**Application for Federal Assistance SF-424**

OMB Number: 4040-0004

Expiration Date: 8/31/2016

\*1. Type of Submission:

\*2. Type of Application:

\* If Revision, select appropriate letter(s):

Preapplication

Application

New

Continuation

\*Other (Specify):

Changed/Corrected Application

Revision

\* 3. Date Received: 4. Applicant Identifier:

Completed by Grants.gov upon submission

5a. Federal Entity Identifier: \*5b. Federal Award Identifier:

**State Use Only:**

6. Date Received by State: 7. State Application Identifier:

**8. APPLICANT INFORMATION:**

\*a. Legal Name:

\*b. Employer/Taxpayer Identification Number (EIN/TIN): \*c. Organizational DUNS:

**d. Address:**

\*Street 1:

Street 2:

\*City:

County/Parish:

\*State:

Province:

\*Country:

\*Zip / Postal Code:

**e. Organizational Unit:**

Department Name: Division Name:

**f. Name and contact information of person to be contacted on matters involving this application:**

Prefix: \*First Name:

Middle Name:

\*Last Name:

Suffix:

Title:

Organizational Affiliation:

\*Telephone Number: Fax Number:

\*Email:

**Application for Federal Assistance SF-424**

**9. Type of Applicant 1: Select Applicant Type:**

Type of Applicant 2: Select Applicant Type: Type of Applicant 3: Select Applicant Type:

\*Other (Specify)

**\*10 Name of Federal Agency:**

**11. Catalog of Federal Domestic Assistance Number**:

CFDA Title:

**\*12 Funding Opportunity Number**:

\*Title:

**13. Competition Identification Number**:

Title:

**14. Areas Affected by Project (Cities, Counties, States, etc.):**

**\*15. Descriptive Title of Applicant’s Project**:

Attach supporting documents as specified in agency instructions.

**Application for Federal Assistance SF-424**

**16. Congressional Districts Of:**

\*a. Applicant: \*b. Program/Project:

Attach an additional list of Program/Project Congressional Districts if needed.

**17. Proposed Project**:

\*a. Start Date: \*b. End Date:

**18. Estimated Funding ($):**

\*a. Federal

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\*b. Applicant

\*c. State

\*d. Local

\*e. Other

\*f. Program Income

\*g. TOTAL

**\*19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

a. This application was made available to the State under the Executive Order 12372 Process for review on

b. Program is subject to E.O. 12372 but has not been selected by the State for review.

c. Program is not covered by E.O. 12372.

**\*20. Is the Applicant Delinquent On Any Federal Debt? (If “Yes,” provide explanation in attachment.)**

Yes No

If “Yes”, provide explanation and attach.

**21. \*By signing this application, I certify (1) to the statements contained in the list of certifications\*\* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances\*\* and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U. S. Code, Title 218, Section 1001)**

\*\* I AGREE

\*\* The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

**Authorized Representative:**

Prefix: \*First Name:

Middle Name:

\*Last Name:

Suffix:

\*Title:

\*Telephone Number: Fax Number:

\* Email:

\*Signature of Authorized Representative:

Completed by Grants.gov upon submission

\*Date Signed:

Completed by Grants.gov upon submission

**U.S. Department of Education**

**Supplemental Information for the SF-424**

**1. Project Director:**

Prefix: \* First Name: Middle Name: \* Last Name: Suffix:

Address:

\* Street1: Street2:

\* City: County:

\* State: \* Zip Code: Country:

\* Phone Number (give area code): Fax Number (give area code):

\* Email Address:

**2. Novice Applicant:**

Are you are a novice applicant as defined in the regulations in 34 CFR 75.225 (and included in the definitions page in the attached instructions)?

Yes No

**3. Human Subjects Research:**

a. Are any research activities involving human subjects planned at any time during the proposed Project Period?

Yes No

b. Are ALL the research activities proposed designated to be exempt from the regulations?

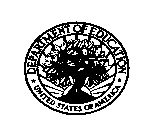
Yes Provide Exemption(s) # (s): ⁪ 1 ⁪ 2 ⁪ 3 ⁪ 4 ⁪ 5 ⁪ 6

No Provide Assurance #(s), if available:

c. If applicable, please attach your “Exempt Research” or “Nonexempt Research” narrative to this form as indicated in the definitions page in the attached instructions.

