



**AMERICORPS VISTA**  
**PROJECT APPLICATION INSTRUCTIONS**  
**PART VI.2 SUPPORT GRANT VISTA PROJECT BUDGET**

## **Introduction**

This document, Part VI.2, Support Grant VISTA Project Budget, provides detailed instructions for completing Budget Section 1 and Budget Section 2 in an already started eGrants application. The following are instructions for completing a budget for a Support Grant VISTA Project.

NOTE: Applicants to be a VISTA sponsoring organization must complete an application, including a budget. The application is submitted using eGrants, the Corporation's integrated, secure, web-based system for applications. Organizations must have an eGrants account to submit the Application in eGrants. The account is free and can be created online at <http://www.nationalservice.gov/egrants/index.asp>. To complete the application, applicants use the VISTA Project Application Instructions provided by the Corporation State Office. Contact information for State Offices is available at <http://www.nationalservice.gov/about/contact/index.asp>.

To complete the budget of the application, applicants use this specific budget guidance to supplement the VISTA Project Application Instructions.

## **About Support Grant VISTA Projects**

A Support Grant VISTA project is a project in which:

- The Corporation awards a certain number of VISTA positions to a sponsor and provides benefits directly to the VISTA;
- The sponsor provides local operating and logistics costs;
- The sponsor requests grant funds to provide:
  - Supervision for the VISTAs, leaders, and summer associates;
  - Project staff travel expenses incurred for subrecipient monitoring;
  - Service-related transportation expenses of VISTAs, leaders, and summer associates; AND/OR
  - Costs for implementing the Pre-Service Orientation (PSO) for VISTAs when it is in the interests of the VISTA program

To be eligible to receive a grant for supervision, for service-related transportation and/or for training costs, you must demonstrate that:

- The expenditure is necessary and appropriate to ensure that a VISTA, leader, or summer associate has available support necessary to carry out the purpose of the VISTA program and to perform effectively the service to which the VISTA, leader, or summer associate is assigned; and
- The need for support cannot be met within your organization's own structure and resources.

While there is no specific match requirement, applicant organizations should indicate the type and level of resources they will provide to support the project. Examples of resources provided by applicant organizations include personnel costs, equipment, and supplies. Please include these resources whether they are financial contributions or in-kind contributions.

## **Application Process**

Log in to eGrants. In eGrants, you will need to:

- Select “View All.” A screen will appear that lists all the applications that are in “Grantee Initial Entry” status that are associated with your account.
- Find your application using the Application ID. It will be listed as “VISTA State” or “VISTA Headquarters” under the Programs column.
- Select “Edit” next to your listing.
- In the Application Info section, choose the correct Program Type by selecting “Support Grant” from the Program Type dropdown menu. Check the box next to Cost Share as appropriate. Consult your Corporation State Office if you are uncertain.
- Once you select the program type and cost share type and click save, the Budget Sections 1 and 2 will be created and added to the application.

The Budget includes two sections: Budget Section 1 deals with volunteer support expenses incurred by the project.

Budget Section 2 deals with volunteer expenses incurred by members, including living allowance and end-of-service award. Applicants for Support Grant VISTA Projects are required to complete both sections.

As you prepare your budget:

- Your detailed budget narrative must provide a full explanation of the proposed costs including their purpose and the basis of your calculation.
- For the Personnel and Travel line items, and wherever else it may increase clarity, present your calculations in the form of an equation, e.g., Two (2) VISTAs traveling @ \$25/trip for 2 trips = \$50; or, Salary \$35,000 @ 30% devoted to program = \$10,500.
- Do not include fractional amounts (cents).
- Your budget entries should reflect a twelve-month project period.

Please refer to the relevant OMB Circulars on allowable costs for further guidance. The OMB circulars are online at [www.whitehouse.gov/OMB/circulars](http://www.whitehouse.gov/OMB/circulars).

