

# 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 File, Print 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 guidance.
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 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.

### **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.
[I]	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.)
[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?	<ul style="list-style-type: none"> <li>- Enter "Yes" if the field must be completed before the application can be submitted.</li> <li>- If the field is optional, conditional, or "Required if" then enter "No" in this column.</li> <li>- If the field is calculated (see BUSINESS RULES [11]) and all fields involved in the calculation are optional, enter "No" in this column.</li> <li>- 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.</li> <li>- 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, the destination field is optional, if the source field is mandatory, the destination field is mandatory).</li> </ul>
[5]	Minimum Occurrences	<ul style="list-style-type: none"> <li>- The minimum number of entries that can be made for the same field.</li> <li>- Enter 0 if the field is optional.</li> <li>- Enter 1 or more if the field must be completed before the application can be submitted.</li> </ul>
[6]	Maximum Occurrences	<ul style="list-style-type: none"> <li>- The maximum number of entries that can be made for the same field.</li> <li>- Must be 1 or more.</li> </ul>
[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	<p>Select one from the following 5 options:</p> <ul style="list-style-type: none"> <li>Pre-populated - Field will be populated with data from the application package. See Global Index Section II for a list of qualifying fields.</li> <li>Post-populated - Field will be populated in a form after submission to Grants.gov. See the Global Index Section III for a list of qualifying fields.</li> <li>Forward-populated - Field will be populated with data from the application cover page (e.g., SF424, SF424 (R&amp;R)) or - Field will be populated with data entered earlier in the form.</li> <li>Global - Field is a global data element that is not forward-populated or a global data element group.</li> <li>Agency Specific - Field is unique to your agency. Enter values in ALL columns in this DAT as indicated by the instructions.</li> <li>Radio Group - Agency-specific field that displays a limited set of alternatives. Applicant has the option of selecting one value.</li> </ul>
[9]	Global Library Field Name	- Pre-formatted for your convenience. No action required.
[10]	Field Type Source	<ul style="list-style-type: none"> <li>If Pre-populated - Pre-formatted for your convenience. No action required.</li> <li>If Post-Populated - Pre-formatted for your convenience. No action required.</li> <li>If Forward-Populated - If "Forward-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 &lt;form name&gt;-&lt;block #&gt;-&lt;field #&gt; (e.g. SF424-6-1.)</li> <li>If Global - If "Global" was selected in Field Type [8] column, enter n/a.</li> <li>If Agency Specific - Pre-formatted for your convenience. No action required.</li> <li>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</li> </ul>
[11]	Business Rules	<p>Simple rules about the field, such as:</p> <ul style="list-style-type: none"> <li>- 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.</li> <li>- Is a calculation required for this field (e.g., Total = 15-1 + 15-2 + 15-3 + 15-4)</li> <li>- Is this field conditionally required (e.g., Required if 3-1 is Yes)</li> <li>- NOTE: Grants.gov does not enforce business rules across forms.</li> <li>- Enter n/a if there are no business rules for the field.</li> </ul>
[12]	Data Type	- Pre-formatted for your convenience. No action required.

## FORM ELEMENTS

COLUMN	COLUMN NAME	COLUMN DEFINITION
[13]	<b>List of Values</b>	<ul style="list-style-type: none"> <li>- If the Data Type [12] is LIST, provide a list of values that you want to be given to the user.</li> <li>- The format of each list item should be &lt;id&gt;: &lt;description&gt;. Use &amp;&amp; to separate each value (e.g. MD: Maryland&amp;&amp; VA: Virginia)</li> <li>- For Minimum # of Characters [14] and Maximum # of Characters [15], enter the character count for the shortest and longest values in the list</li> <li>- 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.</li> <li>- Enter n/a if a list of values does not apply.</li> <li>- 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.</li> </ul>
[14]	<b>Minimum # of Characters or Minimum Value</b>	<ul style="list-style-type: none"> <li>- 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.</li> <li>- 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.)</li> <li>- If the Data Type [12] is LIST, FILE, MULTIFILE or DATE, enter "n/a" in this column.</li> <li>- 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.</li> </ul>
[15]	<b>Maximum # of Characters or Maximum Value</b>	<ul style="list-style-type: none"> <li>- If the Data Type [12] is AN, enter the maximum number of characters that may be entered into a field (maximum field length.)</li> <li>- 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.)</li> <li>- If the Data Type [12] is LIST, FILE, MULTIFILE, or DATE, enter "n/a" in this column.</li> <li>- 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.</li> </ul>
[16]	<b>Field Implementation</b>	<ul style="list-style-type: none"> <li>- Pre-formatted for your convenience.</li> </ul>
[17]	<b>Help Tip</b>	<p>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:</p> <ul style="list-style-type: none"> <li>- Start all help tips with "Enter the..." or "Select the..." or "Pre-populated from the..." or "Click to select..."</li> <li>- 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</li> <li>- If the field has a certain format, then the tip should contain text describing the required format.</li> <li>- If a Radio Group is required, then the help tip on the Radio Group Header should state "One selection is required."</li> </ul>

