

**Broadband Technology Opportunities Program  
Federal Grant Application – Public Computer Centers Program (Track 2)**

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**OMB Control No. 0660-XXXX**  
**Expiration Date: XX-XX-XXXX**

**NOTE:** This application contains collection of information requirements subject to the Paperwork Reduction Act (PRA). Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the PRA unless that collection of information displays a currently valid OMB control number. The estimated response time for this application is 52 hours. The response time includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this estimate or any other aspects of this collection of information, including suggestions for reducing the length of this questionnaire, to the National Telecommunications and Information Administration, Attn: Milton Brown, [mbrown@doc.gov](mailto:mbrown@doc.gov), (202) 482-1852.

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**A. General Application Information**

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<b>1. Applicant Information</b>	
<b>1-A. Name, Address, and Federal ID for Applicant</b>	
i. Legal Name:	ii. Employer/Taxpayer Identification Number (EIN/TIN):
Street 1: _____ Street 2: _____ City: _____ County: _____ State: _____ Province: _____ Country: _____ Zip/Postal Code: _____	
<b>1-B. Name and Contact Information of Person to be Contacted on Matters Involving this Application:</b>	
Prefix: _____ *First Name: _____ Middle Name: _____ *Last Name: _____ Suffix: _____ Title: _____	Telephone Number: _____ Fax Number: _____ Email: _____ Other (Specify): _____
<b>1-C. Other Required Identification Numbers</b>	
i. Organizational DUNS: _____	ii. CCR: _____
iii. Funding Opportunity Number: _____	iv. Catalog of Federal Domestic Assistance Number: _____ CFDA Title: _____
<b>1-D. Organization Classification</b>	
Please classify your organization. (Note: If there are multiple sponsoring organizations, designate the lead applicant that would enter into a grant agreement with the Agency and assumes operational and financial responsibility should an award be made).	
<p><b>Local, State, or Other Government Entity</b></p> <ul style="list-style-type: none"> <li>• State or State Agency</li> <li>• Political subdivision of a State, including Local or County Government</li> <li>• District of Columbia</li> <li>• Territory or Possession of the United States</li> <li>• Indian Tribe</li> </ul> <p><b>Not for Profit Entity</b></p> <ul style="list-style-type: none"> <li>• Non-Profit Corporation</li> <li>• Non-Profit Foundation</li> </ul>	

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- Non-Profit Institution
- Non-Profit Association
- For Profit Corporation**
- For-Profit Corporation, LLC
- Socially and economically disadvantaged small business concern (SDB) as defined by section 8(a) of the Small Business Act 15 USC 637
- Other**
- Cooperative or Mutual
- Native Hawaiian organization
- Please identify any others: \_\_\_\_\_

**1-E. Applicant Federal Debt Delinquency Explanation**

Is the **Applicant** Delinquent On Any Federal Debt?  
 Yes       No  
 (If “Yes”, provide explanation.) \_\_\_\_\_

**1-F. Congressional Districts of:**

- a. Applicant HQ
- b. Project Service Area

**2. Project Description**

Provide three or four sentences that concisely describe the proposed project. Your answer will be published on recovery.gov and broadbandusa.gov to illustrate the types of proposals received.  
 [Limit 500 characters]

**3. Project Type**

Classify the particular project type for which you are seeking federal funding.

• Broadband Infrastructure	Project ID: _____ (auto generated)
• Public Computer Centers	Project ID: _____ (auto generated)
• Sustainable Broadband Adoption	Project ID: _____ (auto generated)

**4. Application ID for Multiple Submissions for Identified Service Areas**

Please identify any other applications that you have submitted to BIP or BTOP

Project Type: \_\_\_\_\_  
 ID Number: \_\_\_\_\_

**5. Estimated Funding (\$):**

*a. Federal		
*b. Applicant		

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*c. State		
*d. Local		
*e. Other		
*f. Program Income		
*g. TOTAL		

**B. Eligibility Factors**

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6. **Eligibility Factors.** As a prerequisite to a full review against the evaluation criteria, each application must satisfy a number of Eligibility Factors. These verify an applicant’s basic compliance with mandatory program requirements. **Failure to comply with all Eligibility Factors WILL RESULT IN IMMEDIATE REJECTION OF YOUR APPLICATION.** Please see the Grant Guidance for a detailed explanation of how each Eligibility Factor will be verified.

