USING THE DATA ANALYSIS TEMPLATE TOOLKIT

- 1. It is recommended that you print this sheet. To do so, click File, Print on the menu at the top the screen.
- 2. Click on the **DAT Instructions** tab at the bottom of the screen. It is recommended that you print these instructions to use as a reference during the process of creating your Data Analysis Template (DAT). To do so, click <u>File</u>, <u>Print</u> on the menu at the top the screen.
- 3. Click on the Form Info tab at the bottom of the screen. Fill in the requested information about the form. Refer to the instructions printed in 1. for quidance.
- 4. Click on the Global Index tab at the bottom of the screen. The Global Index serves two purposes:
 - o It gives you the ability to view the Grants.gov Global Library of standard fields and their attributes
 - o It gives you the ability to utilize pre-formatted templates to be used as rows in your form's Data Analysis Template (DAT).

Now is the time to begin preparing the Data AnalysisTemplate (DAT).

5. Determine the first (next) data element on the form. A data element is a data entry field, form title, section header or label.

IS IT A FORM TITLE, SECTION HEADER, OR LABEL?

YES. Copy the Label row template into your DAT.

Look for Label in the Global Index section III. General Data Element Formats. Click on Label. The template row for a label will be highlighted. Select Edit, Copy from the menu at the top of the screen. Click on the FORM DAT tab at the bottom of the screen. Click on the appropriate row number to paste the template into. From the menu, select Edit, Paste. Use the DAT instructions as guidance for filling in all columns in red.

NO. Then it must be a data entry field.

Grants.gov has created a required standard for representing names and addresses on forms. Elements related to names and addresses are grouped together in data element groups. If a data element group is selected, all fields within that group must be included.

IS THE ELEMENT PART OF A NAME OR ADDRESS?

YES. To use the Human Name Group or Address Group, click on the appropriate link in section II of the Global Index. Select Edit, Copy from the menu at the top of the screen. Click on the FORM DAT tab at the bottom of the screen. Click on the row number into which template will be pasted. From the menu, select Edit, Paste. Use the DAT instructions as guidance for filling in all columns in red.

NO. IS THE ELEMENT A GLOBAL DATA ELEMENT?

A global data element is a data element that is commonly used on forms across agencies. Grants.gov has standardized the attributes for global data elements. Some global data elements may be pre-populated from the application cover sheets, some may be post-populated after submission to Grants.gov, and some may be forward-populated from the application cover sheets. The Global Index in section I provides a list of global data elements.

YES. Copy the element's template into your DAT.

Click on the name of the element. The template row for a label will be highlighted. Select <u>Edit</u>, <u>Copy</u> from the menu at the top of the screen. Click on the FORM DAT tab at the bottom of the screen. Click on the row number into which the template will be pasted. From the menu, select <u>Edit</u>, <u>Paste</u>. Use the DAT instructions as guidance for filling in all columns in red.

NO. THEN THE ELEMENT MUST BE AGENCY-SPECIFIC.

Determine the General Field Format in section III of the Global Index that best reflects the data element. Click on the name of the format or one of the options beneath it. The template row(s) will be highlighted. Select Edit, Copy from the menu at the top of the screen. Click on the FORM DAT tab at the bottom of the screen. Click on the row number into which the template will be pasted. From the menu, select Edit, Paste. Use the DAT instructions as guidance for filling in all columns in red. For information about pre-populating, post-populating, and forward-populating, refer to the DAT instructions.

Repeat all of the steps in 5. until all elements on the form are represented on the DAT. The data elements on the DAT should be in the same order they appear on the form. For answers to questions about the process of preparing a Data Analysis Template, contact the PMO Program Advisor.

FORM INFORMATION

ROW	ROW NAME	ROW DEFINITION
[A]	Form Name / Title	The name of the form to be displayed on the Grants.gov system
[B]	Form Number	The number associated with the form within the agency.
[C]	Version Number	The version number of the form within the agency.
[D]	Version Date	The version date of the form.
[E]	Description	A short description of the form.
[F]	OMB Control Number	The control number issued by the Office of Management and Budget (OMB) when a form is cleared.
[G]	OMB Expiration Date	The expiration date issued by the Office of Management and Budget (OMB.)
[H]	Form Family	The families this form should be include with.
[1]	Form Category	Select the most appropriate form category.