<b>FORM INFORMATION</b>	
<b>Form Name / Title</b>	ED-900P Proposal for EDA Assistance
<b>Form Number</b>	ED 900P
<b>Version Number</b>	1.0
<b>Version Date</b>	
<b>Description</b>	
<b>OMB Control Number</b>	0610-0994
<b>OMB Expiration Date</b>	XX/XX/20XX
<b>Form Family</b> <i>(select all that apply)</i>	<input checked="" type="checkbox"/> SF-424 Family
	<input type="checkbox"/> SF-424 R&R Family
	<input type="checkbox"/> SF-424 Individual Family
	<input checked="" type="checkbox"/> SF-424 Mandatory Family
	<input type="checkbox"/> SF-424 Short Organizational Family
<b>Form Category</b> <i>(select the most appropriate category)</i>	<input type="checkbox"/> Cover Sheet
	<input type="checkbox"/> Certification and Assurance
	<input type="checkbox"/> Survey
	<input type="checkbox"/> Budget Form
	<input type="checkbox"/> Key Contacts and Personal Data
	<input type="checkbox"/> Attachments
	<input checked="" type="checkbox"/> Miscellaneous
<b>ADDITIONAL FORM REQUIREMENTS <i>(not indicated on the FORM DAT)</i></b>	

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

FORM TITLE: ED-900P Proposal for EDA Assistance

[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
0.1	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
0.2	<b>ED-900P – Proposal for EDA Assistance</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	n/a	Label	n/a
0.2	Please answer all questions completely and accurately and provide a concise narrative statement for each of the questions below. Should you choose to submit the information in a separate document, the proposal narrative should be no more than five (5) pages in length. Please refer to the form instructions for additional information on each section. Applicants are encouraged to contact an EDA representative for assistance in preparing this proposal.	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
1.0	<b>I. All Projects</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	n/a	Label	n/a
1.A	<b>A. General Information</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	n/a	Label	n/a
1.A.0	Please identify all applicants for this project:	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.A.0.1.1	Name	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.A.0.1.2	SAM.gov CAGE Code	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.A.0.1.3	SAM.gov Registration Expiration Date	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.A.0.2.1	Lead 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
1.A.0.2.2	n/a	Lead Applicant	Yes	1	1	ApplicantName	Forward-populated	globLib:OrganizationName DataType	SF424 Block 8a Legal Name or SF424_Mandatory Block 7a Legal Name	n/a	AN	n/a	1	60	Field	Pre-populated from the SF-424. This field is required.
1.A.0.2.3	n/a	SAM.gov CAGE Code	Yes	1	1	SAMgovCAGECode	Agency-specific	n/a	n/a	n/a	AN	n/a	5?	5?	Field	Enter the 5 digit SAM.gov CAGE Code. This field is required.
1.A.0.2.4	n/a	SAM.gov Registration Expiration Date	Yes	1	1	SAMgovRegistrationExpirationDate	Agency-specific	n/a	n/a	n/a	DATE	n/a	n/a	n/a	Field	Enter the date in the format MM/DD/YYYY. This field is required.
1.A.0.3.1	X	Delete Co-Applicant	n/a	n/a	n/a	n/a	Agency-specific	n/a	n/a	Deletes this row. This button will only be enabled if more than one row has been added.	n/a	n/a	n/a	n/a	Button	Click to delete this row.
1.A.0.3.2	Co-Applicant 1	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Number '1' will change as appropriate for each row.	n/a	n/a	n/a	n/a	Label	n/a
1.A.0.3.3	n/a	Co-Applicant	No	0	5	ApplicantName	Global	globLib:OrganizationName DataType	n/a	Required if any data is entered in row.	AN	n/a	0	60	Field	Enter the Co-Applicant. This field is required for each entry.
1.A.0.3.4	n/a	SAM.gov CAGE Code	No	0	5	SAMgovCAGECode	Agency-specific	n/a	n/a	Required if any data is entered in row. Must be 5 digits, allow numerical digits only (0-9).	AN	n/a	0	5	Field	Enter the 5 digit SAM.gov CAGE Code. This field is required for each entry.
1.A.0.3.5	n/a	SAM.gov Registration Expiration Date	No	0	5	SAMgovRegistrationExpirationDate	Agency-specific	n/a	n/a	Required if any data is entered in row.	DATE	n/a	n/a	n/a	Field	Enter the date in the format MM/DD/YYYY. This field is required for each entry.
1.A.0.4	Add Co-Applicant	Add Co-Applicant	n/a	n/a	n/a	n/a	Agency-specific	n/a	n/a	Clicking will add one row, button is disabled if 5 rows have already been added.	n/a	n/a	n/a	n/a	Button	Click to add a row.
1.A.1	1. Description of applicant and co-applicants	Description of Applicant	Yes	1	1	ApplicantDescription	Agency-specific	n/a	n/a	3 paragraphs.	AN	n/a	1	1500	Field	Describe applicant and co-applicants. This field is required.
1.A.2	2. Description of the region	Description of the Region	Yes	1	1	RegionDescription	Agency-specific	n/a	n/a	3 paragraphs.	AN	n/a	1	1500	Field	Describe the region. This field is required.
1.A.3	3. Description of complete EDA project	Description of EDA Project	Yes	1	1	EDAProjectDescription	Agency-specific	n/a	n/a	1.5 pages.	AN	n/a	1	6000	Field	Describe the complete EDA project. This field is required.
1.A.4	4. Need for the project	Need for the Project	Yes	1	1	ProjectNeed	Agency-specific	n/a	n/a	1 page.	AN	n/a	1	4000	Field	Enter the need for the project. This field is required.
1.A.5	5. Basis of economic distress cited for eligibility	Basis of Economic Distress	Yes	1	1	Basis	Agency-specific	n/a	n/a	3 paragraphs.	AN	n/a	1	1500	Field	Enter the basis of economic distress cited for eligibility. This field is required.
1.A.6	6. Description of documentable impact	Documentable Impact	Yes	1	1	DocumentableImpact	Agency-specific	n/a	n/a	1 page.	AN	n/a	1	4000	Field	Describe the documentable impact. This field is required.
1.A.7	7. Funding and cost share matrix	Funding and Cost Share Matrix	Yes	1	1	Funding	Agency-specific	n/a	n/a	1 page.	AN	n/a	1	4000	Field	Enter the funding and cost share matrix. This field is required.
1.A.8	8. Description of any known environmental concerns or public controversy	Known Environmental Concerns	Yes	1	1	EnvironmentalConcerns	Agency-specific	n/a	n/a	3 paragraphs.	AN	n/a	1	1500	Field	Describe any known environmental concerns or public controversy. This field is required.