- This application satisfies all of the Eligibility Factors listed below:
  - Yes
  - No
  - The application must be completed fully, and all required supplemental documentation must be attached.
  - Applicants must commit to substantially completing their Project (as defined in the NOFA) within two years of the award date, and completing the Project within three years of the award date.
  - Applicants must credibly demonstrate that their Project advances at least one of the five statutory purposes for BTOP.
  - Applicant is providing matching funds of at least 20 percent towards to the total eligible project costs **or** is requesting a waiver of the matching requirement
    - Yes, Providing at Least 20% Match
    - No, Requesting Waiver
  - Applicants must demonstrate that but for Federal funding they would not have been able to complete their project during the grant period.
  - Applicants must demonstrate that the proposed project is technically feasible.
  - The budget for the project must be reasonable and all costs must be eligible.

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## **C. Executive Summary**

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Direction for Written Responses: **Page limits are designated for all requested written responses. Per instructions in the NOFA, please use 12 point font with one-inch margins.**

7. **Executive Summary of Overall Proposal:** Please provide an Executive Summary of the proposed Project. The Executive Summary should be a brief description of the Project, and address the following topics. [Two Page Limit]
- a. A statement of the problem or need your project addresses with regard to improving broadband service adoption rates
  - b. Your overall approach to addressing the need, and [for Sustainable Adoption projects] how your approach is innovative
  - c. Area(s) to be served; population of the target area(s), including demographic information; and [for Public Computer Centers] the estimated number of potential users of your public computer center(s) or [for Sustainable Adoption projects] the estimated number of potential broadband subscribers your project will reach
  - d. Qualifications of the applicant that demonstrate the ability to implement the project and achieve its intended results
  - e. Jobs to be saved or created
  - f. Overall cost of the proposed project

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**D. Project Purpose**

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**Project Purpose: Recovery Act & BTOP Objectives**

8. **Project Purpose:** Referring to Application Guidance for this section, in a comprehensive overview of your Project, please clearly and concisely describe the following. Please provide specific data and relevant analysis to support your claims. [Two Page Limit]

- The significance of the problem to be addressed
- The degree to which the proposed solution effectively addresses the problem and could be replicated by other organizations
- The degree to which both the problem and proposed solution advance one or more of the five BTOP statutory purposes

• Provide broadband access to consumers in unserved areas
• Provide improved broadband access to consumers in underserved areas
• Provide broadband education, awareness, training, access, equipment, and support to community anchor institutions, job-creating strategic facilities, and vulnerable populations
• Improve access to and use of broadband by public safety agencies
• Stimulate demand for broadband

- If your Project incorporates more than one BTOP program category (Broadband Infrastructure, Public Computer Centers, and Sustainable Broadband Adoption) or statutory purpose (listed above), please describe how this Project will reinforce your other program objectives.

9. **Recovery Act and Other Governmental Collaboration.** Describe how your project will leverage Recovery Act or other federal or state developmental programs. Please identify the programs themselves and the dollar value associated with each. In addition, describe how the collaboration can lead to greater project efficiencies. [One Page Limit]

10. **Enhanced Services for Health Care Delivery, Education, and Children.** If applicable, describe how your project will enhance broadband service for health care delivery, education, and children as contemplated by the Recovery Act. Projects would need to demonstrate that they go beyond providing access to broadband to include more robust educational, health care, or related broadband service delivery. [One Page Limit]

11. **Small and Disadvantaged Business Involvement.** If applicable, indicate whether you have established agreements in principle to partner with socially and economically disadvantaged small businesses (SDB), as defined by Section 8(a) of the Small Business Act, 15 U.S.C. § 637. Please list the company, a contact person, and briefly describe the partnership purpose. [Limit ½ Page]

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**E. Project Benefits – Expanding Broadband Public Computer Center Capacity**

**Public Computer Center Capacity, Including Areas and Populations Served**

12. **Public Availability.** Will your facility be available to all members of the general public, or a specific population only? Please explain. If you charge membership dues or other fees for the population you are proposing to serve, please explain how these charges are consistent with the public interest. [One Page Limit]
13. **Restrictions on Center Use.** If the use of your center(s) is restricted to certain purposes, please identify those and explain the reasons for the restrictions. [1/2 Page Limit]
14. **Accessibility.** Please describe the ways in which your center(s) will be accessible and welcoming to people with disabilities. [1 Page Limit]
15. **Center Locations.** What is/are the location(s) of your new/expanded Public Computer Center(s)?