FORM ELEMENTS

COLUMN	COLUMN NAME	COLUMN DEFINITION
[1]	Field #	A unique, sequential number for (a) each field on the form for which data will be entered or selected and (b) form title, section headers or labels. Use the block number on the form mock up, if any, otherwise start the count with 1. Format is <block#>-<field#> (e.g. Block 15, field 1 would be represented as 15-1.)</field#></block#>
[2]	Field Label	The name of the field as presented on the form. This column is used when Field Implementation [16] is label and you are specifying the form title, section headers, or labels. You may change any Global Library template label in red to the label as specified on the form.
[3]	Short Field Label	Enter condensed version for use at the beginning of Help Tip and Accessibility Text. Please limit to 40 characters or less and do not abbreviate words.
[4]	Required?	- Enter "Yes" if the field must be completed before the application can be submitted If the field is optional, conditional, or "Required if" then enter "No" in this column If the field is calculated (see BUSINESS RULES [11]) and all fields involved in the calculation are optional, enter "No" in this column If the field is calculated (see BUSINESS RULES [11]) and one or more of the fields involved in the calculation are mandatory, enter "Yes" in this column If the field is to be forward-populated (see FIELD TYPE [8]), then the value for this column should be the same as the value of the source field (e.g. if the source field is optional, if the source field is mandatory, the destination field is mandatory).
[5]	Minimum Occurrences	The minimum number of entries that can be made for the same field. Enter 0 if the field is optional. Enter 1 or more if the field must be completed before the application can be submitted.
[6]	Maximum Occurrences	- The maximum number of entries that can be made for the same field Must be 1 or more.
[7]	Agency Field Name	Short name that describes the field. This name will be used as an input to the XML schema. For Global Data Elements, a suggested name is pre-filled in red, though it may be changed. Grants.gov may modify names as needed to meet guidelines and standards. Note: Each Agency Field Name must be unique on a DAT.
[8]	Field Type	Select one from the following 5 options: Pre-populated
[9]	Global Library Field Name	- Pre-formatted for your convenience. No action required.
[10]	Field Type Source	If Pre-populated If Post-Populated If Foward-Populated If Foward-Populated If Global If Agency Specific - Pre-formatted for your convenience. No action required Pre-formatted for your convenience. No action required Pre-formatted for your convenience. No action required If "Foward-populated" was selected in the Field Type [8] column, enter the source's form name (as found on the PureEdge version of the form) and field #. Should be in the format <form name="">- - Field Type [8] column, enter n/a Pre-formatted for your convenience. No action required If "Global" was selected in Field Type [8] column, enter n/a Pre-formatted for your convenience. No action required Pre-formatted for your convenience. No action required If "Global" was selected in Field Type [8] column, enter the source's form name (as found on the PureEdge version of the form) and field #. Should be in the format convenience. No action required.</form>
		If Radio Group - If "Radio Group" was selected in the Field Type [8] column, then enter the name radio group. The radio group name may be the same as the
[11]	Business Rules	Simple rules about the field, such as: - Is a specific format required (e.g., 4 digit year and 5 digit code like "2004-abcdf")? Remember to indicate this format in the element's help tip. - Is a calculation required for this field (e.g., Total = 15-1 + 15-2 + 15-3 + 15-4) - Is this field conditionally required (e.g., Required if 3-1 is Yes) - NOTE: Grants.gov does not enforce business rules across forms. - Enter n/a if there are no business rules for the field.
[12]	Data Type	- Pre-formatted for your convenience. No action required.

FORM ELEMENTS

COLUMN NAME	COLUMN DEFINITION
List of Values	 If theData Type [12] is LIST, provide a list of values that you want to be given to the user. The format of each list item should be <id>: <description>. Use && to separate each value (e.g. MD: Maryland&& VA: Virginia)</description></id> For Minimum # of Characters [14] and Maximum # of Characters [15], enter the character count for the shortest and longest values in the list If the field is required, it must have a default value. Mark the default value with an asterisk before the value, if any (e.g. *MD: Maryland.) If the user does not change the selection, the field will automatically be filled with the default value. Enter n/a if a list of values does not apply. NOTE: No list of values is needed for Radio Groups. This list of values is the Field Labels for the Radio Group's radio options.
Minimum # of Characters or Minimum Value	- If the Data Type [12] is AN, enter the minimum number of characters that may be entered into a field (minimum field length.) If the field is optional, enter 0 If the Data Type [12] is INTEGER, \$, or DECIMAL(2), enter the minimum value for the field including decimals where applicable (e.g. enter "5000" if the value cannot be less than 5000.)
Maximum # of Characters or Maximum Value	 If the Data Type [12] is LIST, FILE, MULTIFILE or DATE, enter "n/a" in this column. A hyphen is not counted as a character if it is included on the form for presentation purposes. It is counted if it is to be stored with the data. If the Data Type [12] is AN, enter the maximum number of characters that may be entered into a field (maximum field length.) If the Data Type [12] is INTEGER, \$, or DECIMAL(2), enter the maximum value for the field including decimals where applicable (e.g. enter "10,000" if the value cannot be more than 10,000.)
	- If the Data Type [12] is LIST, FILE, MULTIFILE, or DATE, enter "n/a" in this column A hyphen is not counted as a character if it is included on the form for presentation purposes. It is counted if it is to be stored with the data.
Field Implementation	- Pre-formatted for your convenience.
Help Tip	Text that will be displayed when the applicant clicks on the help icon. Please compose the wording carefully, as this text will be used for the Accessibility text as well as the Help Tip. Use the following guidelines for creating help tips: - Start all help tips with "Enter the" or "Select the" or "Pre-populated from the" or "Click to select" - If the field is required, then the help tip should end with the statement "This field is required." Add "This field is required" to the end of global help tips if they are - If the field has a certain format, then the help tip should contain text describing the required format. - If a Radio Group is required, then the help tip on the Radio Group Header should state "One selection is required."
	List of Values Minimum # of Characters or Minimum Value Maximum # of Characters or Maximum Value Field Implementation

Form Name / Title	
Version Number 1.0 Version Date Description OMB Control Number 0610-0994 OMB Expiration Date XX/XX/20XX Form Family (select all that apply) X SF-424 Family (select all that apply) SF-424 R&R Family	
Version Date Description OMB Control Number 0610-0994 OMB Expiration Date XX/XX/20XX Form Family (select all that apply) X SF-424 Family SF-424 R&R Family	
Description 0610-0994 OMB Control Number 0610-0994 OMB Expiration Date XX/XX/20XX Form Family (select all that apply) X SF-424 Family SF-424 R&R Family	
OMB Control Number 0610-0994 OMB Expiration Date XX/XX/20XX Form Family (select all that apply) X SF-424 Family SF-424 R&R Family	
OMB Expiration Date XX/XX/20XX Form Family X SF-424 Family (select all that apply) SF-424 R&R Family	
OMB Expiration Date XX/XX/20XX Form Family X SF-424 Family (select all that apply) SF-424 R&R Family	
Form Family X SF-424 Family (select all that apply) SF-424 R&R Family	
(select all that apply) SF-424 R&R Family	
SE-424 Individual Family	
X SF-424 Mandatory Family	
SF-424 Short Organizational Family	
Form Category Cover Sheet	,
(select the most appropriate X Certification and Assurance	
category) Survey	
Budget Form	
Key Contacts and Personal Data	
Attachments	
Miscellaneous	

ADDITIONAL FORM REQUIREMENTS (not indicated on the FORM DAT)

Grants.gov Global Index

Click on an element name, data element group name, or general element format to view its DAT row template. Follow the instructions to copy and paste template rows into the Form DAT.

