



Fiscal Year 2003 Terrorism Early Alert and Strategic Planning System

***Program Guidelines
and
Application Kit***

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I. Background

The U.S. Department of Justice (DOJ), through the Office of the Assistant Attorney General, Office of Justice Programs (OJP) is providing additional financial assistance to the City of Tampa/Hillsborough County, Florida through the Fiscal Year 2002 Domestic Preparedness Program. This is an effort by ODP to pilot a promising software with a jurisdiction to determine if it is suitable for further dissemination. This financial assistance is being provided to assist this jurisdiction with site assessment and to establish terrorist threat and vulnerability analysis capabilities. These funds will be used for the protection of critical infrastructure; for costs related to the design, development, conduct, and evaluation of WMD exercises; and for costs associated with the implementation of terrorist threat and vulnerability assessment

The funds would be used to develop PC-based and Web-enabled Terrorism Early Alert and Strategic Planning System for the State of Florida through a demonstration project with the City of Tampa (and its partner, Hillsborough County). The proposed system will be comprised of a PC-based vulnerability assessment, risk management and planning application, and a Web-based information management system. The PC- and Web-based applications will provide emergency responding organizations with a consistent means to:

- 1) Collect intelligence, assess threats and share threat information
- 2) Identify and prioritize potential targets of terrorist attack and assess vulnerabilities from a wide spectrum of terrorist tactics
- 3) Quantify and prioritize risks posed to targets by terrorist tactics including analysis of consequences of terrorist events
- 4) Develop plans and allocate resources to mitigate risks posed by terrorist attacks
- 5) Generate resource requests for training, equipment, exercises and manpower based on risk assessment and strategic plans.

The City of Tampa, in concert with State and local emergency responders, will work with a software developer to establish requirements, develop the design, and provide testing and evaluation to ensure these products meet the above objectives.

II. Program Guidelines

A. Authorized Program Purpose and Expenditures

Funding for the Fiscal Year 2002 Terrorism Early Alert and Strategic Planning System is authorized by: 1) Public Law 107-77, the U.S. Departments of Commerce, Justice, and State; the Judiciary; and related Agencies Appropriations Act of 2002; 2) Public Law 107-117, the Department of Defense and Emergency Supplemental Appropriations for Recovery and Response to Terrorist Attacks on the United States Act of 2002; and 3) Public Law 104-132, the Anti-Terrorism and Effective Death Penalty Act of 1996. The Fiscal Year 2002 Terrorism Early Alert and Strategic Planning System seeks to build on progress made in the last three years towards enhancing the capabilities of state and local first responder agencies by allowing for the purchase of a PC-based software system that will assist in conducting threat, vulnerability and risk assessments; develop anti-terrorism plans; and share data across jurisdictions.

The FY 2002 Terrorism Early Alert and Strategic Planning System will address other critical domestic preparedness needs, such as the purchase of equipment to enhance the physical security of critical infrastructure and for coverage of WMD exercise-related costs.

B. Unauthorized Program Expenditures

Grant funds awarded under this program may not be used for the procurement of equipment items unrelated to the FY 2002 Terrorism Early Alert and Strategic Planning System, equipment procured prior to the award start date of the grant, or for items otherwise budgeted with state or local funds.

III. Funding Availability and Eligible Applicants

Eligible applicants and funding amounts are specified in the table below. Grants must be signed by the chief executive officer of the State agency designated by the governor of the State to administer this program.

Eligible Applicants

<u>Jurisdiction</u>	<u>Award Amount</u>
1) City of Tampa/Hillsborough County	\$300,000.00

IV. Application Guidance

Applications need to be prepared according to the directions contained in Section V and Section VI of this booklet.

The Office of Justice Programs, Office for Domestic Preparedness now only accepts applications electronically through the Grant Management System (GMS) located on the OJP web site. Instructions regarding electronic submissions through GMS are provided in Appendix A and on the OJP web site at www.ojp.usdoj.gov/fundopps.htm. Assistance with GMS may also be obtained by using the following toll-free telephone number: 1-888-549-9901.

Questions regarding the application process, equipment procurement issues, programmatic questions involving application submission requirements, application content requirements, or other administrative inquiries relating to this program can be directed to the Office of Justice Programs, Office for Domestic Preparedness at: 1-800-368-6498.

V. Application Requirements

A. On-Line Application: The on-line application (See Appendix A) must be completed and submitted by the applicant using the OJP GMS system described

above. This on-line application replaces the following previously required paper forms:

- Standard Form 424, Application for Federal Assistance
- Standard Form LLL, Disclosure of Lobbying Activities
- OJP Form 4000/3, Assurances
- OJP Form 4061/6, Certifications
- Equipment Coordination Certification
- Non-Supplanting Certification

When completing the on-line application, the applicant should identify their submissions as new, nonconstruction applications. These grants are offered by the U.S. Department of Justice, Office of Justice Programs. The program title listed in the Catalog of Federal Domestic Assistance (CFDA) is "Office of Justice Programs Fiscal Year 2002 Terrorism Early Alert and Strategic Planning System" When referring to this title, please use the following CFDA number: 16.007. The project period will be for a period not to exceed 36 months.

