

# 2015-2016 AmeriCorps\*State Application Instructions

New, Re compete and Continuation  
Competitive, Education Award Fixed-  
Amount, Full-Time Fixed-Amount,  
Professional Corps, and Formula Programs

Released in conjunction with the Wisconsin  
National and Community Service Board  
RFP #1516WNCBSB-AC



## IMPORTANT NOTICE

These application instructions conform to the Corporation for National and Community Service's online grant application system, [eGrants](#). All funding announcements by the Corporation for National and Community Service (CNCS) are posted on [www.nationalservice.gov](http://www.nationalservice.gov) and [www.grants.gov](http://www.grants.gov).

**Public Burden Statement:** Public reporting burden for this collection of information is estimated to average 80 hours per submission, including reviewing instructions, gathering and maintaining the data needed, and completing the form. Comments on the burden or content of this instrument may be sent to the Corporation for National and Community Service, Attn: Jennifer Bastress Tahmasebi, 1201 New York Avenue, NW, Washington, D.C. 20525. CNCS informs people who may respond to this collection of information that they are not required to respond to the collection of information unless the OMB control number and expiration date displayed on page one are current and valid. (See 5 C.F.R. 1320.5(b)(2)(i).)

**Privacy Act Notice:** The Privacy Act of 1974 (5 U.S.C § 552a) requires that the following notice be provided to you: The information requested on the AmeriCorps Application Instructions is collected pursuant to 42 U.S.C. §§ 12581 - 12585 of the National and Community Service Act of 1990 as amended, and 42 U.S.C. § 4953 of the Domestic Volunteer Service Act of 1973 as amended. Purposes and Uses - The information requested is collected for the purposes of reviewing grant applications and granting funding requests. Routine Uses - Routine uses may include disclosure of the information to federal, state, or local agencies pursuant to lawfully authorized requests. In some programs, the information may also be provided to federal, state, and local law enforcement agencies to determine the existence of any prior criminal convictions. The information may also be provided to appropriate federal agencies and Department contractors that have a need to know the information for the purpose of assisting the Department's efforts to respond to a suspected or confirmed breach of the security or confidentiality or information maintained in this system of records, and the information disclosed is relevant and unnecessary for the assistance. Executive Summaries of all compliant applications received and applications of successful applicants will be published on the CNCS website as part of ongoing efforts to increase transparency in grantmaking. This is described in more detail in the *Notice of Federal Funding Opportunity*. The information will not otherwise be disclosed to entities outside of AmeriCorps and CNCS without prior written permission. Effects of Nondisclosure - The information requested is mandatory in order to receive benefits.

**Federal Funding Accountability and Transparency Act:** Grant recipients will be required to report at [www.FSRS.gov](http://www.FSRS.gov) on all subawards over \$25,000 and may be required to report on executive compensation for recipients and subrecipients. Recipients must have the necessary systems in place to collect and report this information. See 2 C.F.R. Part 170 for more information and to determine how these requirements apply.

**Universal Identifier:** Applications must include a Dun and Bradstreet Data Universal Numbering System (DUNS) number and register with the Central Contractor's Registry (CCR). All grant recipients are required to maintain a valid registration, which must be renewed annually.

**Based on Corporation for National and Community Service Application Instructions:**

OMB Control #: 3045-0047

Expiration Date: 1/31/2017

## Table of Contents

<b>Important Notice</b>	<b>2</b>
<b>Application Resources</b>	<b>4</b>
<b>New &amp; Recompeting Applicants – Submitting Your Application in eGrants</b>	<b>5</b>
I. Applicant Info	5
II. Application Info	6
III. Narratives	7
IV. Performance Measures	9
V. Additional Documents	9
Submission Information for Additional Documents	10
VI. Budget Instructions	11
VII. Review, Authorize, and Submit	12
<b>2015-2016 New and Recompete Application – Additional Documents Checklist</b>	<b>14</b>
<b>Application Instructions: Continuation Requests</b>	<b>15</b>
I. Applicant Info	15
II. Application Info	15
III. Narratives	17
IV. Performance Measures	18
V. Budget	18
VI. Increasing Grantee Overall Share of Total Budgeted Costs	18
VII. Additional Documents	19
Submission Information for Additional Documents	19
<b>2015-2016 Continuation Application – Additional Documents Checklist</b>	<b>20</b>
<b>Program Alignment with State Service Plan – Required for All Applicants</b>	<b>21</b>
<b>Tables</b>	
Table 1: Requirements in the AmeriCorps Regulations	5
Table 2: Match Requirements in the AmeriCorps Regulations	11
<b>Application Instructions Attachments (separate document)</b>	
A: SF-424 Facesheet Instructions (eGrants Applicant Info and Application Info Sections)	
B: Performance Measure Instructions (eGrants Performance Measures Section)	
C: Detailed Budget Instructions (eGrants Budget Section)	
D: Budget Worksheet (eGrants Budget Section)	
E: Detailed Budget Instructions for Fixed-Amount Grants (eGrants Budget Section)	
F: Fixed-Amount Budget Worksheet (eGrants Budget Section)	
<b>G: Budget Checklist (required additional document for cost-reimbursement applicants)</b>	
H: Alternative Match Instructions	
I: Beale Codes and County-Level Economic Data	
J: Assurances and Certifications (eGrants Review, Authorize and Submit Sections)	
<b>K: Financial Management Survey (required additional document for all applicants)</b>	
L: Beneficiary Populations/Grant Characteristics (eGrants Performance Measures Section)	
M: Logic Model Instructions for New/Recompeting and Continuation Applicants	

## APPLICATION RESOURCES

---

Please use these application instructions if you are a new or reapplying applicant to CNCS. If you are submitting a request for continuation funding for 2015-2016, please see Continuation Instructions which begin on page 15.

**Notice of Intent to Apply:** In order to help us gauge the number of applications we are likely to receive, completion of the Notice of Intent to Apply Form located on page 2 of the *WNCSB RFP* is **mandatory** for all (new, reapplying, and continuation) applicants. The deadline for submitting the Notice of Intent to Apply to the Board is **4:30 p.m. Central Time on Wednesday, November 5, 2014**. This form may be e-mailed, faxed, or hand delivered to the address listed on the form. **Applications submitted by applicants who have not submitted a Notice of Intent to Apply by the deadline will not be considered for funding.**

**The deadline for this application is Monday, November 24, 2014, by 4:30 PM Central Time.** Applications are submitted using eGrants (<http://www.nationalservice.gov/egrants/index.asp>), CNCS's integrated, secure, web-based system for applications. In addition to completing an online application, you must submit, in hard copy, all additional documents specified in the *Wisconsin National and Community Service Board (WNCSB) RFP*, these application instructions, and the AmeriCorps regulations.

