" are written in a large, bold, brown sans-serif font.

Georgia<sup>®</sup> Department of  
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