OMB Number: 1894-0007

Expiration Date: 8/31/2017



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| --- | --- | --- | --- | --- | --- | --- | --- |
| **U.S. DEPARTMENT OF EDUCATION B UDGET INFORMATION**  **NON-CONSTRUCTION PROGRAMS** | | | | | | OMB Control Number: 1894-0008  Expiration Date: 06/30/2017 | |
| Name of Ins titution/Organization | | | Applicants reques ting funding for only one year s h ould complete the column under "Project Year 1." Applicants reques ting funding for multi-year grants s hould complete all applicable columns . Pleas e read all ins tructions before completing form. | | | | |
| **SECTION A - BUDGET SUMMARY**  **U.S. DEPARTMENT OF EDUCATIO N FUNDS** | | | | | | | |
| Budget Categories | Project Year 1 (a) | Project Year 2 (b) | Project Year 3 (c) | Project Year 4 (d) | Project Year 5 (e) | | Total  (f) |
| 1. Pers onnel |  |  |  |  |  | |  |
| 2. Fringe Benefits |  |  |  |  |  | |  |
| 3. Travel |  |  |  |  |  | |  |
| 4. Equipment |  |  |  |  |  | |  |
| 5. Supplies |  |  |  |  |  | |  |
| 6. Contractual |  |  |  |  |  | |  |
| 7. Cons truction |  |  |  |  |  | |  |
| 8. Other |  |  |  |  |  | |  |
| 9. Total Direct Cos ts (lines 1-8) |  |  |  |  |  | |  |
| 10. Indirect Cos ts \* |  |  |  |  |  | |  |
| 11. Training Stipends |  |  |  |  |  | |  |
| 12. Total Cos ts (lines 9-11) |  |  |  |  |  | |  |
| **\*Indirect Cos t Information *(To Be Completed by Your Business Office*):**  If you are reques ting reimburs ement for indirect cos ts on line 10, pleas e ans wer the following ques tions :  (1) Do you have an Indirect Cos t Rate Agreement approved by the Federal government? \_\_\_\_Yes \_\_\_\_ No  (2) If yes , pleas e provide the following information:  Period Covered by the Indirect Cos t Rate Agreement: From: \_\_\_/\_\_\_/\_\_\_ \_ To: \_\_\_/\_\_\_/\_\_\_ \_ (mm/dd/yyyy)  Approving Federal agency: \_\_\_\_ ED \_\_\_\_ Other (pleas e s pecify): \_\_\_\_\_\_\_\_\_ \_ \_ \_ \_ \_ The Indirect Cos t Rate is \_\_\_ \_\_\_\_\_\_% (3) For Res tricted Rate Programs (check one) -- Are you us ing a res tricted indirect cos t rate that:  \_\_\_ Is included in your approved Indirect Cos t Rate Agreement? or \_\_\_ Complies with 34 CFR 76.564(c)(2)? The Res tricted In direct Cos t Rate is \_\_\_\_\_\_\_\_\_% | | | | | | | |

ED 524

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name of Ins titution/Organization | | | Applicants reques ting funding for only one year s hould complete the column under "Project Year 1." Applicants reques ting funding for multi-year grants s hould complete all applicable columns . Pleas e read all ins tructions before completing form. | | | |
| **SECTION B - BUDGET SUMMARY NON-FEDERAL FUNDS** | | | | | | |
| Budget Categories | Project Year 1 (a) | Project Year 2 (b) | Project Year 3 (c) | Project Year 4 (d) | Project Year 5 (e) | Total  (f) |
|  | | | | | | |
| 1. Pers onnel |  |  |  |  |  |  |
| 2. Fringe Benefits |  |  |  |  |  |  |
| 3. Travel |  |  |  |  |  |  |
| 4. Equipment |  |  |  |  |  |  |
| 5. Supplies |  |  |  |  |  |  |
| 6. Contractual |  |  |  |  |  |  |
| 7. Cons truction |  |  |  |  |  |  |
| 8. Other |  |  |  |  |  |  |
| 9. Total Direct Cos ts  (Lines 1-8) |  |  |  |  |  |  |
| 10. Indirect Cos ts |  |  |  |  |  |  |
| 11. Training Stipends |  |  |  |  |  |  |
| 12. Total Cos ts  (Lines 9-11) |  |  |  |  |  |  |
| **SECTION C – B UDGET NARRATIVE** (see instructions) | | | | | | |

ED 524

**Instructions for ED 524**

General Inst ructions

T his form is used t o apply to individual U.S. Department of Education (ED) discret ionary grant programs. Unless direct ed ot herwise, provide t he same budget information for each year of t he multi-year funding request . P ay attention to applicable program specific instructions, if

at t ached. You may access t he Education Department General

Administ rative Regulat ions, 34 CFR 74 – 86 and 97-99, on ED’s

websit e at :

[ht t p://www.ed.gov/policy/fund/reg/edgarReg/edgar.html](http://www.ed.gov/policy/fund/reg/edgarReg/edgar.html)

**You m us t consult wi th your Business Office prior to submitting th i s form.**

Sect ion A - Budget Summary

U.S. Depart ment of Education Funds

All applicants must complete Sect ion A and provide a break -down by t he applicable budget categories shown in lines 1 -11.

