Farmers’Market SNAP Support Grant (FMSSG) Program – 2015

**ATTACHMENT: FNS-10-545A COVER SHEET**

FNS strongly encourages applicants to use this Cover Sheet and Project Narrative (together known as form FNS-10-545A) when preparing their applications to participate in FMSSG. FNS recommends reading the Form Instructions (page 4-5) and the FMSSG Request for Applications before completing this form. Insert information below; Sections 4 and 7-11 can be expanded, allowing the applicant to include additional text, as needed.

**1. Project Title:**

**2. Organization Name and Contact Person:** 3. **Primary Project Contact Name and Title:**

**City State: Zip Code:** **City: State: Zip Code:**

**E-mail: E-mail:**

**Phone: Fax: Phone: Fax:**

**4. Executive Summary:**

One double-spaced page or less, which clearly describes the project, including the current situation (justifying the need for the project), expected outcomes, and a timeframe for completing all activities.

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**FNS-10-545A -- PROJECT NARRATIVE**

**5. Requested FMSSG Grant Funding**:

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**6**. **Entity Type**

[ ]  Farmers’ market [ ]  Nonprofit corporation [ ]  State or local government

[ ]  Farmers’ market association [ ]  Economic development corporation [ ]  Tribal government

[ ]  Public benefit corporation [ ]  Regional farmers market authority

[ ]  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**7. Background Statement:**

**8.** **Goal(s)/Purposes of the Project:**

Goal #1:

Goal #2:

Goal #3:

**9.** **Approach:**

**10.** **Impacts:**

**11.** **Partnerships and Donations (include Matching Funds, if any):**

**12.** **Project Implementation Address(s):** List the addresses of the farmers’ markets and/or other locations where the project activities will take place.Record as many as applicable. Copy information below to add additional addresses and add additional pages, if necessary.This section does not count toward the 10-page limit.

**Address #1:** **Address #2:**

**City: State: Zip Code: City: State: Zip Code:**

**County: County:**

SNAP Participants (# in locality)\*: SNAP Participants (# in locality)\*:

SNAP Participation (% in locality)\*: SNAP Participation (% in locality)\*:

\*Use U.S. Census ACS Data to answer these questions.

**13. Key Personnel Biographies:**

**Do not submit the instructions below when submitting your application via Grants.gov.**

### *The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable sex, marital status, or familial status, parental status religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual’s income is derived from any public assistance program (not all prohibited bases apply to all programs). Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA’s TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer*

### **Instructions for Completing**

### **FNS-10-545A Project Narrative Form**

The narrative portion of the project proposal must be single-sided and not exceed 10 pages (Times New Roman font, 12 pt. pitch, 8.5x11 inch-paper). Cover letter, letters of support, biographies of key personnel, project implementation addresses, and charts generated using the U.S. Census Bureau’s ACS to demonstrate levels of SNAP participation do not count against the 10-page limit. The narrative must be organized under the following headings:

**1.** **Project Title**. Must capture the primary focus of the project. Applicants should ensure that, once they choose a project title, they use the ***exact*** same title on all documents.

**2. Organization Name and Contact Information**. Provide the organization name, and the name, mailing address, telephone number, fax number, and email address(es) of the contact person where questions about the application and applicant may be directed.

1. **Primary Project Contact Information**. Provide the name, title, mailing address, telephone number, fax number, and email address for the person(s) that would responsible for managing and/or overseeing the project.
2. **Executive Summary**. One double-spaced page or less, which clearly describes the project, including the current situation (justifying the need for the project), general approach/plan, expected outcomes, and a timeframe for completing all activities.
3. **Requested FMSSG Funding/Matching Funding**: Indicate the dollar amount (use whole dollar amounts) requested from FMSSG. Do not include funding or in-kind work from other sources in the “Requested FMSSG Funding” section. Include other funding sources, matching, and in-kind contributions in the “Matching Funds” section, as applicable.
4. **Entity Type**. Indicate the entity type of the applicant/organization.
5. **Background Statement**. Describe the current conditions that justify the need for the proposed project, explain how the project will improve those conditions, and indicate whether (and why) the conditions are likely or unlikely to improve without the proposed project. Include SNAP participation number and percentages for localities that will be served by this project, per five-year rolling average data from the U.S. Census Bureau’s American Community Survey (ACS, available at [http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#5yrpopup](http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t%235yrpopup)). You may attach copies of charts generated using ACS, which will not count towards your 10-page total. Include any other relevant existing baseline data.
6. **Goals/Purposes of the Project**. Clearly and concisely state the goal(s) of the project. Number and list each goal (i.e., Goal #1, Goal #2). After the list, briefly state how each goal addresses FMSSG’s mission.
7. **Approach:** Provide a workplan that clearly describes each project activity, plan for completing each activity, the personnel and non-personnel resources (i.e., facilities, equipment, etc.) that will be used to conduct activities, and timelines for completion. The workplan should also indicate how monitoring oversight will be conducted and whether/how project activities will continue after grant funds are expended.
8. **Impact. D**escribe how project activities will further project goals (i.e., how the activities will fix or improve the situation that justifies the need for the project), and how impacts will be monitored and evaluated while the project is in progress and after it is concluded. Baseline data (aside from ACS data mentioned above) should be provided, if available. Target goals for both quantitative and qualitative metrics should be clearly described.
9. **Partnerships and Donations.** List any other current and pending public or private support (partnerships, donations of volunteer time or in-kind donations, etc.) for the proposed project. Make sure to indicate personnel identified in the narrative who have committed portions of their time, whether or not salary support for persons involved is included in the budget.
10. **Project Implementation Address(s):** List the addresses of the farmers’ markets and/or other locations where the project activities will take place.Record as many as applicable. Add additional pages, if necessary.This section does not count toward the 10-page limit

**13. Key Personnel Biographies:** Brief description(s) of experience and qualifications, or résumés, of those leading or conducting project activities. These qualifications should reflect the expertise necessary to carry out the proposed activities or similar activities. This section does not count toward the 10 page limit.