# Competitive Application

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Below outlines questions for each application area. A glossary of acronyms and terms will be included.

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| **Application Area** | **Application** |
| **Applicant Background Information** | |
| *Project Title* |  |
| *Applicant Information* | Entity Applicant Legal Name:  Point of Contact for Application:  Email:  Organization Address:  Unique Entity ID (UEI) Number: *[will need to be verified via sam.gov]*  Phone #:  (Optional) Website or other relevant organization links (if applicable): |
| *Entity Eligibility* | Select from dropdown list (note: if organization type is not listed below, please email [**Redacted**] before continuing with the application):  [ ] Nonprofit organization, community-based and/or grassroots nonprofit organization  [ ] Tribal government (both federally recognized and state-recognized) and intertribal consortia (i.e., a partnership between two or more tribes that work together to achieve a common objective)  [ ] Native American organization (includes Indian groups, cooperatives, nonprofit corporations, partnerships, and associations that have the authority to enter into legally binding agreements)  [ ] Local government (as defined by [2 CFR 200.1](https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200/subpart-A/subject-group-ECFR2a6a0087862fd2c/section-200.1) – includes cities, towns, municipalities, and counties, public housing authorities and councils of government)  [ ] Institution of higher education (e.g., private and public universities and colleges, including community colleges)  [ ] Puerto Rico  [ ] U.S. Territories |
| *Nonprofit status (if indicated above)* | If you are a nonprofit, please provide documentation that shows your organization is either a 501(c)(3) non-profit as designated by the Internal Revenue Service OR documentation that shows that the non-profit organization is recognized by the state, territory, commonwealth, or tribe in which it is located. |
| Tribal Status | [Y / N] Are you a federally recognized Tribe in [Redacted]?  If Yes, please select from the drop down list:   * [**Redacted**]   Are you a member of a state-recognized tribe? [y/n]  If so, which tribe? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Are you a member of a tribe that is not formally recognized by a state or federal government? [y/n]  If so, which tribe? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| *Funding Type(s) of Interest (select all that apply)* | [ ] Tier I Assessment: 1 year project, up to $150,000  [ ] Tier II Planning: 1-2 year project, up to $250,000  [ ] Tier III Development: 2 year project, up to $350,000 |
| Project Location | Please upload a map of the project area using the EPA EJ Screen: <https://ejscreen.epa.gov/mapper/>  Instructions for how to create a project area map using EJ Screen can be found here: [link added here when available]  Project Zip Code(s):  (Select all that apply) Project Location:  [Redacted]  OTHER (If other, please list: \_\_\_\_)  If located in Federally Recognized Tribe(s), please select all that apply:   * [Redacted]   Is this area predominantly:  [ ] Urban  [ ] Rural  Proposed projects must serve “communities of focus.” For the sake of this project, “communities of focus” are defined using the Inflation Reduction Act Disadvantaged Communities Map. Applicants can use the Climate and Economic Justice Screening Tool (CEJST) which outlines Census tracts that are overburdened and underserved. Access the map and tool here: <https://www.epa.gov/environmentaljustice/inflation-reduction-act-disadvantaged-communities-map>  Does your project location fall into a community of focus as defined by Inflation Reduction Act Disadvantaged Communities Map? [y/n]  If no, why do you think this community should be considered overburdened or underserved for the purpose of this project? |
| *Past/future funding* | Does your organization currently have a federal grant award?  [If yes] What is the funding agency?  [If no] Do you have prior experience with managing federal grant awards?  If so, when was your most recent award?  Have you received a Thriving Communities Grant (TCG) previously either through the [Redacted] Grantmaker or another Grantmaker? (Y/N) |
| *Expected Project Period* | Project Start Date: [will be a dropdown list]  Project Length: [drop down list of months/years] |
| *Applicant profile* | * [Y/N] Has your organization worked in areas of environmental and/or climate justice previously? * If yes, in up to 500 words:   + Please describe how your organization’s work furthers environmental and climate justice in [Redacted].   + Describe how your organization actively serves, educates, gives power to, and/or advocates for communities highly impacted by environmental and climate harms   + Describe how the leadership composition of the organization(s) reflects the community being served. |
| **Project Description** | |
| *Need & Centering Community* | *In up to 500 words:*   * Provide a brief summary of the project that you are seeking funding for, including the communities who benefit, project location, environmental justice issue(s) to be addressed (including data if available), and major activities. * Describe how the project will be informed by, involve, and ultimately benefit “communities of focus.” For the purposes of this project, “communities of focus” are defined using the , Inflation Reduction Act Disadvantaged Communities: <https://www.epa.gov/environmentaljustice/inflation-reduction-act-disadvantaged-communities-map>) If this project will involve Tribal communities, how will this project engage local Tribal communities, support Tribal-led priorities, and/or contribute to Tribal economies? * Please include a description of the most pressing environmental justice issues impacting these communities that your organization is working on, and who is most directly impacted within these communities. |
| *Partnerships , assets and meaningful community engagement* | *In up to 500 words:*   * Please describe any key partnerships relevant to achieving the goals of your project. Include the length of time and scope of your work together. If partners will receive any funding under this grant, include contact information, role on the project, and funding amount. Please also describe how you will use this grant to seek and develop new partnerships if relevant. * Please describe meaningful involvement by those this project aims to benefit. What are the barriers to community engagement and involvement and how will they be addressed? * How do you see your organization fitting into a larger movement for social change, and how does your work strengthen that movement? * How do the proposed project activities build on existing resources of the organization and assets of the community? |
| **Project Goals, Activities, and Milestones** | |
|  | *In up to 1000 words:*   * State your goals and your vision of success for your community through this grant opportunity. What changes do you hope to see if you are successful in the work, both during the project and after? * List your primary activities under this grant. If you are working with partner organization(s), please indicate which is responsible for each activity. * Outline the major objectives and milestones (e.g. products, events, achievements or other significant changes) for this project. How will you achieve them? What are the anticipated community benefits upon completion of the work? |