I. GLO	BAL DATA ELEMENTS	III. GENERAL DATA ELEMENT FORMATS
Agency Name	Employer/Taxpayer Identification Number (EIN/TIN)	<u>Alphanumeric</u>
<u>Applicant ID</u>	<u>Fax</u>	<u>Button</u>
CFDA Number	Federal Award Identifier	<u>Date</u>
CFDA Title	Federal Entity Identifier	Degree Earned
Congressional District: Applicant	Organization Name (Legal Name)	<u>Dollar Amount</u>
Congressional District: Program/Project	Phone Number	<u>Dollar Amount Total</u>
<u>Country</u>	<u>Project Name</u>	File Attachment - Single
<u>Department Name</u>	Project Title	<u>Optional</u> <u>Required</u>
<u>Division Name</u>	Social Security Number	File Attachment - Multiple
DUNS Number	<u>Title</u>	<u>Optional</u>
<u>Email</u>	Type of Applicant	Numeric
DATA ELEMENTS THAT CAN BE PRE	E-POPULATED FROM THE APPLICATION PACKAGE	with 2 decimals without decimals
Agency Name	Competition Identification Number	<u>Label</u>
CFDA Number	Competition Identification Title	<u>List - Drop Down (one selection from a drop-down list of values)</u>
CFDA Title	Funding Opportunity Number	<u>List - Checkbox (Check for yes. May select multiple options)</u>
	Funding Opportunity Title	List - Radio Group (one selection from a group of options)
DATA ELEMENTS THAT ARE POST-	POPULATED AFTER SUBMISSION TO GRANTS.GOV	<u>Optional</u> <u>Required</u>
AOR Signature		Percent
Date Received		with 2 decimals without decimals
Date Signed		<u>Year</u>
II. GLOBAL	DATA ELEMENT GROUPS	Yes/No Radio Group
Address Group	Street1, Street2, City, County, Province, State, Zip Code, Country	<u>Optional</u> <u>Required</u>
Human Name Group	Prefix, First Name, Middle Name, Last Name, Suffix	Yes/No/Other Radio Group
		Optional Required
		Yes/No/Not Applicable
		<u>Optional</u> <u>Required</u>

FORM TITLE:		ED-900A Additional Assurances	for Construc	tion or Non-	Construction											
[1]	[2]	[3]	[4]	[5]		[7]	[8]	[9]	[10]	[11]	[12]	[13]	[14]	[15]	[16]	[17]
Field #	Field Label	Short Field Label	Required?	Minimum Occurrenc es	Maximum Occurrence s	Agency Field Name	Field Type	Global Library Field Name	Field Type Source	Business Rules	Data Type	List of Values	Chars or	Max # of Chars or Max Value	Field Implementatio	Help Tip
1.0	OMB Number: 0610-0994 Expiration Date: XX/XX/20XX	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Label	n/a
1.1	·	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Label	n/a
2.0	For ALL investments: As a duly authorized representative of the applicant, I further certify that the applicant:	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Label	n/a
2.1	Understands that attorneys' or consultants' fees, whether direct or indirect, expended for securing or obtaining EDA investment assistance are not eligible costs. See 13 C.F.R. § 302.10(a).	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Label	n/a
	2. Understands that conflicts of interest or appearances of conflicts of interest are prohibited and may jeopardize this application or result in the forfeiture of investment funds. A conflict of interest occurs, for example, where a representative, official, employee, architect, attorney, engineer, or inspector of the applicant, or a representative or official of the federal, State or local government, has a direct or indirect financial interest in the acquisition or furnishing of any materials, equipment, or services to or in connection with the project. See 13 C.F.R. § 302.17.	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Label	n/a
2.3	3. Will comply with the reporting requirements under the Government Performance and Results Act (GPRA) of 1993 and the GPRA Modernization Act of 2010 (GPRAMA) for measuring and reporting project performance.		n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Label	n/a
3.0	For CONSTRUCTION investments: As a duly authorized representative of the applicant, I further certify that the applicant:	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Label	n/a
3.1	Will operate and maintain the facility in accordance with at least the minimum standards as may be required or prescribed by applicable federal, State and local agencies for the maintenance and operation of such facilities.	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Label	n/a
3.2	Will require the facility to be designed to comply with the Americans with Disabilities Act of 1990 (ADA) (42 U.S.C. 12101 et seq.), the Architectural Barriers Act of 1968 (42 U.S.C. 4151 et seq.) and the Accessibility Guidelines for Buildings and Facilities regulations, as amended (36 C.F.R. part 1191), and will be responsible for conducting inspections to insure compliance with these requirements.		n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Label	n/a
	3. For the two-year period beginning on the date EDA investment assistance is awarded, will refrain from employing, offering any office or employment to, or retaining for professional services any person who, on the date on which the investment assistance is awarded or within the one-year (1) period ending on that date, served as an officer, attorney, agent or employee of the Department of Commerce and occupied a position or engaged in activities that EDA determines involved discretion with respect to the award of investment assistance under PWEDA. See section 606 of PWEDA and 13 C.F.R. §302.10(b).		n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Label	n/a
	Will have no facilities under ownership, lease or supervision to be utilized in this project that are listed or under consideration for listing on EPA's List of Violating Facilities.		n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Label	n/a