CNCS requires that all applicants make every effort to submit their applications electronically utilizing CNCS's web-based application system, eGrants. If extenuating circumstances make this impossible, contact the RFP Manager as soon as possible, but no later than the deadline noted above.

**We strongly recommend that you create your eGrants account and begin your application at least three weeks before the deadline and begin pasting your application into eGrants no later than ten days before the deadline.** This will allow you time to address technical issues prior to the deadline.

Contact the eGrants Help Desk at 800-942-2677 (talk to an associate or leave a detailed message) or <https://questions.nationalservice.gov/app/ask> immediately if a problem arises while you are creating your account, preparing, or submitting your application. Be prepared to provide your application ID. If technical issues are preventing you from submitting your application in eGrants by the deadline, you must contact the eGrants Help Desk prior to the 4:30 p.m. Central Time deadline to explain your technical issue and get a ticket number. If your issue cannot be resolved by the deadline, you must continue working with the eGrants Help Desk to submit your application.

Use these instructions in conjunction with the *WNCSB Request for Proposals (RFP)*, and the AmeriCorps Regulations, 45 CFR §§ 2520–2550. **The RFP includes deadlines, eligibility requirements, submission requirements, maximum amount of funding per Member Service Year (MSY),<sup>1</sup> and other information that is specific to the grant competition.**

The AmeriCorps regulations include pertinent information (see Table 1, below). The *RFP* can be found online at [www.servewisconsin.wi.gov](http://www.servewisconsin.wi.gov) under "AmeriCorps Funding". The full regulations are available online at [www.gpoaccess.gov/ecfr](http://www.gpoaccess.gov/ecfr).

---

<sup>1</sup> One MSY is equivalent to at least 1700 service hours, a full-time AmeriCorps position. The CNCS cost per MSY is determined by dividing the CNCS share of budgeted grant costs by the number of MSYs requested in the application. It does not include childcare or the cost of the education award.

**Table 1: Requirements in the AmeriCorps Regulations**

Topics	Citation in the AmeriCorps Regulations
Member Service Activities	§2520.20 - §2520.55
Prohibited Activities	§2520.65
Tutoring Programs	§2522.900-2522.950
Matching Funds	§2521.35-2521.90
Member Benefits	§2522.240-2522.250
Calculating Cost Per Member Service Year (MSY)	§2522.485
Performance Measures	§2522.500-2522.650
Evaluation	§2522.500-2522.540 and §2522.700-2522.740
Selection Criteria and Selection Process	§2522.400-2522.475

If there is any inconsistency between the AmeriCorps regulations, the *RFP*, and the Application Instructions, the order of precedence is as follows:

1. AmeriCorps regulations 45 CFR §§ 2520–2550 take precedence over the
2. *Request for Proposals*, which takes precedence over the
3. Application Instructions.

## **SUBMITTING YOUR APPLICATION IN EGRANTS**

### **New and Recompeting Applicants**

New applicants need to establish an eGrants account by accessing this link: <https://egrants.cns.gov/espan/main/login.jsp> and selecting “Don’t have an eGrants account? Create an account.”

In eGrants, before Starting Section I you will need to:

- Start a new Grant Application
- Select a Program Area (AmeriCorps)
- Select a NOFA (see the Serve Wisconsin website for a listing)

Your application consists of the following components. Make sure to complete each section.

- I. Applicant Info
- II. Application Info
- III. Narratives
- IV. Performance Measures
- V. Documents
- VI. Budget
- VII. Review, Authorize, and Submit

### **I. Applicant Info**

Information entered in the Applicant Info, Application Info, and Budget sections will populate the SF 424 Facesheet. **You will find the SF 424 in Attachment A.**

- If you are reapplying (in the final year of a competitive funding cycle and applying for a new grant cycle), select **Continuation/Renewal**
- If you are not a current grantee, but have received a competitive AmeriCorps grant in the past five years, select **Continuation/Renewal**
- If you are applying for the first time, have only received formula funding in the past, or are a former grantee (non-formula) whose last AmeriCorps grant was received more than five years ago, select **New**
- If you are a current planning grantee applying for an implementation grant, select **New**

Enter or update the requested information in the fields that appear. The contact person needs to be the person who can answer questions about the application.

## II. Application Info

### In the Application Info Section enter:

- Areas affected by your proposed program. Please include the city and/or county name for each host site location, separated with a comma. Include the two-letter capitalized state abbreviation (WI). If there is not enough space to list all cities/counties, note the number of cities/counties, the two-letter capitalized state abbreviation (WI), and ensure to list all of the locations in your grant narrative.
- Requested project period start and end dates. The length of the project period is specified in the *RFP*. Projects may only start on August 15, 2015 or September 1, 2015, and complete on August 14, 2016 or August 31, 2016, respectively.
- Enter Funding Type
- State Application Identifier: Enter N/A.
  - The Application is Subject to Review by State Executive Order 12372 Process: This is pre-filled as “No, this is not applicable.”
- Indicate Yes or No if you are delinquent on any federal debt. If yes, send explanation as described in Section V. Additional Documents.
- Leave the box for “Program Initiative” blank unless otherwise noted in the *RFP*.

### In the Funding/Demographics Section enter:

- Total Local, State, and Federal Government Match. Enter the dollar amount of local, state, and federal government match being proposed. The “Total Private Match” + the “Total Local, State, and Federal Government Match” should equal the “Total Match.”
- Total Private Match. Enter the dollar amount of private match being proposed. The “Total Private Match” + the “Total Local, State, and Federal Government Match” should equal the “Total Match.”
- Total Match. Enter the total dollar amount of match being proposed.
- Other Revenue funds. Enter the amount of funds that your program uses to run the program that are not CNCS share or match.
- Number of Episodic Volunteers Generated by AmeriCorps members. Please enter the number of volunteers that will be participating in one day service projects that the proposed AmeriCorps members will generate.
- Number of Ongoing Volunteers Generated by AmeriCorps members. Please enter the number of volunteers that have an ongoing volunteer commitment that the proposed AmeriCorps members will generate.
- Percentage of MSYs who are opportunity youth
- Number of reported in O15 who are opportunity youth
- Number of reported in O17 who are opportunity youth

### In the Program Information Section:

General Information: select either Yes or No from the drop down menu

- My organization has received an AmeriCorps State and National Grant. Organizations that have been a host site for AmeriCorps members but never had a direct grant relationship with either a State Commission or CNCS should answer No.
- Opt in to the National Service Registry. Applicants wishing to make information from their application to potential private sector funders can opt in during the application process.