1.A.9	9. Have you reviewed and considered the federal regulations that govern EDA awards, including EDA's regulations at 13 C.F.R. Chapter III and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards at 2 C.F.R. Part 200?	Federal Regulations	Yes	1	1	FederalRegulations	Radio Group	globLib:YesNoDataType	FederalRegulations	n/a	LIST	n/a	n/a	n/a	Radio Group	Have you reviewed and considered the federal regulations that govern EDA awards, including EDA's regulations at 13 C.F.R. Chapter III and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards at 2 C.F.R. Part 200? This field is required.
1.A.9.1	Yes	Yes	No	0	1	n/a	Radio Group	n/a	FederalRegulations	n/a	n/a	Yes	n/a	n/a	Radio	Select this option.
1.A.9.2	No	No	No	0	1	n/a	Radio Group	n/a	FederalRegulations	n/a	n/a	No	n/a	n/a	Radio	Select this option.
2.0	<b>II. Construction Projects and Design and Engineering Only Projects</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	n/a	Label	n/a
2.A	<b>A. Property Requirements</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	n/a	Label	n/a
2.A.1	1. Briefly describe plans for the ownership, operation, maintenance and management of project facilities, including any land, improved land, structures, appurtenances thereto, other improvements or personal property.	Describe Plans	No	0	1	DescribePlans	Agency-specific	n/a	n/a	1 page.	AN	n/a	0	4000	Field	Briefly describe plans for the ownership, operation, maintenance and management of project facilities, including any land, improved land, structures, appurtenances thereto, other improvements or personal property.
2.A.2	2. Will real property or project facilities to be acquired or improved with the EDA investment assistance be owned, operated, managed or maintained by an entity other than the proponent?	Other Entity	No	0	1	OtherEntity	Radio Group	globLib:YesNoDataType	OtherEntity	n/a	LIST	n/a	n/a	n/a	Radio Group	Will real property or project facilities to be acquired or improved with the EDA investment assistance be owned, operated, managed or maintained by an entity other than the proponent?
2.A.2.1	Yes (explain below)	Yes (explain below)	No	0	1	n/a	Radio Group	n/a	OtherEntity	n/a	n/a	Yes	n/a	n/a	Radio	Select this option.
2.A.2.2	No	No	No	0	1	n/a	Radio Group	n/a	OtherEntity	n/a	n/a	No	n/a	n/a	Radio	Select this option.
2.A.2.3	n/a	Explanation	No	0	1	OtherEntityExplanation	Agency-specific	n/a	n/a	Required if OtherEntity is Yes, otherwise disabled. 3 paragraphs.	AN	n/a	0	1500	Field	If Yes, enter explanation.
2.A.3	3. Is or was any real property connected to the proposed project subject to eminent domain proceedings?	Eminent Domain	No	0	1	EminentDomain	Radio Group	globLib:YesNoDataType	EminentDomain	n/a	LIST	n/a	n/a	n/a	Radio Group	Is or was any real property connected to the proposed project subject to eminent domain proceedings?
2.A.3.1	Yes (Explain below)	Yes (Explain below)	No	0	1	n/a	Radio Group	n/a	EminentDomain	n/a	n/a	Yes	n/a	n/a	Radio	Select this option.
2.A.3.2	No	No	No	0	1	n/a	Radio Group	n/a	EminentDomain	n/a	n/a	No	n/a	n/a	Radio	Select this option.
2.A.3.3	n/a	Explanation	No	0	1	EminentDomainExplanation	Agency-specific	n/a	n/a	Required if EminentDomain is Yes, otherwise disabled. 3 paragraphs.	AN	n/a	0	1500	Field	If Yes, enter explanation.
2.B	<b>B. Environmental Requirements</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	n/a	Label	n/a
2.B.1	1. Briefly describe the project site's physical attributes, including a description of any known sensitive environmental areas.	Physical Attributes	No	0	1	PhysicalAttributes	Agency-specific	n/a	n/a	1 page.	AN	n/a	0	4000	Field	Briefly describe the project site's physical attributes, including a description of any known sensitive environmental areas.
2.B.2	2. Attach maps of the project site (such as Google maps or other readily available maps) with project components and beneficiaries clearly indicated.	Maps of Project Site	No	0	1	Maps	Global	att:AttachedFileDataType	n/a	n/a	FILE	n/a	n/a	n/a	Single_File	Attach maps of the project site (such as Google maps or other readily available maps) with project components and beneficiaries clearly indicated.