3.5	5. Will comply with Executive Order 12699, "Seismic Safety of Federal and Federally Assisted or Regulated New Building Construction," which imposes requirements that federally-assisted facilities be designed and constructed in accordance with the most current local building codes determined by the awarding agency or by the Interagency Committee for Seismic Safety in Construction (ICSSC) and the most recent edition of the American National Standards Institute Standards A58, Minimum Design Loads for Buildings and Other Structures.		n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Label	n/a
3.6	Will observe and comply with federal procurement rules, as set forth in 2 C.F.R. part 200, as applicable, for award of any contracts for architectural engineering, grant administration services, or construction financed with EDA investment assistance		n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Label	n/a
4.0	For NON-CONSTRUCTION investments: As a duly authorized representative of the applicant, I further certify that the applicant:	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Label	n/a
4.1	Will comply with applicable regulations regarding indirect cost rates, if indirect costs are included in the application.		n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Label	n/a
4.2	Will comply with the requirement that this investment assistance will not provide a proprietary benefit to a private individual, for-profit corporation, or other commercial entity.	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Label	n/a
5.0	SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	AOR Signature	Yes	1	1	AORSignatu re	Post- Populated	globLib:Signa tureDataType	n/a	n/a	AN	n/a	1	144	Label	Completed by Grants.gov upon submission.
5.1	TITLE	Title of Authorized Certifying Official	Yes	1	1	AORTitle	Forward- populated		SF424 Block 21 Title and SF424 Mandatory Block 18 Title		AN	n/a	1	45	Field	Pre-populated from the SF 424. This field is required.
5.2	APPLICANT ORGANIZATION	Applicant Organization	Yes	1	1	ApplicantOrg anization	Forward- populated	nizationName DataType	SF424 Block 8A Legal Name and SF424 Mandatory Block 7a Legal Name	n/a	AN	n/a	1	60	Field	Pre-populated from the SF 424. This field is required.
5.3	DATE	Date	Yes	1	1	DateSigned	Post- Populated	n/a	n/a	n/a	DATE	n/a	n/a	n/a	Label	Completed by Grants.gov upon submission.

DATA ANALYSIS ROW TEMPLATES

INSTRUCTIONS: Listed below are Data Analysis row templates for data elements and formats defined in the Global Library. To copy into your DAT, select Edit, Copy from the menu at the top of the screen. Click on the FORM DAT tab at the bottom of the screen. Click on the row number you want to paste the template into. From the menu, select Edit, Paste. Use the instructions on the DAT INSTRUCTIONS tab as guidance for filling in all columns in red.

[1]	[2]	[3]	[4]	[5]	[6]	[7]	[8]	[9]	[10]	[11]	[12]	[13]	[14]	[15]	[16]	[17]
													Min # of	Max # of		
	Field	Short Field		Minimum	Maximum	Agency Field		Global Library	Field Type			List of		Chars or		
Field #	Label	Label	Required?	Occurrences	Occurrences	Name	Field Type	Field Name	Source	Business Rules	Data Type	Values	Min Value	Max Value	Implementation	Help Tip

GLOBAL DATA ELEMENTS

Fill In Unique #	Agency Name:	Agency Name	Fill In	Fill In	Fill In	AgencyName	Global or Forward-populated	globLib:AgencyNameDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	AN	n/a	Fill In	60	Field	Enter the name of the Federal Agency.
Fill In Unique #	Applicant ID:	Applicant ID	Fill In	Fill In	Fill In	ApplicantID	Global or Forward-populated	globLib:ApplicantIDDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	AN	n/a	Fill In	30	Field	Enter the applicant's control number (if applicable)
Fill In Unique #	CFDA Number:	CFDA Number	Fill In	Fill In	Fill In	CFDANumber	Global	globLib:CFDANumberDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	AN	n/a	Fill In	15	Field	Enter the Catalog of Federal Domestic Assistance number. The first two digits identify the Federal department or agency that administers the program, and the last three numbers are assigned in numerical sequence.
Fill In Unique #	CFDA/Program Title:	CFDA/Program Title	Fill In	Fill In	Fill In	CFDAProgramTitle	Global	globLib:CFDATitleDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	AN	n/a	Fill In	120	Field	Enter the Catalog of Federal Domestic Assistance program title.
Fill In Unique #	Congressional District: Applicant:	Applicant District	Fill In	Fill In	Fill In	CongressionalDistrictAp plicant	Global or Forward-populated	globLib:CongressionalDistrictDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	AN	n/a	Fill In	6	Field	Enter the Congressional District in the format: 2 character State Abbreviation - 3 character District Number. Examples: CA-005 for California's 5th district, CA-012 for California's 12th district. If outside the US, enter 00-000.
Fill In Unique #	Congressional District: Program/Project:	Program District	Fill In	Fill In	Fill In	CongressionalDistrictProgramProject	Global or Forward-populated	globLib:CongressionalDistrictDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	AN	n/a	Fill In	6	Field	Enter the Congressional District in the format: 2 character State Abbreviation - 3 character District Number. Examples: CA-005 for California's 5th district, CA-012 for California's 12th district. If all districts in a state are affected, enter "all" for the district number. Example: MD-all for all congressional districts in Maryland. If nationwide (all districts in all states), enter US-all. If the program/project is outside the US, enter 00-000.
Fill In Unique #	Country:	Country	Fill In	Fill In	Fill In	Country	Global or Forward-populated	globLib:CountryDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	LIST	ISO 3166 Country Code List	Fill In	49	Popup	Select the Country from the provided list. This field is required.
Fill In Unique #	Department Name:	Department Name	Fill In	Fill In	Fill In	DepartmentName	Global or Forward-populated	globLib:DepartmentNameDataType	If Field Type [8] = Forward-populated n/a then Fill In source, else n/a	AN	n/a	Fill In	30	Field	Enter the name of primary organizational department, service, laboratory, or equivalent level within the organization which will undertake the assistance activity.
Fill In Unique #	Division Name:	Division Name	Fill In	Fill In	Fill In	DivisionName	Global or Forward-populated	globLib:DivisionNameDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	AN	n/a	Fill In	30	Field	Enter the name of primary organizational division, office, or major subdivision which will undertake the assistance activity.
Fill In Unique #	DUNS Number:	DUNS Number	Fill In	Fill In	Fill In	DUNSNumber	Global or Forward-populated	globLib:DUNSIDDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a append '0000'	AN	n/a	9	13	Field	Enter the DUNS or DUNS+4 number of the applicant organization.
Fill In Unique #	Email:	Email	Fill In	Fill In	Fill In	Email	Global or Forward-populated	globLib:EmailDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	AN	n/a	Fill In	60	Field	Enter a valid Email Address.
Fill In Unique #	Employer/Taxpayer Identification Number (EIN/TIN):	EIN/TIN	Fill In	Fill In	Fill In	EmployerTaxpayerIdenti ficationNumber		globLib:EmployerIDDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	AN	n/a	9	30	Field	Enter either TIN or EIN as assigned by the Internal Revenue Service. If your organization is not in the US, enter 44-4444444
Fill In Unique #	Fax:	Fax	Fill In	Fill In	Fill In	Fax	Global or Forward-populated	globLib:TelephoneNumberDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	AN	n/a	Fill In	25	Field	Enter the Fax Number.