### 2015 AmeriCorps Funding Priorities

Check any priority area(s) that apply to the proposed program. In order to receive priority consideration, applicants must demonstrate that the priority area is a significant part of the program focus, high quality program design, and outcomes.

- Disaster Services
- Economic Opportunity – especially opportunity youth
- Education - improving student academic performance including STEM
- Environment – 21<sup>st</sup> Century Service Corps
- Veterans and Military Families
- Governor and Mayor Initiative
- Programming that supports My Brother’s Keeper
- Multi-focus Intermediary
- No NOFO priority area

### Populations Served

Check the appropriate box(es) to identify the populations the proposed program will serve. If you do not plan to serve any of the listed populations, select "None of the above."

- Individuals who are homeless.
- Adult ESL participants.
- Youth ESL participants.
- Disadvantaged youth (K-12).
- Head Start participants.
- Immigrants and refugees.
- Individuals receiving hospice or other care for terminal illness.
- Individuals receiving mental health services.
- Individuals receiving substance abuse services.
- Individuals with HIV/AIDS.
- Individuals with physical or developmental disabilities.
- Senior Citizens
- Victims/Survivors of violence and abuse.
- Veterans.
- Veteran family members
- Caregivers.
- None of the Above

### Grant Characteristics

Check any grant characteristics that apply to the proposed program:

- Encore Program
- Faith organizations
- Community-based organizations,
- SIG/Priority Schools
- Professional Corps
- STEM Program
- Geographic Focus – Urban
- Geographic Focus – Rural
- None of the above grant characteristics

AmeriCorps Identity/Co-branding Questions. Check all that apply

### III. Narratives

The narrative section of the application is your opportunity to convince reviewers that your project meets the selection criteria as outlined in the *RFP*. It is strongly recommended that you create your narrative in a word processing document prior to entering into eGrants. Below are some general recommendations to help you present your project in a way the reviewers will find compelling and persuasive.

- **Lead from your program strengths and be explicit.** Do not make the mistake of trying to stretch your proposed program description to fit each funding priority and special consideration articulated in the regulations or the *RFP*.
- **Be clear and succinct.** Reviewers are not interested in jargon, boilerplate, rhetoric, or exaggeration. They are interested in learning precisely what you intend to do, and how your project responds to the selection criteria presented below.
- **Avoid circular reasoning.** The problem you describe should not be defined as the lack of the solution you are proposing.
- **Explain how.** Avoid simply stating that the criteria will be met. Explicitly describe how the proposed project will meet the criteria.
- **Don't make assumptions.** Even if you have received funding from CNCS in the past, do not assume your reviewers know anything about you, your proposed program, your partners, or your beneficiaries. Avoid overuse of acronyms.
- **Use an impartial proofreader.** Before you submit your application, let someone who is completely unfamiliar with your project read and critique the project narrative.
- **Follow the instructions and discuss each criterion in the order they are presented in the instructions.** Use headings to differentiate narrative sections by criterion.

In eGrants, you will enter text for

- Executive Summary.
- Rationale and Approach (Program Design).
- Organizational Capability.
- Cost Effectiveness and Budget Adequacy.
- Evaluation Plan.

Note: The Narratives Section also includes fields for Clarification Information, Amendment Justification, and Continuation Changes. **Please enter N/A in these fields. They will be used at a later date to enter information for clarification following review, to request amendments once a grant is awarded, and to enter changes in the narrative in continuation requests.**

Reviewers will assess your application against the selection criteria. To best respond to the criteria listed in the *RFP* and Application Instructions, we suggest that you include a brief discussion of each bullet if it pertains to your application.

#### **A. Executive Summary**

Please complete the executive summary per the guidance in the *RFP*.

#### **B. Selection Criteria**

Each application must clearly describe a project that will effectively deploy AmeriCorps members to solve a significant community problem. Specifics about the selection criteria are published in the *RFP*.

##### **1. Rationale and Approach/ Program Design (50 percent)**

In assessing Rationale and Approach/ Program Design, reviewers will examine the degree to which the applicant demonstrates how AmeriCorps members are particularly well-suited to solving the identified community problem.

##### **2. Organizational Capability (25 percent)**

Reviewers will assess the extent to which the applicant demonstrates organizational background and staffing, sustainability, compliance and accountability, enrollment and retention (for current and former grantees), consultation with State Commissions(not required for Indian Tribes), and operating and member service sites (as indicated in the *RFP*.)

##### **3. Cost Effectiveness and Budget Adequacy (25 percent)**

In assessing Cost Effectiveness and Budget Adequacy, reviewers will examine the degree to which the intervention being proposed is cost effective and the budget is appropriate for the program being proposed.

#### **C. Evaluation Summary or Plan**

If you are competing for the first time, please enter N/A in the Evaluation Summary or Plan field since it pertains only to re-competing grantees. If you are re-competing for AmeriCorps funds for the first time please follow the guidance in the *RFP*.

#### **D. Amendment Justification**

Enter N/A. This field will be used if you are awarded a grant and need to amend it.

#### **E. Clarification Information**

Enter N/A. This field will be used to enter information that requires clarification in the post-review period. Please clearly label new information added during clarification with the date.

#### **F. Continuation Changes**

Enter N/A. This field will be used to enter changes in your narratives in your continuation requests.

#### **IV. Performance Measures**

Applicants must check the relevant boxes in the Performance Measure tab in eGrants in order to be considered for CNCS' assessment of the strategic considerations and Special Initiatives.