Lines 1-11, columns (a)-(e): For each project year for which funding is request ed, show t he t otal amount requested for each applicable budget cat egory.

Lines 1-11, column (f): Show t he multi-year t otal for each budget

cat egory. If funding is request ed for only one project year, leave t his

column blank.

Line 12, columns (a)-(e): Show t he total budget request for each project year for which funding is request ed.

Line 12, column (f): Show t he t otal amount request ed for all project years. If funding is request ed for only one year, leave this space blank.

Indirect Cost Information: If you are request ing reimbursement for indirect costs on line 10, this information is t o be completed by your Business Office. (1): Indicate whether or not your organization has an Indirect Cost Rat e Agreement that was approved by t he Federal government.

If you checked “ no,” ED generally will aut horize grantees t o use a

t emporary rate of 10 percent of budget ed salaries and wages subject to t he following limitations:

(a) T he grantee must submit an indirect cost proposal to its

cognizant agency wit hin 90 days after ED issues a grant awar d not ification; and

(b) If aft er t he 90-day period, t he grantee has not submitted an indirect cost proposal to its cognizant agency, t he grantee may not

charge it s grant for indirect costs until it has negotiated an indirect cost rat e agreement wit h its cognizant agency.

(2): If you checked “ yes” in (1), indicate in (2) t he

beginning and ending dat es covered by t he Indirect Cost Rate

Agreement. In addit ion, indicate whether ED, another Federal agency (Ot her) or St ate agency issued t he approved agreement. If you check “ Ot her,” specify t he name of t he Federal or other agency t hat issued

t he approved agreement.

(3): If you are applying for a grant under a Rest ricted Rate

P rogram (34 CFR 75.563 or 76.563), indicate whether you are using a rest rict ed indirect cost rate t hat is included on your approved Indirect

Cost Rat e Agreement or whet her you are using a rest ricted indirect cost rat e that complies wit h 34 CFR 76.564(c)(2). Note: St at e or Local government agencies may not use t he provision for a rest ricted indirect cost rate specified in 34 CFR 76.564(c)(2). Check only one response. Leave blank, if t his it em is not applicable.

Sect ion B - Budget Summary Non-Federal Funds

If you are required t o provide or volunteer t o provide cost -sharing or mat ching funds or ot her non-Federal resources t o t he project, t hese should be shown for each applicable budget category on lines 1 -11 of Sect ion B.

Lines 1-11, columns (a)-(e): For each project year, for which

mat ching funds or ot her contributions are provided, show t he t otal cont ribut ion for each applicable budget cat egory.

Lines 1-11, column (f): Show t he multi-year t otal for each budget

cat egory. If non-Federal contributions are provided for only one year, leave t his column blank.

Line 12, columns (a)-(e): Show t he total matching or other cont ribut ion for each project year.

Line 12, column (f): Show t he t otal amount t o be contribut ed for all years of t he multi-year project. If non-Federal contribut ions are provided for only one year, leave this space blank.

Sect ion C - Budget Narrat ive [At t ach separat e sheet (s)]

P ay at t ent ion t o applicable program specific inst ruct ions, if at t ached.

1. P rovide an it emized budget breakdown, and just ification by project year, for each budget category listed in Sect ions A and B. For grant projects t hat will be divided int o t wo or more separat ely budget ed major activities or sub-projects, show for each budget cat egory of a project year t he breakdown of t he specific expenses at tribut able to each sub-project or activity.

2. For non-Federal funds or resources list ed in Sect ion B t hat are used t o meet a cost-sharing or matching requirement or provided as a volunt ary cost-sharing or matching commitment, you must include:

a. T he specific costs or contributions by budget cat egory;

b. T he source of t he costs or contribut ions; and

c. In t he case of t hird-party in-kind contribut ions, a description of how t he value was det ermined for t he donated or contributed goods or services.