2.B.3	3. Has an Environmental Impact Statement, Environmental Assessment, or other similar analysis been completed for this proposed project or for other activities in the region?	Environmental Impact Statement	No	0	1	EnvironmentallmpactStatement	Radio Group	globLib:YesNoDataType	EnvironmentallmpactStatement	n/a	LIST	n/a	n/a	n/a	Radio Group	Has an Environmental Impact Statement, Environmental Assessment, or other similar analysis been completed for this proposed project or for other activities in the region?
2.B.3.1	Yes (provide the date/name of organization that completed the analysis)	Yes (provide the date/name of organization that completed the analysis)	No	0	1	n/a	Radio Group	n/a	EnvironmentallmpactStatement	n/a	n/a	Yes	n/a	n/a	Radio	Select this option.
2.B.3.2	No	No	No	0	1	n/a	Radio Group	n/a	EnvironmentallmpactStatement	n/a	n/a	No	n/a	n/a	Radio	Select this option.
2.B.3.3	Date	Date	No	0	1	DateCompleted	Agency-specific	n/a	n/a	Required if EnvironmentallmpactStatement is Yes, otherwise disabled.	DATE	n/a	n/a	n/a	Field	Enter the date the analysis was completed.
2.B.3.4	Organization Name	Organization Name	No	0	1	Organization Name	Global	globLib:OrganizationNameDataType	n/a	Required if EnvironmentallmpactStatement is Yes, otherwise disabled.	AN	n/a	0	60	Field	Enter the name of organization that completed the analysis.
3	<b>Instructions for Form ED-900P</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	n/a	Label	n/a
3.1.0	<b>I. All Projects</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	n/a	Label	n/a
3.1.A	<b>A. General Information</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	n/a	Label	n/a
3.1.A.1	<b>1. Description of applicant and co-applicants</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	n/a	Label	n/a
3.1.A.1.1	Identify and describe entities responsible for the proposed project, including, for construction projects, any entity that will own, operate, maintain or manage project facilities, including any land, improved land, structures, and appurtenances thereto.	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.A.2	<b>2. Description of the region</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	n/a	Label	n/a
3.1.A.2.1	Describe the region where the project will be located, including the specific geographic location of the project within the region. Briefly describe the economic conditions of the region where the project will be located—for example, the economic adjustment problems or severity of the economic dislocations the region has experienced or is about to experience.	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.A.3	<b>3. Description of complete EDA project</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	n/a	Label	n/a
3.1.A.3.1	Describe the complete scope of work and the components of the proposed investment. The description of the proposed project should include a clear statement of the overall purpose of the project as well as information about new development resulting from the EDA project or proposed by any identified beneficiary.	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.A.4	<b>4. Need for the project</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	n/a	Label	n/a
3.1.A.4.1	Briefly describe the economic development needs that will be met by the proposed investment, including how the proposed investment will address the economic distress identified in question A.7. Applicants must clearly detail how the proposed project will support the economic development needs and objectives outlined in the Comprehensive Economic Development Strategy (CEDS) or alternate EDA-approved strategic planning document capable of meeting EDA's CEDS or strategy requirements. The applicants should also highlight any instances where the proposed project will integrate or further leverage other federal support. This could include complementing projects funded through other grant programs (i.e. TIGER, CDBG). If EDA does not already have the applicable plan, the applicant may be required to provide it. Additional information and a summary of EDA's CEDS and strategy requirements may be obtained through your EDA representative.	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.A.5	<b>5. Basis of economic distress cited for eligibility</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	n/a	Label	n/a