- A-21 - Cost Principles for Educational Institutions, 2 CFR 220
- A-87 - Cost Principles for State, Local, and Indian Tribal Governments, 2 CFR 225
- A-122 - Cost Principles for Non Profit Organizations, 2 CFR 230

Programs must comply with all applicable federal laws, regulations, and OMB circulars for grant management, allowable costs, and audits, including providing audits to the A-133 clearinghouse if they expend over \$500,000 in federal funds, as required in OMB Circular A-133.

### **Budget Section 1. Volunteer Support Expenses (Required)**

You are required to complete this section for financial funds that you are requesting from the Corporation. You may also wish to add line items to document the resources that your organization will provide to support the VISTA project (personnel, equipment, in-kind donations, etc).

Enter information into the “CNCS Share” box for resources you are requesting from the Corporation. Enter information into the “Grantee Share” box for resources your organization is contributing. Do not enter any information into the “Member Support” box.

### **Project Personnel Expenses**

*Complete this line item to apply for grant funds for the salary costs of supervising VISTAs, Leaders and/or Summer Associates assigned to your project.*

Supervision support funds can be directed to more than one staff member of your organization or a subrecipient, but all listed personnel must directly supervise VISTAs, Leaders and/or Summer Associates in: recruitment and selection; preparation of individual assignment descriptions; orientation to the project; day-to-day oversight; preparation of service verification documents; and/or preparation of project progress reports. Supervision support funds may not be used to pay for preparation of Concept Paper, Project Application or renewal/continuation applications.

Information about each supervisor should be listed along with a position title; salary amount; and the percentage of time devoted to VISTA supervision.

Click “add a new budget item” and complete the requested information to apply for supervision support funds:

- For “Position/Title” enter the current or intended title of the individual(s) devoted to supervision.
- For “Qty” enter the number of individuals who match this exact title, salary and who will spend the same percentage of time devoted to supervision. You should complete new line items for individuals with different characteristics.
- For “Annual Salary” enter the annual salary for one individual.
- For “% Time” enter the percentage of time that each person listed above will spend on supervision. The percent listed should not exceed the percentage of actual time devoted to supervision by each individual.
- Click into the box called “CNCS Share.” Refer to the “Total Amount” calculated by eGrants and enter the portion of the amount that you are requesting from the Corporation. For example, if the “Total Amount” field shows \$10,000 and you wish to request that the Corporation will fund half of these supervision costs, then you would enter \$5000 in the “CNCS Share” box.
- For “Grantee Share” refer to the “Total Amount” calculated by eGrants and enter the portion of the amount that your organization will provide. The amounts entered in “CNCS Share” and “Grantee Share” must add up to equal the “Total Amount.”

Note: Organizations with multiple supervisors with different salaries, titles or other differing characteristics should create separate line items.

### **Personnel Fringe Benefits**

*Complete this line item to apply for grant funds for the costs of personnel benefits for the individuals who will be supervising VISTAs, Leaders and/or Summer Associates.*

Fringe benefits are allowable VISTA support grant line items only for individuals listed above in “Project Personnel Expenses” and who are receiving salary support from the Corporation. Allowable benefits include FICA, Health Insurance, Retirement, and Life Insurance. Benefit items should only include the items that are paid by the organization to other staff.

The percentage of benefits paid must be less than or equal to the percentage of salary support being requested. To determine the maximum percentage of salary support that can be requested, refer to the relevant “Project Personnel Expenses” line item pop-up window and divide “CNCS Share” by “Total Amount.” This percent can be multiplied by each fringe benefit’s total cost to determine the maximum amount that can be requested from CNCS.

Information about each fringe benefit request should be listed along with a description; total fringe benefit annual amount; the percentage of time devoted to VISTA supervision; and the percentage of the overall fringe benefit costs being requested from CNCS.

Click “add a new budget item” and complete the requested information to apply for fringe benefit support funds.