Public Computer Center	Address Line 1	Address Line 2	City	State	Zip
St. Charles Computer Center	123 Broad St.		New Orleans	LA	70119

16. **Center Capacity.** Please complete the following key metrics chart, referring to sample and Guidelines:

Computer Center Name / Type	Current Hours Open to Public Per 120-hour Business Week	Current Hours Open to Public Per 48-hour Weekend	Proposed Hours Open to Public Per 120-hour Business Week	Proposed Hours Open to Public Per 48-hour Weekend	Current # of Broadband Workstations	Proposed # of Broadband Workstations	Current Facility Broadband Connection Speed (Mbps)	Proposed Facility Broadband Connection Speed (Mbps)
M.L. King Community Center/City Facility	50	8			20	50	.768	10

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17. **Size and Scope of Target Audience.** For the computer center locations you described above, please complete the following table indicating the size and scope of your target population, and targets for persons served in each center, referring to the sample.

Computer Center Name	Estimated # of Total Persons in your Service Area (or Specific Population Sub-Group)	Service Area Identifier (Municipality, County, Census Tract, or other area designation)	# of Persons served per 120-hour business week (current)	# of Persons served per 48-hour weekend (current)	# of Persons served per 120-hour business week (proposed target)	# of Persons served per 48-hour weekend (proposed target)
Little Falls Public Library	50,000	Grant County	150	45	500	200

18. **Population Demographics.** Indicate the demographic category or categories your program will serve by completing the questions below. [One Page Limit]

- Age distribution [Checkboxes with Census-level age categories]
- Ethnicity or ethnicities [Checkboxes with Census-level ethnicity categories]
- Gender [Checkbox Male / Female]
- Median Household Income [Checkboxes with Census data]
- Educational levels [Box select: None, elementary, middle, secondary, college, masters, doctorate/post-doctorate]
- Disabilities status [physically disability, other disabilities]
- Unemployment rate
- Speakers of English as a second language, or non-English-speaking status

19. **Outreach.** Please describe your outreach strategy to ensure usage of services and equipment provided in your program proposal, and why you have chosen this strategy. [One Page Limit]

**Public Computer Center Capacity: Training and Educational Programs**

20. **Peripherals and Equipment.** What specific types of personal computing peripherals and/or broadband equipment do you intend to provide for each workstation? [Limit ½ Page]

21. **Workstation Software.** What type of software do you intend to provide for each workstation? [Limit ½ page]

22. **Training and Education Programs.** Please describe your primary training and educational programs, including curricula, student certification programs, and number of instructors and their qualifications. Explain how these relate to demonstrated needs within your community, and detail any lessons learned from prior programs. [Two Page Limit]



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## **F. Project Viability**

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### **Technology Viability**

23. **Technology Strategy. For Sustainable Adoption projects:** Explain the mechanics and operational details of your project and how your approach is an effective and appropriate means of creating sustainable adoption in your target population. Explain how your innovative solution(s) would be feasible in other situations. [Two [Two Page Limit] **For Public Computer Center projects:** Please describe the overall technology plan you intend to deploy in your program. If appropriate, please include engineering certifications for broadband network WAN / LAN build-outs, what primary types of network equipment and technology you plan to use, and how you will ensure a reliable, secure, and user-friendly system for the public users of your broadband access facilities. [Two Page Limit]

### **Organizational Capability**

24. **Management Team Resumes.** Provide resumes and/or biographical summaries for the members of your senior management team and project team, emphasizing skills and experience relevant to the proposed program. Please refer to specific projects and outcomes that demonstrate the team's ability to execute this project based on past experience, and to manage federal funds effectively. [Each resume can be up to one page; limit biographical summaries to 1/2 page.]
25. **Organizational Readiness.** Please describe key factors that demonstrate your organization will be prepared to implement, operate, and sustain a public computer center program using federal funds. Include past experience in managing projects of comparable size and complexity. [One Page Limit]
26. **Organizational Chart.** Please attach a chart describing how the project team relates to the overall structure of your organization.