[1]	[2]	[3]	[4]	[5]	[6]	[7]	[8]	[9]	[10]	[11]	[12]	[13]	[14]	[15]	[16]	[17]
Field #	Field Label	Short Field Label	Required?	Minimum Occurrences	Maximum Occurrences	Agency Field Name	Field Type	Global Library Field Name	Field Type Source	Business Rules	Data Type	List of Values	Min # of Chars or Min Value	Max # of Chars or Max Value	Field Implementation	Help Tip
Fill In Unique #	Federal Award Identifier:	Federal Award Identifier	Fill In	Fill In	Fill In	FederalAwardIdentifier	Global or Forward-populated	globLib:ProjectAwardNumberDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	n/a	AN	n/a	Fill In	25		Enter the award number previously assigned by the Federal agency, if any.
Fill In Unique #	Federal Entity Identifier:	Federal Entity Identifier	Fill In	Fill In	Fill In	FederalEntityIdentifier	Global or Forward-populated	globLib:FederalIDDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	n/a	AN	n/a	Fill In	30		Enter the number assigned to your organization by the Federal agency.
Fill In Unique #	Organization Name (Legal Name):	Organization Name	Fill In	Fill In	Fill In	OrganizationName	Global or Forward-populated	globLib:OrganizationNameDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	n/a	AN	n/a	Fill In	60		Enter the legal name of the applicant that will undertake the assistance activity.

Fill In Unique #	Telephone Number:	Telephone Number	r Fill In	Fill In	Fill In	PhoneNumber	Global or Forward-populated	globLib:TelephoneNumberDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	n/a	AN	n/a	Fill In	25	Field	Enter the daytime Telephone Number. This field is required.
Fill In Unique #	Project Name:	Project Name	Fill In	Fill In	Fill In	ProjectName	Global or Forward-populated	globLib:ProjectNameDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	n/a	AN	n/a	Fill In	60	Field	Enter the name of the project.
Fill In Unique #	Project Title:	Project Title	Fill In	Fill In	Fill In	ProjectTitle	Global or Forward-populated	globLib:ProjectTitleDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	n/a	AN	n/a	Fill In	200	Field	Enter a brief, descriptive title of the project.
Fill In Unique #	Social Security Number :	Social Security Number	Fill In	Fill In	Fill In	SocialSecurityNumber	Global or Forward-populated	globLib:SocialSecurityNumberDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	SSN format validation	AN	n/a	11	11	Field	Enter a 9-digit Social Security Number. Disclosure of SSN is voluntary. Please see the application package instructions for the agency's authority and routine uses of the data.
Fill In Unique #	Title:	Title	Fill In	Fill In	Fill In	Title	Global or Forward-populated	globLib:HumanTitleDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	n/a	AN	n/a	Fill In	45	Field	Enter the position title.
Fill In Unique #	Type of Applicant:	Type of Applicant	Fill In	Fill In	Fill In	TypeofApplicant	Giobal or Forward-populated	globLib:ApplicantTypeCodeDataType	If Field Type [8] = Forward-populated then Fill in source, else n/a	n/a	LIST	A. State Government&& B. County Government&& C. City or Township Government&& C. City or Township Government&& C. City or Township Government&& E. Regional Organization&& E. Regional Organization&& G. Independent School District& H. Public/State Controlled Institution of Higher Education&& H. Public/State Controlled Institution of Higher Education&& Government (Federally Recognized)&& Government (Federally Recognized)& Government (Other than Federally Recognized)&& Government (Other than Federally Recognized)&& K. Indian/Native American Tribal&& Government (Other than Federally Recognized)&& K. Indian/Native American Tribal& Government (Other than Federally Recognized)&& N. Nongroff with 50t 218 TS Status (Other than Institution of Higher Education)&& O. Private Institution of Higher Education)& O. Private Institution of Higher Education,& P. Individual&& P. Individual&& P. Individual&& S. Hispanic-serving Institution&& S. Hispanic-serving Inst	15 if required	82	Рорир	Select the appropriate applicant type code.