#### Grant Characteristics:

- AmeriCorps member Population – Communities of Color
- AmeriCorps member Population – Low-income individuals
- AmeriCorps member Population – Native Americans
- AmeriCorps member Population – New Americans
- AmeriCorps member Population – Older Americans
- AmeriCorps member Population – People with Disabilities
- AmeriCorps member Population – Rural Residents
- AmeriCorps member Population – Veterans, Active Military, or their Families
- AmeriCorps member Population – Economically disadvantaged young adults/Opportunity Youth
- AmeriCorps member Population – None of the above categories

All applicants must submit performance measures with their application. See Attachment B for instructions for entering performance measures.

For more information about Performance Measures go to:<http://www.nationalservicerresources.org/star/ac>.

For more information about the National Performance Measures go to:  
<http://www.nationalservicerresources.org/national-performance-measures/home>.

#### **V. Additional Documents**

In addition to the application submitted in eGrants, you are required to submit **all** additional documents in hard copy as part of your application. After you have submitted the documents, change their status in eGrants from the default “Not Sent” to the applicable status “Sent,” “Not Applicable,” or “Already on File at CNCS.”

##### **A. Audit**

You must provide one hard copy of your most recent A-133 audit, your organization’s financial audit, or your financial statements if you have not had a formal audit. You will be required to submit one electronic copy of your most recent audit or financial statements to Serve Wisconsin when requested. Wisconsin State agencies and universities do not need to provide copies of the State audit.

##### **B. Evaluation**

Submit any completed evaluation plan or report as described in the *RFP*. Select Evaluation and select “Sent” once you have submitted a completed evaluation plan or report. If an evaluation is required, you must submit a copy at the time of application even if you think CNCS may already have it on file.

##### **C. Evidence Base**

If you are classifying your evidence base as Moderate or Strong, you must send 1-2 studies, evaluation reports, briefs, or peer-reviewed articles that are cited in the Evidence Base section of your Program Design. Failure to include these reports will automatically disqualify your proposal from receiving points for Moderate or Strong evidence base. Please see the *RFP* for more information.

##### **D. Labor Union Concurrence (if applicable)**

- 1) If a program applicant:
  - a) Proposes to serve as the placement site for AmeriCorps members; and
  - b) Has employees engaged in the same or substantially similar work as that proposed to be carried out by AmeriCorps members; and
  - c) Those employees are represented by a local labor organization, then the application must include the written concurrence of the local labor organization representing those employees. Written concurrence can be in the form of a letter or e-mail from the local union leadership.
- 2) If a program applicant:
  - a) Proposes to place AmeriCorps members at sites where they will be engaged in the same or substantially similar work as employees represented by a local labor organization, then the applicant must submit a written description of how it will ensure that:
    - i) AmeriCorps members won’t be placed in positions that were recently occupied by paid staff.

- ii) No AmeriCorps member will be placed into a position for which a recently resigned or discharged employee has recall rights as a result of a collective bargaining agreement, from which a recently resigned or discharged employee was removed as a result of a reduction in force, or from which a recently resigned/discharged employee is on leave or strike.

If either 1) or 2) above applies to you, please select "Enter New," name the new document 1) "Labor Union Concurrence," or 2) "Displacement Assurance" and select "Sent."

**E. Delinquent on Federal Debt**

Any applicant that checks Yes to the question on federal debt delinquency must submit a complete explanation.

**F. Organizational Chart**

**G. Signed Letter(s) of Support from Most Significant Community Partner(s)** (maximum: 2)

**H. Budget Checklist (Attachment G) (N/A for Fixed-Amount Programs)**

**I. Financial Management Survey (Attachment K)**

**J. Recognition of Non-Profit/Tax-Exempt Status Letter from IRS** (if applicable)

**K. Federally Approved Indirect Cost Rate Agreement** (if applicable)

**L. Cost Allocation Plan** (if applicable)

**M. If using other federal funds for match, documentation from the other federal entity showing that those federal funds are permitted to be used as match toward a federal AmeriCorps grant**

**N. 2015-2016 New and Recompete Application – Additional Documents Checklist** (page 14)

**O. Program Alignment with Wisconsin State Service Plan Form** (page 21; see plan at: <http://www.servewisconsin.wi.gov/docview.asp?docid=24391&locid=162>)

**Submission Instructions for Additional Documents**

All documents listed on the 2015-2016 Application Checklist for New and Recompete Applications must be submitted to the Wisconsin National and Community Service Board. **The deadline for submitting these materials is also 4:30 p.m. Central Time on November 24, 2014.** Note that all additional documents must be in hard copy/paper format in a sealed envelope **and must be received at the Board's address and in the room noted below.** Additional Documents will not be accepted after the deadline; if there are any missing Additional Documents, the entire application will be considered incomplete and will not be considered for funding.

**Submit required documents to:**

Wisconsin National & Community Service Board  
Attn: Application Documents  
1 West Wilson Street, Room B274  
Madison, WI 53703

**Please note: applicants have had issues with the U.S. Postal Service delivering packages by the guaranteed delivery date; therefore, we do not recommend applicants rely on this service to submit their additional documents by the deadline.**

## VI. Budget Instructions

**For Fixed-Amount grants, including EAPs: Use the Budget Instructions for Fixed-Amount applicants (Attachment E) and the Budget Worksheet (Attachment F) to prepare your budget.**

### A. Match Requirements

Program requirements, including requirements on match are located in the AmeriCorps regulations and summarized below.

**Table 2: Match Requirements in the AmeriCorps Regulations**

Grant Type	Match Requirement
Cost Reimbursement including Professional Corps, States and Territories without Commissions, Indian Tribes	Minimum grantee share is 24% of program costs for the first three years. Overall grantee share of total program costs increases gradually beginning in Year 4 to 50% by the tenth year of funding and any year thereafter.
EAP Fixed-amount Grants	There are no specific match requirements for fixed-amount grants. Grantees pay all program costs over \$800 per MSY provided by CNCS.
Professional Corps Fixed-amount Grants	There are no specific match requirements for fixed-amount grants. Grantees pay all program costs over the maximum \$1,000 per MSY provided by CNCS.
Stipended Fixed-amount Grants	There are no specific match requirements for full-time Fixed-amount grants. Grantees pay all program costs over the maximum \$13,430 per MSY provided by CNCS.