Example: An individual will spend 20% of their time devoted to VISTA supervision and the applicant organization is requesting grant funds from the Corporation for 50% of the costs of salary support for that time. In total, this applicant is requesting VISTA support grant funds to pay for 10% ( $0.20 * 0.50 = 0.10$ ) of the annual supervisor salary. Thus, they may only request CNCS Share to cover up to 10% of total annual fringe benefits:

**Item:** Health Insurance for Supervisor 1

**Description of personnel fringe benefits:**

- Annual Health Insurance costs for Supervisor 1 are \$4000.
- 20% of Supervisor 1’s time will be spent supervising VISTAs.
- We are requesting that CNCS provide grant funds to cover 50% of the costs for Supervisor 1’s annual health insurance costs of this time, or 10% ( $20% * 50% = 10%$ ).

**Total Amount:**  $= (\$ \text{Total annual fringe costs}) * (\% \text{ of time supervising VISTAs})$   
 $= \$4000 * 20\% = \$800$

**CNCS Share:**  $= (\$ \text{Total amount}) * (\% \text{ requested from CNCS})$   
 $= \$800 * 50\% = \$400$

**Grantee Share:**  $= (\$ \text{Total Amount}) - (\$ \text{CNCS Share})$   
 $= \$800 - \$400 = \$400$

**Local Travel**

*Complete this line item to apply for grant funds for the costs of travel incurred for local subrecipient monitoring by the individuals who will be supervising VISTAs, Leaders and/or Summer Associates.*

Local travel support funds may be requested by your organization for full or partial funding to cover travel expenses incurred for local subrecipient monitoring, but only in those cases where such support is necessary for compliance and for the effective functioning of the VISTAs, leaders, or summer associates on the project and where such support for project staff travel cannot be met within the your organization's own structure and resources.

Grants for project staff travel are in the amount of the costs of public transportation or, where public transportation is not adequate, in the amount of the Privately Owned Vehicle (POV) Mileage Reimbursement Rate. The POV mileage reimbursement rate should be at least the rate applied to all travel within your organization and no greater than the federal mileage rate. If there is no standard rate within your organization, then the federal mileage rate should be applied. (Current federal mileage rates can be found at: <http://www.gsa.gov/mileage> )

Your organization will be responsible for any expenses incurred for such travel over the agreed amount.

Click "add a new budget item" and complete the requested information to apply for local travel support funds for project staff:

For "Purpose" enter information about the purpose of local travel, including position title of project staff. (e.g. Project Supervisor travel to monitor local sites A, B and C.)

For "Calculation" enter a description in the form of an equation. (e.g., 1 Supervisor traveling @ \$25/trip for 2 trips = \$50. Include costs for transportation and other related expenses, such as bus passes to local sites, mileage rates, etc.)

Enter information into the "CNCS Share" box for resources you are requesting from the Corporation. Enter information into the "Grantee Share" box for resources your organization is contributing. Do not enter any information into the "Member Support" box.

### **Long Distance Travel**

*Complete this line item to apply for grant funds for the costs of travel incurred for long distance subrecipient monitoring by the individuals who will be supervising VISTAs, Leaders and/or Summer Associates.*

Long distance travel support funds may be requested by your organization for full or partial funding to cover travel expenses incurred for subrecipient monitoring, but only in those cases where such support is necessary for compliance and for the effective functioning of the VISTAs, leaders, or summer associates on the project and where such support for project staff travel cannot be met within your organization's own structure and resources.

Grants for project staff travel are in the amount of the costs of public transportation or, where public transportation is not adequate, in the amount of the Privately Owned Vehicle (POV) Mileage Reimbursement Rates. The POV mileage reimbursement rate should be at least the rate applied to all travel within your organization and no greater than the federal mileage rate. If there is no standard rate within your organization, then the federal mileage rate should be applied. (Current federal mileage rates can be found at: <http://www.gsa.gov/mileage> )

Your organization will be responsible for any expenses incurred for such travel over the agreed amount.