DATA ELEMENTS THAT MAY BE PRE-POPULATED FROM THE APPLICATION PACKAGE

Fill In Unique #	Agency Name:	Agency Name	Yes	1 1	A	AgencyName	Pre-populated	globLib:AgencyNameDataType	SubmissionDef.AgencyName	n/a	AN	n/a	1	60	Field	Pre-populated from the Application cover sheet.
Fill In Unique #	CFDA Number:	CFDA Number	No	0 1	C	CFDANumber	Pre-populated	globLib:CFDANumberDataType	SubmissionDef.CFDANumber	n/a	AN	n/a	0	15	Field	Pre-populated from the Application cover sheet.
Fill In Unique #	CFDA/Program Title:	CFDA/Program Title	No	0 1	C	CFDAProgramTitle	Pre-populated	globLib:CFDATitleDataType	SubmissionDef.CFDATitle	n/a	AN	n/a	0	120	Field	Pre-populated from the Application cover sheet.
Fill In	Competition Identification Number:	Competition Number	No	0 1	C	CompetitionIdentification Number	Pre-populated	globLib:CompetitionIDDataType	SubmissionDef.field_CompetitionID	n/a	AN	n/a	1	40	Field	Pre-populated from the Application cover sheet.
Fill In Unique #	Competition Identification Title:	Competition Title	No	0 1	C	CompetitionIdentification Title	Pre-populated	globLib:CompetitionIDTitleDataType	SubmissionDef.field_CompetitionIDTitle	n/a	AN	n/a	1	255	Field	Pre-populated from the Application cover sheet.
Fill In Unique #	Funding Opportunity Number:	Opportuntity Number	Yes	1 1	F	FundingOpportunityNum per	Pre-populated	globLib:OpportunityIDDataType	SubmissionDef.OpportunityID	n/a	AN	n/a	1	40	Field	Pre-populated from the Application cover sheet. This field is required.
Fill In Unique #	Funding Opportunity Title:	Opportunity Title	Yes	1 1	F	-undingOpportunityTitle	Pre-populated	globLib:OpportunityTitleDataType	SubmissionDef.OpportunityIDTitle	n/a	AN	n/a	1	255	Field	Pre-populated from the Application cover sheet. This field is required.

[1]	[2]	[3]	[4]	[5]	[6]	[7]	[8]	[9]	[10]	[11]	[12]	[13]	[14]	[15]	[16]	[17]
													Min # of			
	Field Label	Short Field		Minimum	Maximum	Agency Field		Global Library Field Name	Field Type			List of	Chars or	Chars or	Field	
Field #	Label	Label	Required?	Occurrences	Occurrences	Name	Field Type	Field Name	Source	Business Rules	Data Type	Values	Min Value	Max Value	Implementation	Help Tip

DATA ELEMENTS THAT ARE POPULATED AFTER SUBMISSION TO GRANTS.GOV (POST-POPULATED)

Fill In Unique #	AOR Signature:	AOR Signature	Yes	1	1	AORSignature	Post-Populated	globLib:SignatureDataType	n/a	n/a	AN	n/a 1	-	144	Completed by Grants.gov upon submission.
Fill In Unique #	Date Received:	Date Received	Yes	1	1	DateReceived	Post-Populated	globLib:DateReceivedDataType	n/a	n/a	DATE	n/a n/a	ı	n/a	Completed by Grants.gov upon submission.
Fill In Unique #	Date Signed:	Date Signed	Yes	1	1	DateSigned	Post-Populated	globLib:DateSignedDataType	n/a	n/a	DATE	n/a n/a	ı	n/a	Completed by Grants.gov upon submission.

DATA ELEMENT GROUPS

Address Group

Fill In Unique #	Address Group Label	n/a	Fill In	Fill In	Fill In	Fill In	Global	globLib:AddressDataType	n/a	n/a	n/a	n/a	n/a	n/a	Label	Fill In or n/a
Fill In Unique #	Street1:	Street1	Yes	1	1	Street1	Global or Forward-populated	globLib:Street1	If Field Type [8] = Forward-populated then Fill In source, else n/a	n/a	AN	n/a	1	55	Field	Enter the first line of the Street Address. This field is required.
Fill In Unique #	Street2:	Street2	No	0	1	Street2	Global or Forward-populated	globLib:Street2	If Field Type [8] = Forward-populated then Fill In source, else n/a	n/a	AN	n/a	0	55	Field	Enter the second line of the Street Address.
Fill In Unique #	City:	City	Yes	1	1	City	Global or Forward-populated	globLib:City	If Field Type [8] = Forward-populated then Fill In source, else n/a	n/a	AN	n/a	1	35	Field	Enter the City. This field is required.
Fill In Unique #	County:	County	No	0	1	County	Global or Forward-populated	globLib:County	If Field Type [8] = Forward-populated then Fill In source, else n/a	n/a	AN	n/a	0	30	Field	Enter the County.
Fill In Unique #	State:	State	No	0	1	State	Global or Forward-populated	globLib:State	If Field Type [8] = Forward-populated then Fill In source, else n/a	Conditionally required if Country is US then active. If Country is not US, then inactive	LIST	50 US States, US possessions, territories, military codes	0	55	Popup	Select the state, US possession or military code from the provided list. This field is required if Country is the United States.
Fill In Unique #	Province:	Province	No	0	1	Province	Global or Forward-populated	globLib:Province	If Field Type [8] = Forward-populated then Fill In source, else n/a	If Country is US then inactive. If Country is not US, then active	AN	n/a	0	30	Field	Enter the Province.
Fill In Unique #	Country:	Country	Yes	1	1	Country	Global or Forward-populated	globLib:Country	If Field Type [8] = Forward-populated then Fill In source, else n/a	n/a	LIST	ISO 3166 Country Code List	1	49	Popup	Select the Country from the provided list. This field is required.
Fill In Unique #	Zip / Postal Code:	Zip / Postal Code	No	0	1	ZipCode	Global or Forward-populated	globLib:ZipPostalCode	If Field Type [8] = Forward-populated then Fill In source, else n/a	Conditionally required if Country is US then required. If Country is not US, then optional.	AN	n/a	0	30	Field	Enter the Postal Code (e.g., ZIP code). This field is required if Country is the United States.