3.1.A.5.1	Identify the region that will be used as a basis for eligibility and under which distress criterion or criteria the project qualifies:	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	n/a	n/a	n/a
3.1.A.5.1.a	<b>a. Unemployment rate:</b> The project is located in a region that has an unemployment rate that is, for the most recent 24-month period for which data are available, at least one percentage point above the national unemployment rate.	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	n/a	n/a	n/a
3.1.A.5.1.b	<b>b. Per capita income:</b> The project is located in a region that has a per capita income that is, for the most recent period for which data are available, 80 percent or less of the national average per capita income.	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	n/a	n/a	n/a
3.1.A.5.1.c	<b>c. Special need:</b> The project is located in a region that has experienced or is about to experience a "Special Need" (as defined in 13 C.F.R. § 300.3) arising from actual or threatened severe unemployment or economic adjustment problems resulting from severe short-term or long-term changes in economic conditions. See applicable FFO for Special Need Criteria.	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	n/a	n/a	n/a
3.1.A.6	<b>6. Description of documentable impact</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	n/a	n/a	n/a	n/a
3.1.A.6.1	Clearly describe the long-term potential economic impact of the proposed project including jobs created or saved and private investment to be leveraged by the proposed project.	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	n/a	n/a	n/a
3.1.A.7	<b>7. Funding and cost share matrix</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	n/a	n/a	n/a	n/a
3.1.A.7.1	Identify the source, nature and amount of all non-EDA funds/financing for the proposed project. Identify any entity providing cost share regardless of status as an applicant or co-applicant. Explain the status of funding commitments including when the funds will be available and describe any conditions or restrictions on the use of such funds.	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	n/a	n/a	n/a
3.1.A.8	<b>8. Description of any known environmental concerns or public controversies</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	n/a	n/a	n/a	n/a
3.1.A.8.1	Please identify or disclose information relative to any known public controversy in relation to the proposed project, project location or identified beneficiaries. If applicable, please also describe any known environmental concerns in relation to the project location and the location of any identified beneficiary.	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	n/a	n/a	n/a
3.1.A.9	<b>9. Have you reviewed and considered the federal regulations that govern EDA awards, including EDA's regulations at 13 C.F.R. Chapter III and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards at 2 C.F.R. Part 200?</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	n/a	n/a	n/a	n/a
3.1.A.9.1	Please respond Yes or No. A link to EDA's regulations may be found on EDA's website at <a href="http://www.eda.gov">www.eda.gov</a> ; the Code of Federal Regulations may be found at <a href="http://www.ecfr.gov">www.ecfr.gov</a> .	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Clicking on links should open URLs.	n/a	n/a	n/a	n/a	n/a	n/a	n/a
3.2.0	<b>II. Construction Projects and Design and Engineering Only Projects</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	n/a	n/a	n/a	n/a
3.2.A	<b>A. Property Requirements</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	n/a	n/a	n/a	n/a
3.2.A.1	<b>1. Briefly describe plans for the ownership, operation, maintenance and management of project facilities, including any land, improved land, structures, appurtenances thereto, other improvements or personal property.</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	n/a	n/a	n/a	n/a
3.2.A.1.1	Describe who will own, operate, maintain and manage the project facilities, including any land, improved land, structures, appurtenances thereto, other improvements or personal property related to the project.	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	n/a	n/a	n/a