Click “add a new budget item” and complete the requested information to apply for project staff travel support funds:

For “Purpose” enter information about the purpose of project staff travel, including position title. . (e.g. Project Supervisor travel to monitor sites A and B)

For “Calculation” enter a description in the form of an equation. (e.g., 1 Supervisor traveling @ \$250/trip for 2 trips = \$500. Include costs for transportation and other related expenses, such as bus passes, mileage rates, hotel expenses, etc.)

Enter information into the “CNCS Share” box for resources you are requesting from the Corporation. Enter information into the “Grantee Share” box for resources your organization is contributing. Do not enter any information into the “Member Support” box.

### **Equipment/Supplies/Contractual Services**

Equipment, supplies and contractual services are not allowable costs for VISTA Support Grants. You may wish to add line items to document the resources that your organization will provide to support the VISTA project.

### **Other Volunteer Support Costs**

The Communications, Printing and Logistics line items are not allowable costs for VISTA Support Grants. You may wish to add line items to document the resources that your organization will provide to support the VISTA project.

### Audits

Audits are allowable costs if your organization meets OMB threshold requirements. The current requirement sets forth that a single or program-specific audit is required if a Non-Federal entity expends \$500,000 or more in a year in Federal awards. If an audit is required because your organization meets the threshold, VISTA grant funds may be provided on a pro-rated charge that is determined among the federal programs involved. You may forecast the amount of audit costs based on your funding history and contact your Corporation State Office if the amount changes.

Information about audits can be added to this section.

Click “Add a New Budget item” to enter audit information. For “Item” enter information about the audit, including the total amount and the portions of funding that your organization receives from various federal agencies.

Example: If an organization received 50% of their federal funding from Health and Human Services, 40% of federal funding from the Department of Education, and 10% of federal funding from the Corporation, then a reasonable allocation of costs might be to charge the audit according to the percent of federal funds received (10% for the Corporation in this example). This applicant might request CNCS to cover up to 10% of total annual audit amount:

**Item:** Our total audit costs are \$4000. 50% of our funding is from HHS, 40% is from

DOE, and 10% will be from CNCS. We are requesting that CNCS provide funds to cover costs for 10% of total audit costs.

**Total Amount:** = (\$Annual audit costs) \* (% of funding from CNCS)  
= \$4000 \* 10% = \$400

**CNCS Share:** = (\$Total amount) \* (% requested from CNCS)  
= \$400 \* 100% = \$400

**Grantee Share:** = (\$Total Amount) – (\$CNCS Share)  
= \$400 - \$400 = \$0

### **Indirect Costs**

This line item is not an allowable cost for VISTA Support Grants. You may wish to add line items to document the resources that your organization will provide to support the VISTA project.

### **Budget Section 2. Volunteer Expenses (Required)**

You must complete certain budget line items in this section. Your proposed budget should be sufficient to allow you to perform the tasks described in your proposal narrative. You may wish to add line items to document the resources that your organization will provide to support the VISTA project.

### **Full Time (Federal)**

*Only complete this line item to apply for non cost share positions. For information about cost share, contact your Corporation State Office.*

Click “add a new budget item” under Full-time (Federal) and complete the requested information to apply for VISTAs or Leaders.

For Description/sites, use a project site name and county (e.g., Crawford County Financial Fitness/Richland County).

For the “# Mbr” field, enter the number of requested members that will serve with that project component.

Select the living allowance rate. Living allowance rates are determined by county. For the current county living allowance rate, contact your Corporation State Office.

Click into the field called “Member Support” and enter the numerical figure from the “Total Amount” field that has been calculated by eGrants.

Note: If you propose to have VISTAs serving at different sites, add a new budget item and provide specific information about that site. For example, VISTAs proposed for three sites in three different counties may receive different living allowance rates, so you would complete a budget item for Site 1, then for Site 2, and then for Site 3. **Also, VISTAs and Leaders receive different living allowance rates and should be entered separately.** Add as many budget items as needed by selecting “add a new budget item.”