Human Name Group

Fill In Unique #	Human Name Group Label	n/a	Fill In	Fill In	Fill In	Fill In	Global	globLib:HumanNameDataType	n/a	n/a	n/a	n/a	n/a	n/a	Label	Fill In or n/a
Fill In Unique #	Prefix:	Prefix	No	0	1	Prefix	Global or Forward-populated	globLib:PrefixName	If Field Type [8] = Forward-populated then Fill In source, else n/a	n/a	LIST	Mr.&&Mrs.&&Miss&&Ms.&&Dr.&&Rev. &&Prof.	0	10	Combobox	Select the Prefix from the provided list or enter a new Prefix not provided on the list.
Fill In Unique #	First Name:	First Name	Yes	1	1	FirstName	Global or Forward-populated	globLib:FirstName	If Field Type [8] = Forward-populated then Fill In source, else n/a	n/a	AN	n/a	1	35	Field	Enter the First Name. This field is required.
Fill In Unique #	Middle Name:	Middle Name	No	0	1	MiddleName	Global or Forward-populated	globLib:MiddleName	If Field Type [8] = Forward-populated then Fill In source, else n/a	n/a	AN	n/a	0	25	Field	Enter the Middle Name.
Fill In Unique #	Last Name:	Last Name	Yes	1	1	LastName	Global or Forward-populated	globLib:LastName	If Field Type [8] = Forward-populated then Fill In source, else n/a	n/a	AN	n/a	1	60	Field	Enter the Last Name. This field is required.
Fill In Unique #	Suffix:	Suffix	No	0	1	Suffix	Global or Forward-populated	globLib:SuffixName	If Field Type [8] = Forward-populated then Fill In source, else n/a	n/a	LIST	Jr.&&Sr.&&M.D.&&Ph.D	0	10	Combobox	Select the Suffix from the provided list or enter a new Suffix not provided on the list.

GENERAL DATA ELEMENT FORMATS

Fill In Unique #	ALPHANUMERIC field template Fill In Field Label	Fill In	Agency-specific	n/a	n/a	Fill In	AN	n/a	Fill In	Fill In	Field	Fill In				
Fill In Unique #	BUTTON template Fill In Button Label	Fill In	n/a	n/a	n/a	n/a	Agency-specific	n/a	n/a	Fill In	n/a	n/a	n/a	n/a	Button	Fill In
Fill In Unique #	DATE field template Fill In Field Label	Fill In	Agency-specific	n/a	n/a	Fill In	DATE	n/a	n/a	n/a	Field	Enter the date in the format MM/DD/YYYY.				
Fill In Unique #	DEGREE EARNED template Fill In Field Label	Fill In	Global	globLib:EducationDegreeDataType	n/a	Fill In	AN	n/a	Fill In	50	Field	Enter the highest degree earned.				
Fill In Unique #	DOLLAR AMOUNT template Fill In Field Label	Fill In	Agency-specific	globLib:BudgetAmountDataType	n/a	Fill In	\$	n/a	0.00	999999999999999999999999999999999999999	Field	Enter the dollar amount.				

[1]	[2]	[3]	[4]	[5]	[6]	[7]	[8]	[9]	[10]	[11]	[12]		[13]	[14] Min # of	[15]	[16]	[17]
Field #	Field Label	Short Field Label	Required?	Minimum Occurrences	Maximum Occurrences	Agency Field Name	Field Type	Global Library Field Name	Field Type Source	Business Rules	Data Type		List of Values	Min # of Chars or Min Value	Max # of Chars or Max Value	Field Implementation	Help Tip
Unique # temp	LAR AMOUNT TOTA plate n Field Label	AL Fill In	Fill In	Fill In	Fill In	Fill In		globLib:BudgetTotalAmountDataType	n/a	Fill In	\$	n/a		0.00	###	Field	Enter the total dollar amount.
Fill In FILE Unique # temp	ATTACHMENT	Fill In	No	0	1	Fill In	Global	att:AttachedFileDataType	n/a	Fill In	FILE	n/a		n/a	n/a	Single_File	Attach a file using the appropriate buttons.
Fill In FILE Unique # temp		Fill In	Yes	1	1	Fill In	Global	att:AttachedFileDataType	n/a	Fill In	FILE	n/a		n/a	n/a	Single_File	Attach a file using the appropriate buttons. This attachment is required.
Fill In MUL	n Field Label TIPLE FILE ACHMENT	Fill In	No	0	1	Fill In	Global	att:AttachmentGroupMin0Max100DataTy	n/a	Fill In	MULTIFILE	n/a		n/a	n/a	Multi_file	Attach file(s) using the appropriate buttons.
	n Field Label							he									buttoris.
Unique # DECI field t	MERIC WITHOUT CIMALS template n Field Label	Fill In	Fill In	Fill In	Fill In	Fill In	Agency-specific	n/a	n/a	Fill In	INTEGER	n/a		Fill In	Fill In	Field	Fill In
Unique # DECI	MERIC WITH IMALS I template	Fill In	Fill In	Fill In	Fill In	Fill In	Agency-specific	n/a	n/a	Fill In	DECIMAL(2)	n/a		Fill In	Fill In	Field	Fill In
Fill In LABE	EL template n Label from form	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a		n/a	n/a	Label	Fill In or n/a
Fill In LIST	field template	Fill In	Fill In	Fill In	Fill In	Fill In	Agency-specific	n/a	n/a	Fill In	LIST	Fill In		Fill In	Fill In	Popup	Fill In
Fill In CHE	CKBOX template n Option 1 Field Labe	Fill In	Fill In	Fill In	Fill In	Fill In	Agency-specific	globLib:YesNoDataType	n/a	Fill In	n/a	n/a		n/a	n/a	Check	Check to select.
Fill In Unique # CHEC	CKBOX template n Option 2 Field Labe	Fill In	Fill In	Fill In	Fill In	Fill In	Agency-specific	globLib:YesNoDataType	n/a	Fill In	n/a	n/a		n/a	n/a	Check	Check to select.
RADIO GROUP	OPTIONAL															1	
Fill In RADI	IO GROUP HEADER	R Fill In	No	0	1	Fill In	Radio Group	n/a	Fill in Radio Group Name (may be same as Field Label)	Fill In	LIST	n/a		n/a	n/a	Radio Group	Fill in or n/a
Fill In Fill in	n Radio Group on 1 Label	Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	n/a		n/a	n/a	Radio	Select this option.
Fill In Fill in	n Radio Group on 2 Label	Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	n/a		n/a	n/a	Radio	Select this option.
RADIO GROUP							_										,
Fill In RADI Unique # Fill In	IO GROUP HEADER n Radio Group Label	R Fill In	Yes	1	1	Fill In	Radio Group	n/a	Fill in Radio Group Name (may be same as Field Label)	Fill In	LIST	n/a		n/a	n/a	Radio Group	One selection is required.
Unique # Optio	n Radio Group on 1 Label	Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	n/a		n/a	n/a	Radio	Select this option.
Fill In Fill in Option	n Radio Group on 2 Label	Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	n/a		n/a	n/a	Radio	Select this option.
		I	I=	I=	I				Τ.		I===	Ι,				I=	I=
Unique # DECI	CENT WITH IMALS n Field Label	Fill In	Fill In	Fill In	Fill In	Fill In	Agency-specific	globLib:PercentDecimalDataType	n/a	Fill In	DECIMAL(2)	n/a		0.00	100.00	Field	Enter in the percentage with decimals.
Unique # DECI	CENT WITHOUT CIMALS In Field Label	Fill In	Fill In	Fill In	Fill In	Fill In	Agency-specific	globLib:PercentIntegerDataType	n/a	Fill In	INTEGER	n/a		0	100	Field	Enter in the percentage as a whole number.
	R field template n Field Label	Fill In	Fill In	Fill In	Fill In	Fill In	Agency-specific	n/a	n/a	Fill In	YEAR	n/a		4	4	Field	Fill In
YES/NO OPTION															1		,
Unique # HEAI	/NO RADIO GROUP .DER n Field Label	Fill In	No	0	1	Fill In	Radio Group	globLib:YesNoDataType	Fill in Radio Group Name (may be same as Field Label)	n/a	LIST	n/a		n/a	n/a	Radio Group	Fill in or n/a
Fill In Yes Unique #		Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	Yes		n/a	n/a	Radio	Select this option for Yes.
Fill In No Unique #		Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	No		n/a	n/a	Radio	Select this option for No.
YES/NO REQUI							_										,
Unique # HEAI	/NO RADIO GROUP .DER n Field Label	Fill In	Yes	1	1	Fill In	Radio Group	globLib:YesNoDataType	Fill in Radio Group Name (may be same as Field Label)	n/a	LIST	n/a		n/a	n/a	Radio Group	A selection is required.
Fill In Yes Unique #		Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	Yes		n/a	n/a	Radio	Select this option for Yes.
Fill In No Unique #		Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	No		n/a	n/a	Radio	Select this option for No.
YES/NO/OTHER	R OPTIONAL																
Fill In YES/ Unique # GRO	/NO/OTHER RADIO DUPHEADER n Field Label	Fill In	No	0	1	Fill In	Radio Group	globLib:YesNoOtherDataType	Fill in Radio Group Name (may be same as Field Label)	n/a	LIST	n/a		n/a	n/a	Radio Group	Fill in or n/a

