Form Approved – OMB No. 0563-XXXX (Expiration Date XX/XX/XXXX)

This form is available electronically.

RMA-302 (proposal 1)

U. S. DEPARTMENT OF AGRICULTURE

Risk Management Agency

STATEMENT OF WORK

NOTE:

The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the following information is under section 522(d)(3)(F) of the Federal Crop Insurance Act (Act) (7 U.S.C. 1522(d)(3)(F). The information will be used to monitor cooperative and partnership agreement holders in their performance of tasks specified under the terms of the agreements. The information will also be used by RMA to report educational activity under the Government Performance Results Act. Furnishing the requested information is mandatory. Failure to furnish the requested information will result in the suspension of the project. This information may be provided to other agencies, IRS, Department of Justice, or other State and Federal law enforcement agencies, and in response to a court magistrate or administrative tribunal. The provisions of criminal and civil fraud statutes, including 18 USC 286, 287, 371, 641, 651, 1001; 15 USC 714m; and 31 USC 3729, may be applicable to the information provided.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0563-XXXX. The time required to complete this information collection is estimated to everage 5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed and, and completing and reviewing the collection of information.

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Project Title:				
1. Task/Recipient Responsibilities	2. Responsible Entity	3. Date (Completion Date)	4. RMA Role (The role that RMA will have in assisting with each task/subtask)	5. Deliverables (Result of the task completed)
Task A. (Description of task)				
(1) (Description of subtask and responsibilities associated with the task/subtask)				
(2) (Continue with as many subtasks as necessary)				
Task B. (Continue with as many tasks as necessary)				

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Item Number	Instructions
1A & 1B	Describe the task and awardee responsibilities.
1A(1) & 1A(2)	Describe the subtask and the responsibilities.
2	Enter if the work will be performed by the applicant, a contractor, or project partner, etc.
3	Enter completion date. In lieu of placing a number in this column, Applicant may use descriptive terms such as continuous, monthly, quarterly, etc., when appropriate.
4	Most tasks should have a role for RMA (although RMA does not need to be involved in every task). See RFA for more specifics on RMA's activities.
5	Enter a description of the measurable, tangible, verifiable outcome, result, or item that should be produced upon the completion of the task or substask.
	Continue to insert new rows for additional tasks and subtasks.