### **Community Involvement**

27. **Key Partners.** Provide a list of key partners (from the public, private and non-profit sectors), including community anchor institutions and public safety entities, community organizations, vendors or contributors of in-kind or cash support, and/or other resources which are integral to the success of this project. For each, include the name and title of a contact person, the organization's name, and its role in or contribution to the project. Support from partners may include funding, educational or training services, technical advice or support, outreach, facilities, or other products or services.
28. **Partnering with Disadvantaged Businesses:** If applicable, indicate whether you have established agreements in principle to partner with socially and economically disadvantaged small businesses (SDB), as

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defined by Section 8(a) of the Small Business Act, 15 U.S.C. § 637. Please list the company, a contact person, and briefly describe the partnership purpose. [Limit ½ Page]

**Ability to Start Promptly & Timeline**

29. **Project Timeline and Challenges.** Please provide a detailed implementation plan on a quarterly basis that shows the phases of the project and establishes key milestones. Include such activities as construction, staffing and hiring, resource development, staff training, equipment purchases, and installation. Also, include a description of key challenges or risks to the timely completion of the project, including any mitigation plans to address the risks. [Two Page Limit]
30. **Licenses and Regulatory Approvals.** If applicable, please list any local, state, or federal licenses and regulatory approvals required to complete your project, and indicate the status of each.
31. **Legal Opinion.** Please attach a legal opinion that addresses the Applicant's ability to enter into the award agreement and briefly describe any relevant pending litigation matters.

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## G. Project Budget & Sustainability

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### **Project Profile: Budget and Budget Narrative**

32. **Budget Narrative.** Please provide a narrative that explains the project budget (as proposed on SF-424 A and/or SF-424 C) and spending plan (timeline) in sufficient detail for reviewers to determine whether the expenditures are necessary and appropriate to the solution you are proposing. [Two Page Limit]
33. **Budget Reasonableness.** Concisely and convincingly explain why the costs you propose are reasonable to carry out your project, are eligible, and the allocation of funds will be sufficient to complete the tasks outlined in the project plan. Provide any relevant data and summaries of your analysis. [One Page Limit]
34. **Demonstration of Financial Need.** Provide documentation that the project would not have been implemented during the grant period without federal grant assistance. This documentation may consist of, but is not limited to, such items as a denial of funding from a public or private lending institution, denial of a funding request from a foundation or other organization, or a current fiscal year budget that shows the lack of available revenue options for funding the project.
35. **Historical Financial Statements.** Provide detailed organization financial statements for the last two years: a) Income Statement; b) Balance Sheet; and c) Statement of Cash Flows. If your organization was established less than two years ago, provide all available information.

### **Project Profile: Long Term Sustainability**

36. **Sustainability. For Sustainable Adoption programs:** Please indicate whether and how the project will be sustained beyond the funding period. Also discuss how the projected increases in broadband adoption rates will be sustained beyond the grant period. **For Public Computer Center programs:** Explain how your project will enable your centers to sustain themselves, providing ongoing services and maintaining community support beyond the scope of this grant. [One Page Limit]

### **Project Profile: Outside Leverage**

37. **Matching Funds.** Please describe the matching funds (both cash and in-kind) you plan to devote to this project and document their source(s), including the percentage of your match and whether the match is all cash. Attach letters of commitment from proposed sources. **If you have requested a waiver of the matching requirement, provide a letter attachment clearly defining your need. An applicant applying for a waiver should submit complete financial documentation, including its assets, liabilities, operating expenses and revenues, and any other documents that would demonstrate financial need, such as denial of funding from a public or private lending institution.**
38. **Unjust Enrichment:** Please state whether this project is receiving, or if you have applied for, any Federal support for non-recurring costs in the area for which you are seeking an award. If so, please state how much and from which federal program.