[1]	[2]	[3]	[4]	[5]	[6]	[7]	[8]	[9]	[10]	[11]	[12]	[13]	[14]	[15]	[16]	[17]
Field #	Field Label	Short Field Label	Required?	Minimum Occurrences	Maximum Occurrences	Agency Field Name	Field Type	Global Library Field Name	Field Type Source	Business Rules	Data Type	List of Values	Min # of Chars or Min Value	Max # of Chars or Max Value	Field Implementation	Help Tip
Fill In Unique #	Yes	Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	Yes	n/a	n/a	Radio	Select this option for Yes.
Fill In Unique #	No	Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	No	n/a	n/a	Radio	Select this option for No.
Fill In Unique #	Other	Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	Other	n/a	n/a	Radio	Select this option for Other.
YES/NO/	OTHER REQUIRED															
Fill In Unique #	YES/NO/OTHER RADIO GROUP HEADER Fill In Field Label	Fill In	Yes	1	1	Fill In	Radio Group	globLib:YesNoOtherDataType	Fill in Radio Group Name (may be same as Field Label)	n/a	LIST	n/a	n/a	n/a	Radio Group	A selection is required.
Fill In Unique #	Yes	Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	Yes	n/a	n/a	Radio	Select this option for Yes.
Fill In Unique #	No	Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	No	n/a	n/a	Radio	Select this option for No.
Fill In Unique #	Other	Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	Other	n/a	n/a	Radio	Select this option for Other.
YES/NO/	NOT APPLICABLE OPTION	AL														
Fill In Unique #	YES/NO/NA RADIO GROUP HEADER Fill In Field Label	Fill In	No	0	1	Fill In	Radio Group	globLib:YesNoNotApplicableDataType	Fill in Radio Group Name (may be same as Field Label)	n/a	LIST	n/a	n/a	n/a	Radio Group	Fill in or n/a
Fill In Unique #	Yes	Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	Yes	n/a	n/a	Radio	Select this option for Yes.
Fill In Unique #	No	Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	No	n/a	n/a	Radio	Select this option for No.
Fill In Unique #	Not Applicable	Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	Not Applicable	n/a	n/a	Radio	Select this option for Not Applicable.
YES/NO/	NOT APPLICABLE REQUIR	ED	•		•			•		•	•			•		•
Fill In Unique #	YES/NO/NA RADIO GROUP HEADER Fill In Field Label	Fill In	Yes	1	1	Fill In	Radio Group	globLib:YesNoNotApplicableDataType	Fill in Radio Group Name (may be same as Field Label)	n/a	LIST	n/a	n/a	n/a	Radio Group	A selection is required.
Fill In Unique #	Yes	Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	Yes	n/a	n/a	Radio	Select this option for Yes.
Fill In Unique #	No	Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	No	n/a	n/a	Radio	Select this option for No.
Fill In Unique #	Not Applicable	Fill In	No	0	1	n/a	Radio Group	n/a	Fill in Radio Group Name	Fill In	n/a	Not Applicable	n/a	n/a	Radio	Select this option for Not Applicable.
ander a	1	1	-	1	1	1	1	1	1	1	-	1	I	1	1	