|滚过滚动文本|
15. ESTIMATED PROJECT FUNDING

a. Total Federal Funds Requested
b. Total Non-Federal Funds
c. Total Federal & Non-Federal Funds
d. Estimated Program Income

16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?

a. YES  □  THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON:
       DATE:
   b. NO  □  PROGRAM IS NOT COVERED BY E.O. 12372; OR □ PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW

17. By signing this application, I certify (1) to the statements contained in the list of certifications* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances * and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)

I agree

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

18. SFLLL (Disclosure of Lobbying Activities) or other Explanatory Documentation

19. Authorized Representative

Prefix:  First Name:  Middle Name:  Last Name:  Suffix:
Position/Title:
Organization Name:
Department:  Division:
Street1:  Street2:
City:  County / Parish:  Province:
State:  ZIP / Postal Code:  Country:
Phone Number:  Fax Number:  Email:
Signature of Authorized Representative Date Signed
Completed on submission to Grants.gov

20. Pre-application

21. Cover Letter Attachment