**Full Time (non-Federal)**

*Only complete this line item to apply for cost share positions. For information about cost share, contact your Corporation State Office.*

Click “add a new budget item” under Full-time (non-Federal) and complete the requested information to apply for cost share VISTAs or Leaders.

For Description/sites, use a project site name and issue area (e.g., Crawford County Financial Fitness/Asset Building).

For the “# Mbr” field, enter the number of requested cost share members that will serve with that project component.

Select the living allowance rate. Living allowance rates are determined by county. For the current county living allowance rate, contact your Corporation State Office.

Click into the field called “Grantee Share” and enter the numerical figure from the “Total Amount” field that has been calculated by eGrants.

Note: If you propose to have VISTAs serving in different project components at different sites, add a new budget item and provide specific information about that component. For example, VISTAs proposed for three sites in three different counties may receive different living allowance rates, so you would complete a budget item for Site 1, then for Site 2, and then for Site 3. Also, VISTAs and Leaders receive different living allowance rates and should be entered separately. Add as many budget items as needed by selecting “add a new budget item.”

**Summer Associate (Federal) and Summer Associate (non-Federal)**

*Only existing sponsors may participate in the Summer Associate program. For information about the Summer Associate program, contact your Corporation State Office.*

**Education and End of Service Awards**

VISTAs have a choice between two end-of-service options, an education award and a cash stipend, both of which are provided after a successful completion of service. Nationally, about 80 percent of members choose the education award; 20 percent choose the cash stipend. Your budget plan may reflect that ratio or your organization’s best estimate.

Enter your estimates about how many Segal AmeriCorps Education Awards and End of Service Stipends the members on your project will select. If you applied for a VISTA Leader(s), enter estimates for VISTA Leader stipends under the “End of Service Stipend – Leader” line item.

**Health coverage**

Enter the total number of requested VISTAs and VISTA Leaders.

Click into the field called “Member Support” and enter the numerical figure from the “Total Amount” field that has been calculated by eGrants.

## **FICA**

FICA (Federal Insurance Compensation Act) applies only to members that elect the cash stipend. Enter information about the cash stipends to calculate FICA totals.

To obtain the Stipend Amount, add the amounts of “End of Service Stipend-Regular” plus “End of Service Stipend-Leader.” Refer to the Education and End of Service Awards section and the “Total Amount” column for these figures.

Click into the field called “Member Support” and enter the numerical figure from the “Total Amount” that has been calculated by eGrants.

## **Travel**

*Complete this line item to request VISTA support grant funds for service-related transportation for VISTAs, Leaders and Summer Associates serving on the project. Service-related transportation is transportation related to fulfilling the VISTA's day-to-day service duties at the project site. Do not list daily commute, CNCS invitational training travel or relocation travel costs in this section. You may also wish document the resources that your organization will provide to support the VISTA project.*

Sponsors are responsible for the costs of service-related transportation for VISTAs, Leaders, and Summer Associates. Support grant funds may be requested by your organization for full or partial funding for service-related transportation of VISTAs, Leaders, or Summer Associates, but only in those cases where such support is necessary and appropriate to ensure that a VISTA, Leader, or Summer Associate has available such service-related transportation necessary to carry out the purpose of the VISTA program and to perform effectively the work to which they are assigned and where your organization is unable to provide such service-related transportation with its own structure and resources.

Grants for service-related transportation are in the amount of the costs of public transportation or, where public transportation is not adequate, in the amount of Privately Owned Vehicle (POV) Mileage Reimbursement Rates. The POV mileage reimbursement rate should be at least the rate applied to all travel within your organization, up to the federal mileage rate. If there is no standard rate within your organization, then use the federal mileage rate.

You will be responsible for any expenses incurred for service-related transportation over the agreed amount.