[P lease review ED’s general cost sharing and matching

regulat ions, which include specific limitations, in 34 CFR 74.23,

applicable t o non-governmental entities, and 80.24, applicable to governments, and t he applicable Office of Management and Budget (OMB) cost principles for your entity type regarding donat ions, capital asset s, depreciation and use allowances. OMB

cost principle circulars are available on OMB’s websit e at :

ht t p://www.whit ehouse.gov/omb/circulars/index.html]

3. If applicable t o this program, provide t he rate and base on which fringe benefit s are calculated.

4. If you are request ing reimbursement for indirect cost s on line

10, t his information is t o be completed by your Business Office. Specify t he est imated amount of t he base t o which t he indirect cost rat e is applied and t he t otal indirect expense. Depending on t he grant program t o which you are applying and/or your approved Indirect Cost Rate Agreement, some direct cost budget cat egories in your grant application budget may not be included in t he base and mult iplied by your indirect cost rate. Fo r example, you must multiply the indirect cost rates of “ Training grant s" (34 CFR 75.562) and grants under programs wit h

“ Supplement not Supplant” requirements ("Restricted Rat e" programs) by a “ modified t otal direct cost” (MTDC) base (34

CFR 75.563 or 7 6.563). P lease indicate which costs are

included and which cost s are excluded from t he base t o which t he indirect cost rate is applied.

When calculating indirect costs (line 10) for "Training grants" or grant s under "Rest ricted Rat e" programs, you must refer t o t he information and examples on ED’s websit e at :

ht t p://[www.ed.gov/fund/grant/apply/appforms/appforms.html.](http://www.ed.gov/fund/grant/apply/appforms/appforms.html)

You may also contact (202) 377-3838 for addit ional information regarding calculat ing indirect cost rates or general indirect cost rat e information.

5. P rovide other explanations or comments you deem necessary.

**Pape rwork Bu rde n S tate m e n t**

According t o t he Paperwork Reduct ion Act of 1995, no persons are required t o respond t o a collection of information unless such collect ion displays a valid OMB control number. T he valid OMB cont rol number for this information collection is **1894-0008**. T he

t ime required t o complete t his information collection is est imated t o

vary from 13 to 22 hours per response, wit h an average of 17.5 hours per response, including t he t ime to review instructions, search existing dat a sources, gat her t he dat a needed, and complete and review t he information collection. If you have any comments concerning t he accuracy of t he t ime estimate(s) or suggest ions for improving t h is form, please writ e t o: U.S. Department of Education, Washingt on, D.C. 20202-4537. If you have comments or concerns regarding t he

st at us of your individual submission of t his form, writ e directly t o

(insert program office), U.S. Department of Education, 400 Maryland

Avenue, S.W., Washington, D.C. 20202.

OMB Control No. 1894-0005 (Exp. 03/31/2017)

**NOTICE TO ALL APPLICANTS**

The purpose of this enclosure is to inform you about a new provision in the Department of Education's General Education Provisions Act (GEPA) that applies to applicants for new grant awards under Department programs. This provision is Section 427 of GEPA, enacted as part of the Improving America's Schools Act of 1994 (Public Law (P.L.) 103-382).

**To Whom Does This Provision Apply?**

Section 427 of GEPA affects applicants for new grant awards under this program. **ALL APPLICANTS FOR NEW AWARDS MUST INCLUDE INFORMATION IN THEIR APPLICATIONS TO ADDRESS THIS NEW PROVISION IN ORDER TO RECEIVE FUNDING UNDER THIS PROGRAM.**

(If this program is a State-formula grant program, a State needs to provide this description only for projects or activities that it carries out with funds reserved for State-level uses. In addition, local school districts or other eligible applicants that apply to the State for funding need to provide this description in their applications to the State for funding. The State would be responsible for ensuring that the school district or other local entity has submitted a sufficient section 427 statement as described below.)

**What Does This Provision Require?**

Section 427 requires each applicant for funds (other than an individual person) to include in its application a description of the steps the applicant proposes to take to ensure equitable access to, and participation in, its Federally-assisted program for students, teachers, and other program beneficiaries with special needs. This provision allows applicants discretion in developing the required description. The statute highlights six types of barriers that can impede equitable access or participation: gender, race, national origin, color, disability, or age. Based on local circumstances, you should determine whether these or other barriers may prevent your students, teachers, etc. from such access or participation in, the Federally-funded project or activity. The description in your application of steps to be taken to overcome these barriers need not be lengthy; you may provide a clear and succinct description of how you plan to address those barriers that are applicable to your circumstances. In addition, the information may be provided in a single

narrative, or, if appropriate, may be discussed in connection with related topics in the application.

Section 427 is not intended to duplicate the requirements of civil rights statutes, but rather to ensure that, in designing their projects, applicants for Federal funds address equity concerns that may affect the ability of certain potential beneficiaries to fully participate in the project and to achieve to high standards. Consistent with program requirements and its approved application, an applicant may use the Federal funds awarded to it to eliminate barriers it identifies.

**What are Examples of How an Applicant Might**

**Satisfy the Requirement of This Provision?**

The following examples may help illustrate how an applicant may comply with Section 427.