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39. **Disclosure of Federal and/or State Funding Sources.** Please disclose the source and amount of other federal or state funding received or requested for activities or projects to which this project relates. Please specify all Universal Service Fund (USF) funding delineated by specific program.
40. **Buy American.** Are you seeking a waiver of the Buy American provision?
- a. YES (please provide your legal justification for the waiver)
  - b. NO

## **H. DOC Environmental Checklist**

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41. **SECTION 1-** To be completed for those projects historically shown not to create significant environmental impacts to the human or natural environment. Any answer of “No” or “Not Applicable” may require additional documentation or review.
- a. Is the proposed action solely a procurement action for materials intended to be installed, stored or operated in an existing building or structure?
- Yes
  - No
  - Not Applicable
- b. If the proposed action involves procurement of electronic equipment, will the equipment be disposed of in an environmentally sound manner at the end of its useful life?
- Yes
  - No
  - Not Applicable
- c. Does the proposed action involve only minor interior renovations to a structure, facility, or installation?
- Yes
  - No
  - Not Applicable
- d. Is the proposed action solely for the production and/or distribution of informational materials, brochures, or newsletters?
- Yes

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No

Not Applicable

e. Does the proposed action consist solely of training, teaching, or meeting facilitation at an existing facility or structure?

Yes

No

Not Applicable

## **I. Compliance and Certification**

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### **42. Certifications and Signature**

(i) I certify that I am authorized to submit this grant application on behalf of the eligible entity(ies) listed on this application, that I have examined this application, that all of the information and responses in this application, including certifications, and forms submitted, all of which are part of this grant application, are material representations of fact and true and correct to the best of my knowledge, that the entity(ies) that is requesting grant funding pursuant to this application and any subgrantees and subcontractors will comply with the terms, conditions, purposes, and federal requirements of the grant program; that no kickbacks were paid to anyone; and that a false, fictitious, or fraudulent statements or **claims** on this application are grounds for denial or termination of a grant award, and/or possible punishment by a fine or imprisonment as provided in 18 U.S.C. § 1001 and civil violations of the False Claims Act.

(ii) I certify that the entity(ies) I represent have and will comply with all applicable federal, state, and local laws, rules, regulations, ordinances, codes, orders and programmatic rules and requirements relating to the project. I acknowledge that failure to do so may result in rejection or deobligation of the grant or loan award. I acknowledge that failure to comply with all federal and program rules could result in civil or criminal prosecution by the appropriate law enforcement authorities.

(iii) I certify that the entity(ies) I represent has and will comply with all applicable administrative and federal statutory, regulatory, and policy requirements set forth in the Department of Commerce Pre-Award Notification Requirements for Grants and Cooperative Agreements (“DOC Pre-Award Notification”), published in the Federal Register on February 11, 2008 (73 FR 7696), as amended; DOC Financial Assistance Standard Terms and Conditions (Mar. 8, 2009), the Department of Commerce American Recovery and Reinvestment Act Award Terms (Apr. 9, 2009); and any Special Award Terms and Conditions that are included by the Grants Officer in the award.

(iv) If requesting BTOP funding, I certify that the entity(ies) I represent has secured access to pay the 20% of total project cost or has petitioned the Assistant Secretary of NTIA for a waiver of the matching requirement or received a waiver.

**Signature of authorized person** \_\_\_\_\_ **Date** \_\_\_\_\_

**Print name of authorized person** \_\_\_\_\_

**Title or position** \_\_\_\_\_

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**Other Federal Forms and Certification Requirements**

- 1.) SF-424A, Budget Information—Non-Construction Programs
- 2.) SF-424B, Assurances—Non-Construction Programs
- 3.) SF-424C, Budget Information—Construction Programs
- 4.) SF-424D Assurances—Construction Programs
- 5.) CD-346, Applicant for Funding Assistance
- 6.) CD-511, Certification Regarding Lobbying
- 7.) CD-512, Certification Regarding Lobbying—Lower-Tier Covered Transactions
- 8.) SF-LLL, Disclosure of Lobbying Activities
- 9.) Legal Opinion