A grant for service-related transportation may not be used to:

- Cover relocation costs of a VISTA, Leader or Summer Associate, since those costs are provided directly by the Corporation
- Cover the costs of VISTAs, Leaders, or Summer Associates traveling from their residence to and from their service site (i.e., daily commuting costs)
- Cover costs of providing direct services to the beneficiaries of the VISTA project (e.g., delivering meals)
- Cover travel costs for training (e.g., Pre-Service Orientation)

Click “add a new budget item” and complete the requested information to apply for service-related transportation support grant funds.

For “Item/Description” enter a description of the purpose of the service-related transportation.

For “Calculation” provide a description in the form of an equation that includes costs for transportation and other related expenses for members to travel outside their service location or between sites, such as bus passes to local sites, mileage reimbursement for use of car, etc. For example: 3 VISTAs traveling @ \$2.50/bus trip for 10 trips = \$75.

For “Total Amount” enter the total cost for service-related transportation for the VISTA project.

For “CNCS Share” enter the portion of the “Total Amount” that you are requesting from the Corporation.

For “Grantee Share” enter the portion of the “Total Amount” that your organization will provide from its own resources.

Do not enter any information into the “Member Support” box.

### **Other Volunteer Expenses**

#### *Pre-Service Orientation (PSO)*

It is the responsibility of the VISTA program to provide funding and access to Pre-Service Orientation (PSO) to ensure the VISTAs’ ability to effectively carry out their assignments.

In exceptional instances, the Corporation may determine that a sponsor should implement the PSO curriculum on behalf of the Corporation. In such instances, the organization may be eligible to receive VISTA support grant funds to do so. To be eligible to receive VISTA support grant funds to implement PSO, the Corporation must make a determination that:

- It is in the interests of the VISTA program
- The sponsor is capable of implementing the curriculum and managing the logistics to ensure that VISTAs have the training necessary to carry out the purpose of the VISTA program and to perform effectively the work to which the VISTAs are assigned.

An applicant interested in implementing the PSO should contact the Corporation State Office.

If the Corporation determines that an application for grant funds for PSO is warranted, the applicant requests funds by clicking “add a new budget item” and completing the requested information.

Applicants should:

- Describe the purpose of the training
- Identify the number of individuals that will be trained, along with an estimated cost per individual
- Describe any training-related travel needs, such as costs for transportation, lodging, per diem, and other travel related expenses multiplied by the number of trips/participant
- Describe costs for fingerprinting of VISTA candidates and members for criminal history check

The Corporation determines the amount of the grant for PSO based on the actual costs of the training and available funds.

#### *Conducting Fingerprinting of Candidates*

VISTA conducts a comprehensive FBI criminal history check on all candidates for full-time VISTA service (not Summer Associates). To conduct a FBI criminal history check, candidates submit their

fingerprints to VISTA HQ. VISTA HQ then sends the prints to the FBI to be run through their database.

In most cases, VISTA HQ obtains fingerprints from candidates at PSO. In exceptional instances, the Corporation may determine that a sponsor conducting a PSO should coordinate the fingerprinting of candidates on behalf of the Corporation. In such instances, the organization may be eligible to receive VISTA grant funds to do so. To be eligible to receive VISTA support grant funds to cover expenses related to fingerprinting of candidates, the Corporation must make a determination that:

- It is in the interests of the VISTA program
- The sponsor is capable of coordinating the fingerprinting process.

An applicant that is interested in conducting the fingerprinting of candidates should contact the Corporation State Office.

If the Corporation determines that an application for grant funds for conducting the fingerprinting of candidates is warranted, the applicant requests funds by clicking “add a new budget item” and completing the requested information. Applicants should:

- Describe the purpose of the funds: conducting fingerprinting of candidates for FBI criminal history check
- Identify the number of individuals that will be fingerprinted, along with an estimated cost per individual

The Corporation determines the amount of the grant based on the actual costs of the fingerprinting and available funds.

**Once you have entered your budget information in eGrants, you will be asked to validate your budget, and eGrants will check your submission for errors.**

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