- Grantees are required to meet an overall matching rate that increases over time. You have the flexibility to meet the overall match requirements in any of the three budget areas, as long as the minimum match of 24% for the first three years, and the increasing minimums in years thereafter, are maintained. [See 45 CFR §§ 2521.35–2521.90](#) for the specific regulations.
- If you are applying for the first time, you must match with cash or in-kind contributions at least 24% of the project's total Operating Costs (Section I) plus Member Costs (Section II) plus Administrative Costs (Section III). If you are re-competing, please see [45 CFR §§ 2521.40-2521.95](#) for the match schedule.
- The acceptable sources of matching funds are federal, state, local, private sector, and/or other funds in accordance with applicable AmeriCorps requirements.
- In Section III of the budget, enter a brief description of the source of match. Identify each match source separately. Include dollar amount, the match classification (cash, in-kind, or Not Available) and the source type (Private, State/Local, Federal, Other or Not Available). Define all acronyms the first time they are used.
- See Attachment H for instructions for applying for the Alternative Match Schedule.

*Note:* The CNCS legislation permits the use of non-CNCS federal funds as match for the grantee share of the budget. Please discuss your intention of using federal funds to match an AmeriCorps grant with the other agency prior to submitting your application. Section 121(e)(5) of the National Community Service Act requires that grantees that use other federal funds as match for an AmeriCorps grant report the amount and source of these funds to CNCS. If you use other federal funds as match, you must ensure you can meet the requirements and purpose of both grants. This information will be reported to WNCBSB in Aggregate Financial Reports (AFRs).

### B. Special Circumstances for an Alternative Match Schedule:

Under certain circumstances, applicants may qualify to meet alternative matching requirements that increase over the years to 35% instead of 50% as specified in the regulations at §2521.60(b). To qualify, you must demonstrate that your program is either located in a rural county or in a severely economically distressed community as defined in **Attachment H: Alternative Match Instructions**.

**Submit alternative match requests via e-mail by the application due date of Monday, November 24, 2014 at 4:30 p.m. CT to: [jessica.kewin@wisconsin.gov](mailto:jessica.kewin@wisconsin.gov)**  
**E-mail subject line: AmeriCorps Alternative Match Request**

**Wisconsin National and Community Service Board must approve your waiver request before it is forwarded to CNCS.**

### **C. Preparing Your Budget**

Your proposed budget should be sufficient to allow you to perform the tasks described in your narrative. Reviewers will consider the information you provide in this section in their assessment of the Cost-Effectiveness and Budget Adequacy selection criteria.

Follow the detailed budget instructions in Attachment C to prepare your budget. We recommend that you prepare your budget in the same order as indicated in the Budget Worksheets in Attachments C and D. As you enter your detailed budget information, eGrants will automatically populate a budget summary and budget narrative report. Prior to submission be sure to review the budget checklist (Attachment G) to ensure your budget is compliant. In addition, eGrants will perform a limited compliance check to validate the budget. If it finds any compliance issues you will receive a warning and/or error messages. You must resolve all errors before you can submit your budget.

As you prepare your budget:

- All the amounts you request must be defined for a particular purpose. Do not include miscellaneous, contingency, or other undefined budget amounts.
- Understand the required budget items to be included, described in the Budget Checklist (Attachment G). This includes travel to a CNCS-sponsored meeting, AmeriCorps Member Service Gear, and the use of the OnCorps Reporting System.
- Itemize each cost and present the basis for all calculations in the form of an equation.
  - o For example: OnCorps Online Reporting System – 30 Members \* \$1.25 \* 12 months = \$450;  
Program Director Salary \$60,000 @ 80% devoted to program = \$48,000.
- Do not include unallowable expenses, e.g., entertainment costs (which include food and beverage costs) unless they are justified as an essential component of an activity.
- Do not include fractional amounts (cents).

Please refer to the relevant OMB Circulars on allowable costs for further guidance. The OMB circulars are online at [www.whitehouse.gov/OMB/circulars](http://www.whitehouse.gov/OMB/circulars).

- Cost Principles for Educational Institutions
- Cost Principles for State, Local, and Indian Tribal Governments
- Cost Principles for Non Profit Organizations

Programs must comply with all applicable federal laws, regulations, and OMB circulars for grant management, allowable costs, and audits, including providing audits to the A-133 clearinghouse if expending over \$750,000 in federal funds, as required in OMB Circular A-133.

### **VII. Review, Authorize, and Submit**

eGrants requires that you review and verify your entire application before submitting, by completing the following sections in eGrants:

- Review
- Authorize
- Assurances
- Certifications
- Verify
- Submit

Read the Authorization, Assurances, and Certifications carefully (Attachment J). The person who authorizes the application must be the applicant's Authorized Representative or his/her designee and must have an active eGrants account to sign these documents electronically. An Authorized Representative is the person in your organization authorized to accept and commit funds on behalf of the

organization. A copy of the governing body's authorization for this official representative to sign must be on file in the applicant's office.

Be sure to check your entire application to ensure that there are no errors before submitting it. eGrants will also generate a list of errors if there are sections that need to be corrected prior to submission when you verify the application. If someone else is acting in the role of the applicant's authorized representative, that person must log into his/her eGrants account and proceed with Authorize and Submit. After signing off on the Authorization, Assurances, and Certifications, his/her name will override any previous signatory that may appear and show on the application as the Authorized Representative.

**Note: Anyone within your organization who will be entering information in the application at any point during application preparation and submission in the eGrants system must have their own eGrants account.** Individuals may establish an eGrants account by accessing this link: <https://egrants.cns.gov/espan/main/login.jsp> and selecting "Don't have an eGrants account? Create an account."