(1) An applicant that proposes to carry out an adult literacy project serving, among others, adults with limited English proficiency, might describe in its application how it intends to distribute a brochure about the proposed project to such potential participants in their native language.

(2) An applicant that proposes to develop instructional materials for classroom use might describe how it will make the materials available on audio tape or in braille for students who are blind.

(3) An applicant that proposes to carry out a model science program for secondary students and is concerned that girls may be less likely than boys to enroll in the course, might indicate how it intends to conduct "outreach" efforts to girls, to encourage their enrollment.

(4) An applicant that proposes a project to increase school safety might describe the special efforts it will take to address concern of lesbian, gay, bisexual, and transgender students, and efforts to reach out to and involve the families of LGBT students

We recognize that many applicants may already be implementing effective steps to ensure equity of access and participation in their grant programs, and we appreciate your cooperation in responding to the requirements of this provision.

**Estimated Burden Statement for GEPA Requirements**

**According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is required to obtain or retain benefit (Public Law 103-382. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Education,**

**400 Maryland Ave., SW, Washington, DC 20210-4537 or email** [**ICDocketMgr@ed.gov**](mailto:ICDocketMgr@ed.gov) **and reference the OMB Control Number**

**1894-0005.**

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard

Form-LLL, ''Disclosure of Lobbying Activities,'' in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification

is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,00 0 and not more than $100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, ''Disclosure of Lobbying Activities,'' in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subjec t to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

\* APPLICANT'S ORGANIZATION

\* PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE

Prefix:

\* First Name:

Middle Name:

\* Last Name:

Suffix:

\* Title:

\* SIGNATURE: \* DATE:

**ASSURANCES - NON-CONSTRUCTION PROGRAMS**

OMB Approval No. 0348-0040

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including 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 the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

**PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.**

**NOTE:**

Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.

2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.

3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.

4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.

5. Will comply with the Intergovernmental Personnel Act of

1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).

6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-

1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation

Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42

U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee

3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.

8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

**Previous Edition Usable Standard Form 424B (Rev. 7-97)**

**Authorized for Local Reproduction Prescribed by OMB Circular A-102**

9.

10.

11.

Will comply, as applicable, with the provisions of the Davis- Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-

333), regarding labor standards for federally-assisted construction subagreements.

Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is $10,000 or more.

Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-

205).

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Will comply with the Wild and Scenic Rivers Act of

1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of

1974 (16 U.S.C. §§469a-1 et seq.).

Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.

Will comply with the Laboratory Animal Welfare Act of

1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.

Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.

Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."

Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

|  |  |  |
| --- | --- | --- |
| SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL | TITLE | |
| APPLICANT ORGANIZATION | | DATE SUBMITTED |

**Standard Form 424B (Rev. 7-97) Back**

**DISCLOSURE OF LOBBYING ACTIVITIES** Approved by OMB

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352 0348-0046

(See reverse for public burden disclosure.)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1. Type of Federal Action:**  a. contract b. grant  c. cooperative agreement d. loan  e. loan guarantee f. loan insurance | **2. Status of Federal Action:**  a. bid/offer/application b. initial award  c. post-award | | **3. Report Type:**  a. initial filing  b. material change  **For Material Change Only:**  year quarter  date of last report | |
| **4. Name and Address of Reporting Entity:**  **Prime Subawardee**  Tier , if known :  **Congressional District**, if known : | | **5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:**  **Congressional District**, if known : | | |
| **6. Federal Department/Agency:** | | **7. Federal Program Name/Description:**  CFDA Number, if applicable : | | |
| **8. Federal Action Number,** if known **:** | | **9. Award Amount,** if known **:**  $ | | |
| **10. a. Name and Address of Lobbying Registrant b. Individuals Performing Services** (including address if | | | | |
| ( if individual, last name, first name, MI ): | | different from No. 10a )  (last name, first name, MI ): | | |
| **11.** Information requested through this form is authorized by title 31 U.S.C. section  1352. This disclosure of lobbying activities is a material representation of fact  upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure. | | Signature: Print Name: Title: Telephone No.: Date: | | |
| **Federal Use Only:** | | | | Authorized for Local Reproduction  Standard Form LLL (Rev. 7-97) |

**INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES**

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employeeof a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.

2. Identify the status of the covered Federal action.

3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.

4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.

5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.

6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizationallevel below agency name, if known. For example, Department of Transportation, United States Coast Guard.

7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance

(CFDA) number for grants, cooperative agreements, loans, and loan commitments.

8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."

9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.

10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and

Middle Initial (MI).

11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are 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 OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including 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 the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.