| *Performance Measures / Evaluation* | |
| *Performance Measures / Evaluation* | *In up to 500 words:*  Please describe how you plan to track project activities, milestones, and project benefits for your communities of focus. What do you think you might learn, and how might you use that information to inform future work? (Please note: if awarded, you will work with your grant manager on an evaluation plan.) |
| Next Steps/ Sustainability | *In up to 250 words:*  Please describe how you hope to apply or continue this work beyond the grant period. How do you see this project fitting into broader environmental justice efforts in your community? What additional resources might be needed to achieve your project’s long-term goals? |
| **Programmatic CapabilityProgrammatic Capability** | |
|  | *In up to 500 words, please describe the following:*   * Organizational Experience: a brief summary or bulleted list of 2-3 similar projects that showcase your ability to successfully achieve the goals of the proposed project. * Staff Experience / Qualifications of proposed people working on the project - Provide names and short bios for participants that demonstrate the qualifications or lived experience that will allow them to complete the project successfully. |
| **Budget** | |
| *Budget Summary* | Funding Amount Requested: \_\_\_\_\_\_\_\_\_\_  Budget Total Project Costs (if total is greater than the amount requested): \_\_\_\_\_\_\_\_\_\_\_\_ |
| *Detailed budget and budget narrative:* | *[details can be elaborated on in the criteria for what the budget and budget narrative should include]*  *Attachments:*   * Required budget template form (see attached) * Itemized Budget Sheet - Clearly explain how funds will be used. This document will supplement the budget information you provide in your required budget form. Applicants must itemize costs into the budget categories in the template. Describe itemized costs (including calculations) in sufficient detail to determine the reasonableness and allowability of costs for each goal, milestone, and activity. |
| Matched Funding | * [Y/N] Does this project have additional funders? If so, who and for what amounts? (Please note that matched funds are optional and have no weight on the scoring.) |
| **ADDITIONAL INFORMATION**  The sections below are optional and do not impact the scoring of your application. They provide additional information to the [Redacted] to improve the grantmaking process and to provide useful technical assistance to applicants and subgrantees. It also provides more information about activities that will be expected of subgrantees if your application is successful. | |
| **Subgrantee Quality Assurance** | |
| Quality Assurance Project Plan (QAPP) Information | * Does your project have technical components (like air/water/pollutant monitoring, sampling, testing) or involve conducting research or investigations? (Y/N)   If you answered “yes” above, you may be required to develop a Quality Assurance Project Plan (QAPP). QAPPs are required by the EPA for any project that collects environmental data. You are NOT required to develop a Quality Assurance Project Plan (QAPP) at the time of application. Applicants are only being asked to determine whether or not a QAPP is required should your project be selected for funding. If required, then an approved QAPP must be in place prior to the initiation of project activities. This section has no bearing on the scoring of the application. For more information about Quality Assurance Project Plans, please consult the following website: [Guidance for Quality Assurance Project Plans](https://www.epa.gov/sites/default/files/2015-06/documents/g5-final.pdf)  If you answered “Yes” above: Please list the technical component(s).  Please mark the kinds of technical assistance you may need to conduct a project with technical components (select all that apply).   * Creating goals and developing a monitoring strategy * Accessing contractors and labs that can play a role on my project * Assistance finding a technical expert with values that align with my organization * Assistance in creating a budget for my project * Help translating technical or scientific findings to impacted communities and other audiences * Help in measuring and monitoring the activity. * Help in communicating about the activity. * Human subject research/Institutional review board * I’m not exactly sure, but I will need help. * Other; please describe: * Not Applicable   Please also let us know your organization’s experience with projects that have technical components (select one):   * We have past experience with these types of projects at a regulatory level of monitoring. * We have done some community monitoring projects, but not at a regulatory level of monitoring. * This is our first project with technical components.   Please feel free to add additional information about your experience. |
| **Support services** | [Y/N] Have you received technical assistance (TA) in finding and or applying to this TCG funding opportunity through: (Please select all that apply)   * Thriving Communities Technical Assistance Center(s) (TCTACs) * Other (Please describe \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)   Please answer this question if you replied ‘YES’ to the above question. Select the type of technical assistance received through the federally funded entity noted above:   * Provided capacity building to engage with decision-makers at all levels of government * Identified this funding opportunity or others funding sources to apply to (federal, state, local or private) * Assistance navigating sam.gov and/or grants.gov reservation process and other grants related portals * Assistance preparing grant proposal * Other\_\_\_\_\_\_\_\_   [Y/N] Are you interested in learning more about the Technical Assistance available under the Thriving Communities Technical Assistance Center?  If yes, in which areas? Please select all that apply:   * Creating goals and/or developing a monitoring strategy * Accessing contractors and labs that can play a role on my project * Assistance finding a technical expert with values that align with my organization * Assistance in creating a budget for my project * Assistance with financial management (writing and reporting) * Help translating technical or scientific findings to impacted communities and other audiences * Communications: Social Media / web design/ publications * Help in measuring and monitoring my activities * Help in communicating about my activities * Local policy (zoning/coding) research and navigation, including local and state government regulations and permits * Human subject research/Institutional review board * Identifying (other) funding opportunities * Quality Management Plan (QMP) * Quality Assurance Project Plans (QAPP) * I’m not exactly sure, but I will need help. * Other; please describe: * Not Applicable |
| **Interest in Future Funding** | Do you intend to apply to other tiers of this funding opportunity in future funding cycles?  Yes, No, Unsure  If yes, please describe: |