Please direct all questions about these Application Instructions in writing to the RFP Manager at [jessica.kewin@wisconsin.gov](mailto:jessica.kewin@wisconsin.gov) by **November 19, 2014 at 4:30 p.m. Central Time.**

## 2015-2016 New and Recompete Application Additional Documents Checklist

**Legal Applicant Name:** \_\_\_\_\_

**AmeriCorps Project Name:** \_\_\_\_\_

**Application ID # from eGrants Application:** \_\_\_\_\_

***Required Additional Documents on paper in a sealed envelope due in the WNCBSB office at 1 W. Wilson St., Room B274, Madison, WI 53703, by 4:30 p.m. CT on Monday, November 24, 2014:***

- Audit:** One (1) paper copy of the most recent A-133 audit, your organization's most recent financial audit, or other financial statements if you have not had an audit. An electronic copy must be sent separately when requested by Serve Wisconsin. Wisconsin state agencies and universities do not need to provide copies of the State audit.
- Program Evaluations:** If applicable, a printed version of the completed evaluation.
- Reports for Moderate or Strong Evidence Base:** If applicable, provide a printed copy of 1-2 studies, evaluation reports, briefs or peer reviewed articles cited in the *Evidence Base* section of the narrative.
- Labor Union Concurrence** (if applicable)
- Organizational Chart**
- Signed Letter(s) of Support from Significant Community Partners** (up to 2)
- Completed Budget Checklist (Attachment G) (N/A for Fixed-Amount Programs)**
- Completed Financial Management Survey (Attachment K)**
- Recognition of Non-Profit/Tax-Exempt Status Letter from IRS** (if applicable)
- Federally Approved Indirect Cost Rate Agreement** (if applicable)
- Cost Allocation Plan** (if applicable)
- If using other federal funds for match, documentation from the other federal entity showing that those federal funds are permitted to be used as match toward a federal AmeriCorps grant**
- Program Alignment with Wisconsin State Service Plan Form** (page 21; see plan at: <http://www.servewisconsin.wi.gov/docview.asp?docid=24391&locid=162>)
- Completed 2015-2016 New and Recompete Application—Additional Documents Checklist** (completed copy of this Checklist)\*

*\* Though we expect you to submit this checklist with your additional documents, failure to include the checklist will not disqualify an application.*

**Please double-check your additional documents submission packet to ensure all of the above are included. Incomplete packets will be automatically rejected. These packets will not be opened by WNCBSB until after the deadline. You will receive an e-mail confirmation from the RFP Manager when your additional document packet is received by WNCBSB.**

## CONTINUATION REQUESTS

---

The following instructions for submitting a continuation request apply only to programs that are currently in their first or second year of operation within a grant cycle. If your program is currently in the final year of its grant cycle, you must apply using the application instructions for new and re-competing programs. In addition, if you are in year two or three of a cost-reimbursement grant cycle, you need to submit a new application to participate in the fixed-amount grant; you cannot continue your existing project period and switch from cost-reimbursement to fixed-amount. CNCS reserves the right to consider your continuation request if your fixed-amount application is not funded.

Continuation requests will be accepted from Boys & Girls Clubs of Greater Milwaukee-SPARK Program; College Possible; Dane County Human Services; Easter Seals Wisconsin; Indianhead Community Action Agency; Public Allies Milwaukee; Renewal Unlimited; Teach For America Milwaukee; United Way of Dane County-Achievement Connections; United Way of Dane County-Schools of Hope; University of Wisconsin-Oshkosh VetCorps; Western Dairyland; Wisconsin Association for Homeless and Runaway Services; Wisconsin Dept. of Agriculture, Trade & Consumer Protection; Wisconsin Emergency Management; and Wisconsin Primary Health Care Association.

**Notice of Intent to Apply:** In order to help us gauge the number of applications we are likely to receive, completion of the Notice of Intent to Apply Form located on page 2 of the *WNCSB RFP* is **mandatory** for all (new, re-competing, and continuation) applicants. The deadline for submitting the Notice of Intent to Apply to the Board is **4:30 p.m. Central Time on Wednesday, November 5, 2014**. This form may be e-mailed, faxed, mailed, or hand delivered to the address listed on the form. **Applications submitted by applicants who have not submitted a Notice of Intent to Apply by the deadline will not be considered for funding.**

**The deadline for your Continuation Request is Monday, November 24, 2014, by 4:30 PM Central Time.** Applications are submitted using eGrants (<http://www.nationalservice.gov/egrants/index.asp>), CNCS's integrated, secure, web-based system for applications. In addition to completing an online application, you must submit, in hard copy, all additional documents specified in the *Wisconsin National and Community Service Board (WNCSB) RFP*, these application instructions, and the AmeriCorps regulations.

### How to Submit Your Continuation Request:

- Click **Continuation/Renewal** on your eGrants home page. You will be shown a list of grants that are eligible to be continued. Select the grant you wish to continue. **Make sure you select the correct one. Do not start a new application.** The system will copy your most recently awarded application.
- Edit your continuation application as directed in the continuation request instructions below. When you have completed your work, click the **SUBMIT** button.

Be sure you also review the *RFP* when preparing your request. If you have questions about the content of your continuation request, please contact the RFP Manager.

### What to Include in Your Continuation Request:

#### I. Applicant Info

Update the Applicant Info and Application Info Sections in eGrants if necessary. Note in the Continuation Changes field that you have updated the Applicant Info or Application Info Section(s).

#### II. Application Info

##### In the Application Info Section enter:

- Areas affected by your proposed program. Please include the city and/or county name for each host site location, separated with a comma. Include the two-letter capitalized state abbreviation (WI). If there is not enough space to list all cities/counties, note the number of cities/counties, the two-letter capitalized state abbreviation (WI), and ensure to list all of the locations in your grant narrative.

- Requested project period start and end dates. The length of the project period is specified in the *RFP*. Projects may only start on August 15, 2015 or September 1, 2015, and complete on August 14, 2016 or August 31, 2016, respectively.
- Enter Funding Type
- State Application Identifier: Enter N/A.
  - The Application is Subject to Review by State Executive Order 12372 Process: This is pre-filled as "No, this is not applicable."
- Indicate Yes or No if you are delinquent on any federal debt. If yes, send explanation as described in Section V.E. on page 10.
- Leave the box for "Program Initiative" blank unless otherwise noted in the *RFP*.

In the Funding/Demographics Section enter:

- Total Local, State, and Federal Government Match. Enter the dollar amount of local, state, and federal government match being proposed. The "Total Private Match" + the "Total Local, State, and Federal Government Match" should equal the "Total Match."
- Total Private Match. Enter the dollar amount of private match being proposed. The "Total Private Match" + the "Total Local, State, and Federal Government Match" should equal the "Total Match."
- Total Match. Enter the total dollar amount of match being proposed.
- Other Revenue funds. Enter the amount of funds that your program uses to run the program that are not CNCS share or match.
- Number of Episodic Volunteers Generated by AmeriCorps members. Please enter the number of volunteers that will be participating in one day service projects that the proposed AmeriCorps members will generate.
- Number of Ongoing Volunteers Generated by AmeriCorps members. Please enter the number of volunteers that have an ongoing volunteer commitment that the proposed AmeriCorps members will generate.
- Percentage of MSYs who are opportunity youth
- Number of reported in O15 who are opportunity youth
- Number of reported in O17 who are opportunity youth

### **In the Program Information Section:**

**General Information:** select either Yes or No from the drop down menu

- My organization has received an AmeriCorps State and National Grant. Organizations that have been a host site for AmeriCorps members but never had a direct grant relationship with either a State Commission or CNCS should answer No.
- Opt in to the National Service Registry. Applicants wishing to make information from their application to potential private sector funders can opt in during the application process.