3.2.A.2	<b>2. Will real property or project facilities to be acquired or improved with the EDA investment assistance be owned, operated, managed or maintained by an entity other than the proponent?</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	n/a	n/a	Label	n/a
3.2.A.2.1	Please respond Yes or No. If Yes, please identify who will own, operate, or maintain the project facilities and that entity's relationship, if any, to the proponent. See 13 C.F.R. § 314.7.	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	n/a	Label	n/a
3.2.A.3	<b>3. Is or was any real property connected to the proposed project subject to eminent domain proceedings?</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	n/a	n/a	Label	n/a
3.2.A.3.1	Please respond Yes or No. If Yes, please briefly describe the eminent domain proceedings, including date of acquisition and identified rationale for the action.	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	n/a	Label	n/a
3.2.B	<b>B. Environmental Requirements</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	n/a	n/a	Label	n/a
3.2.B.1	<b>1. Briefly describe the project site's physical attributes, including a description of any known sensitive environmental areas.</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	n/a	n/a	Label	n/a
3.2.B.1.1	Please provide a description of any known sensitive environmental areas, including contaminated or potentially contaminated sites, archaeological sites, cultural resources, historical properties or sites listed on the National Register of Historic Places, and wetlands that may be impacted by the project or that are adjacent to the project site.	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	n/a	Label	n/a
3.2.B.2	<b>2. Attach maps of the project site (such as Google maps or other readily available maps) with project components and beneficiaries clearly indicated.</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	n/a	n/a	Label	n/a
3.2.B.2.1	Attach maps that are already available and do not require additional expense to obtain or produce. Please note that you will be required to submit U.S. Geological Survey (USGS) maps and Federal Emergency Management Agency (FEMA) floodplain maps as part of the complete application if your project is considered in Phase II; however these types of maps are not required at the proposal stage.	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	n/a	Label	n/a
3.2.B.3	<b>3. Has an Environmental Impact Statement, Environmental Assessment, or other similar analysis been completed for this proposed project or for other activities in the region?</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	n/a	n/a	Label	n/a
3.2.B.2.1	Please respond Yes or No. If Yes, please indicate the date on which the statement or analysis was completed and by whom. Please note that this question is simply asking that you identify whether any such statement or analysis has already been completed and when; an environmental impact statement for your project is not required at this time.	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	n/a	Label	n/a

# 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]
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

## 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	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	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	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	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	CongressionalDistrictApplicant	Global or Forward-populated	globLib:CongressionalDistrictDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	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	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	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 then Fill In source, else n/a	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	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	If entered length is 9, then 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	E-mail validation	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	EmployerTaxpayerIdentificationNumber	Global or Forward-populated	globLib:EmployerIDDataType	If Field Type [8] = Forward-populated then Fill In source, else n/a	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 44-444444
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	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	Field	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	Field	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	Field	Enter the legal name of the applicant that will undertake the assistance activity.