### **2015 AmeriCorps Funding Priorities**

Check any priority area(s) that apply to the proposed program. In order to receive priority consideration, applicants must demonstrate that the priority area is a significant part of the program focus, high quality program design, and outcomes.

- Disaster Services
- Economic Opportunity – especially opportunity youth
- Education - improving student academic performance including STEM
- Environment – 21<sup>st</sup> Century Service corps
- Veterans and Military Families
- Governor and Mayor Initiative
- Programming that supports My Brother's Keeper
- Multi-focus Intermediary
- No NOFO priority area

### **Populations Served**

Check the appropriate box(es) to identify the populations the proposed program will serve. If you do not plan to serve any of the listed populations, select "None of the above."

- Individuals who are homeless.

- Adult ESL participants.
- Youth ESL participants.
- Disadvantaged youth (K-12).
- Head Start participants.
- Immigrants and refugees.
- Individuals receiving hospice or other care for terminal illness.
- Individuals receiving mental health services.
- Individuals receiving substance abuse services.
- Individuals with HIV/AIDS.
- Individuals with physical or developmental disabilities.
- Senior Citizens
- Victims/Survivors of violence and abuse.
- Veterans.
- Veteran family members
- Caregivers.
- None of the Above

### **Grant Characteristics**

Check any grant characteristics that apply to the proposed program:

- Encore Program
- Faith organizations
- Community-based organizations,
- SIG/Priority Schools
- Professional Corps
- STEM Program
- Geographic Focus – Urban
- Geographic Focus – Rural
- None of the above grant characteristics

### **AmeriCorps Identity/Co-branding Questions.** Check all that apply

- In the Multi-State Operating Sites Section (For applicants that are operating in more than one state): Please fill in the following information for your operating sites: organization name, address, city, and state, zip code +0000 (eGrants will correct the last four digits to the correct numbers), amount of funding going to the operating site, number of proposed AmeriCorps members that will be located at the site.

### **III. Narrative (Narratives Section)**

Your original application will appear in the Executive Summary and in the narrative sections Rationale and Approach/Program Design, Organizational Capability, Cost-Effectiveness and Budget Adequacy, Evaluation Summary or Plan, Amendment Justification, Clarification Information, and Continuation Changes, as appropriate.

**Do not enter continuation changes in the original narrative fields.** If you are not proposing changes to your continuation request, simply leave your original narrative as it is, and enter No Changes in the Continuation Changes field.

**If you have changes in any of these areas, please document them in the Continuation Changes field in eGrants.** Clearly differentiate Year 2 and Year 3 continuation changes by using headings that label these as such. Continuation changes may include, but are not limited to:

- New site locations.
- Expansion to new sites, including the need that will be met in expansion communities, activities of expansion members, and organizational capacity to support the expansion.
- Any changes in the budget.
- Any increase in requested cost per MSY. This applies even if the increased cost per MSY is less than the maximum or if the increase is due to increased costs set by CNCS.

**Plans for improving enrollment, retention, or other compliance issues.** If you enrolled less than 100% of slots received during your last full year of program operation, provide an explanation, and describe your plan for improvement in the Continuation Changes field.

If you were not able to retain all of your members during your last full year of program operation, provide an explanation, and describe your plan for improvement in the Continuation Changes field. We recognize retention rates may vary among equally effective programs depending on the program model. We expect grantees to pursue the highest retention rate possible.

If you are requesting to conduct new activities or additional MSYs, these also need to be reflected in the budget and the performance measures. The page limit for the Continuation Changes field is 6 pages, as the pages print out from eGrants.

#### **IV. Performance Measures (Performance Measures Section)**

Applicants must check the relevant boxes in the Performance Measure tab in eGrants.

Grant Characteristics:

- AmeriCorps member Population – Communities of Color
- AmeriCorps member Population – Low-income individuals
- AmeriCorps member Population – Native Americans
- AmeriCorps member Population – New Americans
- AmeriCorps member Population – Older Americans
- AmeriCorps member Population – People with Disabilities
- AmeriCorps member Population – Rural Residents
- AmeriCorps member Population – Veterans, Active Military, or their Families
- AmeriCorps member Population – Economically disadvantaged young adults/Opportunity Youth
- AmeriCorps member Population – None of the above categories

Your performance measures are copied from your previous year's application into your continuation request. If you made changes to your program, such as adding or changing grant-funded activities, or requesting additional slots or MSYs, you may need to revise your performance measures. To revise performance measures, "View/Edit" the performance measures that copy over from your original application, or add new performance measures (see Attachment B for instructions). Note in the Continuation Changes field that you have updated your performance measures.

#### **V. Budget (Budget Section)**

Your budget from the previous year's application is copied into your continuation request so you can make the necessary adjustments. Revise your detailed budget for the upcoming year. Incorporate any required CNCS increases, such as an increase to the member living allowance into your budget. Justify any increases not required by CNCS. CNCS expects that the Cost per MSY for continuation applicants will decrease or remain the same. Any increase in Cost per MSY must be justified in the Continuation Changes field.

#### **Source of Match**

In the "Source of Match" field that appears at the end of Budget Section III, enter a brief description of the Source of Match, the amount, the match classification (cash, in-kind, or not available) and Match Source (State/Local, Federal, Private, Other) **for your entire match**. Define acronyms the first time they are used.

#### **VI. Increasing Grantee Overall Share of Total Budgeted Costs**

Grantees are required to meet an overall matching rate that increases over time. You have the flexibility to meet the overall match requirements in any of the three budget areas, as long as the minimum match of 24% for the first three years, and the increasing minimums in years thereafter, are maintained. See 45 CFR §§ 2521.35–2521.90 for the specific regulations.

See Attachment H for instructions for applying for the Alternative Match Schedule.

## VII. Additional Documents

All documents must be delivered to the Board by the submission deadline in the required format. The required format is paper. Additional documents include the following:

- A. **Audit:** Provide one (1) hard copy of your most recent A-133 audit, your organization's financial audit, or your financial statements if you have not had a formal audit. You will be required to submit one electronic copy of your most recent audit or financial statements to Serve Wisconsin when requested. Wisconsin State agencies and universities do not need to provide copies of the State audit.
- B. **Program Evaluations:** Submit in hard copy. If an evaluation is submitted, in eGrants you must change the status of the evaluation documents to the applicable status (Sent).
- C. **Labor Union Concurrence** (if applicable)
- D. **Budget Checklist (Attachment G) (N/A for Fixed-Amount Programs)**
- E. **Federally Approved Indirect Cost Rate Agreement** (if applicable)
- F. **Cost Allocation Plan** (if applicable)
- G. **If using other federal funds for match, documentation from the other federal entity showing that those federal funds are permitted to be used as match toward a federal AmeriCorps grant**
- H. **2015-2016 Continuation Application – Additional Documents Checklist** (page 20)
- I. **Program Alignment with Wisconsin State Service Plan Form** (page 21; see plan at: <http://www.servewisconsin.wi.gov/docview.asp?docid=24391&locid=162>)

## Submission Instructions for Additional Documents

All documents listed on the 2015-2016 Application Checklist for Continuation Applications must be submitted to the Wisconsin National and Community Service Board. **The deadline for submitting these materials is also 4:30 p.m. Central Time on November 24, 2014.** Note that all additional documents must be in hard copy/paper format in a sealed envelope **and must be received at the Board's address and in the room noted below.** Additional Documents will not be accepted after the deadline; if there are any missing Additional Documents, the entire application will be considered incomplete and will not be considered for funding.

### Submit required documents to:

Wisconsin National & Community Service Board  
Attn: Application Documents  
1 West Wilson Street, Room B274  
Madison, WI 53703

Please direct all questions about these Application Instructions in writing to the RFP Manager at [jessica.kewin@wisconsin.gov](mailto:jessica.kewin@wisconsin.gov) by **November 19, 2014 at 4:30 p.m. Central Time.**

**Please note: applicants have had issues with the U.S. Postal Service delivering packages by the guaranteed delivery date; therefore, we do not recommend applicants rely on this service to submit their additional documents by the deadline.**

2015-2016 Continuation Application  
Additional Documents Checklist

**Legal Applicant Name:** \_\_\_\_\_

**AmeriCorps Project Name:** \_\_\_\_\_

**Application ID # from eGrants Application:** \_\_\_\_\_

***Required Additional Documents on paper in a sealed envelope due in the WNCBSB office at 1 W. Wilson St., Room B274, Madison, WI 53703 by 4:30 p.m. CT on Monday, November 24, 2014:***

- Audit:** One (1) paper copy of the most recent A-133 audit, your organization's most recent financial audit, or other financial statements if you have not had an audit. An electronic copy must be sent separately when requested by Serve Wisconsin. Wisconsin state agencies and universities do not need to provide copies of the State audit.
- Program Evaluations:** If applicable, a printed version of the completed evaluation.
- Labor Union Concurrence** (if applicable)
- Budget Checklist (Attachment G) (N/A for Fixed-Amount Programs)**
- Federally Approved Indirect Cost Rate Agreement** (if applicable)
- Cost Allocation Plan** (if applicable)
- If using other federal funds for match, documentation from the other federal entity showing that those federal funds are permitted to be used as match toward a federal AmeriCorps grant**
- Program Alignment with Wisconsin State Service Plan Form** (page 21; see plan at: <http://www.servewisconsin.wi.gov/docview.asp?docid=24391&locid=162>)
- Completed 2015-2016 Continuation Application—Additional Documents Checklist** (completed copy of this Checklist)\*

*\* Though we expect you to submit this checklist with your additional documents, failure to include the checklist will not disqualify an application.*

**Please double-check your additional documents submission packet to ensure all of the above are included. Incomplete packets will be automatically rejected. These packets will not be opened by WNCBSB until after the deadline. You will receive an e-mail confirmation from the RFP Manager when your additional document packet is received by WNCBSB.**



# 2015-2016 AmeriCorps\*State Request for Proposals - Alignment with Wisconsin State Service Plan

The purpose of this form is to determine the alignment that AmeriCorps\*State applicants have with the Wisconsin State Service Plan. Submission of this form by **November 24, 2014 at 4:30 PM** is mandatory as part of your proposal. Responses will be considered in the development of trainings for the 2015-16 program year.

Please review the [Wisconsin State Service Plan here](#) and answer the questions below to the best of your ability. Some questions below may not be applicable to new applicants. Links to supporting documents are shown in blue. This form can be provided in alternate formats by contacting the RFP Manager.

**1. Which of the following eight (8) effective volunteer management practices does your program implement? These best practices are defined in the "Volunteering Reinvented: Human Capital Solutions for the Nonprofit Sector" report. Select all that apply.**

- |  |   |
|--|---|
| Market Research & Community Needs Assessment     | Strategic Planning to Maximize Volunteer Impact |
| Recruiting & Marketing to Prospective Volunteers | Interviewing, Screening & Selecting Volunteers  |
| Orienting & Training Volunteers                  | Ongoing Supervision & Management                |
| Recognition & Volunteer Development              | Measuring Outcomes & Evaluating Processes       |

**2. Has your organization registered with [Volunteer Connections](#) and posted volunteer opportunities?**

Yes      No

**3. Do you place members in rural communities as defined by the [rural-urban commuting area \(RUCA\)](#) codes?**

Yes      No

**4. Do you currently have, or are you interested in the development of a survey of the volunteer experience?**

Yes, currently have and use      No, do not have a survey      Interested in developing

**6. Does your program evaluation identify effective strategies/interventions and best practices? How?**

Yes      No      Not Applicable (new program)

**If yes, how? If no, why not? (maximum characters: 500)**

**7. Do you use the annual Wisconsin AmeriCorps member survey results to continuously enhance and improve your program?**

Yes      No      Not applicable (new program)

**8. Do you nominate exemplary volunteers, AmeriCorps members or others for the Governor's Service Awards?**

Yes      No

Please **print and submit** this form as part of your 2015-2016 AmeriCorps\*State additional documents packet.