Fill In Unique #	Telephone Number:	Telephone Number	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	Global 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&& D. Special District Government&& E. Regional Organization&& F. U.S. Territory or Possession&& G. Independent School District&& H. Public/State Controlled Institution of Higher Education&& I. Indian/Native American Tribal Government (Federally Recognized)&& J. Indian/Native American Tribal& Government (Other than Federally Recognized)&& K. Indian/Native American Tribally Designated Organization&& L. Public/Indian Housing Authority&& M. Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education)&& N. Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education)&& O. Private Institution of Higher Education&& P. Individual&& Q. For-Profit Organization (Other than Small Business)&& R. Small Business&& S. Hispanic-serving Institution&& T. Historically Black Colleges and Universities (HBCUs)&& U. Tribally Controlled Colleges and Universities (TCCUs)&& V. Alaska Native and Native Hawaiian Serving Institutions&& W. Non-domestic (non-US) Entity&& X. Other (specify)&&	0 if optional, 15 if required	82	Popup	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	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	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	CFDAProgramTitle	Pre-populated	globLib:CFDATitleDataType	SubmissionDef.CFDATitle	n/a	AN	n/a	0	120	Field	Pre-populated from the Application cover sheet.
Fill In Unique #	Competition Identification Number:	Competition Number	No	0	1	CompetitionIdentificationNumber	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	CompetitionIdentificationTitle	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:	Opportunity Number	Yes	1	1	FundingOpportunityNumber	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	FundingOpportunityTitle	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]
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

**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	Label	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	n/a	Label	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	n/a	Label	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	Fill In	Fill In	Fill In	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	Fill In	Fill In	Fill In	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	Fill In	Fill In	Fill In	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	Fill In	Fill In	Fill In	Fill In	Agency-specific	globLib:BudgetAmountDataType	n/a	Fill In	\$	n/a	0.00	9999999999.99	Field	Enter the dollar amount.

[1] Field #	[2] Field Label	[3] Short Field Label	[4] Required?	[5] Minimum Occurrences	[6] Maximum Occurrences	[7] Agency Field Name	[8] Field Type	[9] Global Library Field Name	[10] Field Type Source	[11] Business Rules	[12] Data Type	[13] List of Values	[14] Min # of Chars or Min Value	[15] Max # of Chars or Max Value	[16] Field Implementation	[17] Help Tip
Fill In Unique #	DOLLAR AMOUNT TOTAL template Fill In Field Label	Fill In	Fill In	Fill In	Fill In	Fill In	Agency-specific	globLib:BudgetTotalAmountDataType	n/a	Fill In	\$	n/a	0.00	###	Field	Enter the total dollar amount.
Fill In Unique #	FILE ATTACHMENT template Fill In Field Label	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 Unique #	FILE ATTACHMENT template Fill In Field Label	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 Unique #	MULTIPLE FILE ATTACHMENT Fill In Field Label	Fill In	No	0	1	Fill In	Global	att:AttachmentGroupMin0Max100DataTy pe	n/a	Fill In	MULTIFILE	n/a	n/a	n/a	Multi_file	Attach file(s) using the appropriate buttons.
Fill In Unique #	NUMERIC WITHOUT DECIMALS field template Fill In 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
Fill In Unique #	NUMERIC WITH DECIMALS field 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 Unique #	LABEL template Fill In 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 Unique #	LIST field template Fill In Field Label	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 Unique #	CHECKBOX template Fill In Option 1 Field Label	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 #	CHECKBOX template Fill In Option 2 Field Label	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**

Fill In Unique #	RADIO GROUP HEADER Fill In Radio Group Label	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 Unique #	Fill in Radio Group Option 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 Unique #	Fill in Radio Group Option 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 REQUIRED**

Fill In Unique #	RADIO GROUP HEADER Fill In Radio Group Label	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.
Fill In Unique #	Fill in Radio Group Option 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 Unique #	Fill in Radio Group Option 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.

Fill In Unique #	PERCENT WITH DECIMALS Fill In 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.
Fill In Unique #	PERCENT WITHOUT DECIMALS Fill 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.
Fill In Unique #	YEAR field template Fill In 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 OPTIONAL**

Fill In Unique #	YES/NO RADIO GROUP HEADER Fill In 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 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.

**YES/NO REQUIRED**

Fill In Unique #	YES/NO RADIO GROUP HEADER Fill In 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 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.

**YES/NO/OTHER OPTIONAL**

Fill In Unique #	YES/NO/OTHER RADIO GROUPHEADER Fill In 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
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[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 OPTIONAL**

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 REQUIRED**

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.