B. Supplemental Documents: The following documents must be completed and attached to the on-line application as file attachments:

- **Program Narrative:** Applicant must provide a Program Narrative. The Program Narrative should contain a brief discussion of the information outlined in Section VI of this booklet. Information that may adversely impact the jurisdiction's response plans should be clearly identified and marked "Sensitive Information." This document should be attached under "Program Narrative."
- **Budget Detail Worksheet:** Applicant must include a detailed budget for the project. The budget must be complete, reasonable and cost-effective. The budget should also provide the basis for computation of all program-related costs. This document is included in Appendix B and should be attached under "Budget Detail Worksheet."
- **Equipment Coordination Certification:** Applicant must include a certification that the equipment to be procured will be coordinated with other ongoing Federal initiatives related to the creation of an antiterrorism risk management and planning system for state and local responders, and with the State's domestic preparedness strategy. A copy of the required certification is provided in Appendix C, and should be attached under "Other Program Attachments."

VI. Program Narrative

The program narrative should be brief and include the following information:

1. Program Implementation: Applicant must provide a brief justification for the equipment to be acquired with FY 2002 Terrorism Early Alert and Strategic Planning System funds and discussion of how it will enhance the jurisdiction's WMD terrorism preparedness, prevention, and response capabilities. Applicant

should also indicate how the use of these funds has been coordinated with other ongoing Federal initiatives and with the state's domestic preparedness strategy.

2. Project Performance Measurement: To ensure compliance with the Government Performance and Results Act (GPRA), Public Law 103-62, the applicant is required to collect and report data which measure the results of the programs implemented with this grant. To ensure accountability of these data, for which the Office of Justice Programs is responsible, the following performance measure is provided:

Number of local jurisdictions that enhanced their capacity to respond to a weapon of mass destruction with new equipment.

The award recipients will be required to collect and report data in support of this measure. Specifically, these data are: 1) was the Terrorism Early Alert and Strategic Planning System ordered by the end of the grant award period; and 2) was the risk profiler equipment distributed by the end of the grant award period.

Your assistance in obtaining this information will facilitate future program planning and will allow the Office of Justice Programs to provide the Congress with measurable results of federally funded programs.

VII. Administrative Requirements

A. General Requirements

1. Single Point of Contact (SPOC) Review: Executive Order 12372 requires applicants from state and local units of government or other organizations providing services within a state to submit a copy of the application to the state SPOC, if one exists and if this program has been selected for review by the state. Applicant must contact their state SPOC to determine if the program has been selected for state review. The date that the application was sent to the SPOC or the reason such submission is not required should be provided.

2. Civil Rights: All recipients of federal grant funds are required to comply with nondiscrimination requirements contained in various federal laws. Applicant should consult the assurances to review the applicable legal and administrative requirements of the statute that governs OJP-funded programs or activities. Section 809(c)(1), Omnibus Crime Control and Safe Streets Act of 1968, as amended, 42 U.S.C. 3789(d) of the Act provides that "no person in any state shall on the grounds of race, color, religion, national origin, or sex be excluded from participation in, be denied the benefits of, or be subjected to discrimination under or denied employment in connection with any programs or activity" in which federal law enforcement assistance is provided under this chapter. Recipients of assistance under the OJP Office for Domestic Preparedness are subject to the provisions of Section 809(c) of the Act; Title VI of the Civil Rights Act of 1964; Section 504 of the Rehabilitation Act of 1973, as amended; Title IX of the Education Amendments of 1972; the Age Discrimination Act of 1975; and the U.S. Department of Justice Non-Discrimination Regulations, 28 CFR part 42, subparts C, D, E, and G.

If any court or administrative agency makes a finding of discrimination on the

grounds of race, color, religion, national origin, gender, disability, or age against a recipient of funds after a due process hearing, the recipient must agree to forward a copy of the finding to the OJP Office of Civil Rights. If the applicant is applying for a grant of \$500,000 or more, U.S. Department of Justice regulations (28 CFR 42.301) require an Equal Employment Opportunity Plan. The plan should be included with the application submission if it is not already on file.

3. Administrative Provisions: For the purposes of the City of Tampa & Hillsborough County, Florida Risk Profiler Project, the limitations cited in this section and all other administrative provisions authorized under sections 801–809 of the of the Omnibus Crime Control and Safe Streets Act of 1968, as amended (hereafter referred to as the Act), shall apply.

a. Land acquisition. No funds shall be used for land acquisition.

b. Civil justice. No funds or other assistance shall be used with respect to civil justice matters except to the extent that such civil justice matters bear directly and substantially on criminal justice matters or are inextricably intertwined with criminal justice matters.

c. Federal law enforcement personnel. Nothing in the enabling legislation authorizes the use of federal law enforcement personnel to investigate violations of criminal law other than violations with respect to which investigation is authorized by other provisions of the law.

d. Direction, supervision, and control. Nothing in the enabling legislation shall be construed to authorize the Attorney General or the federal law enforcement community to exercise any direction, supervision, or control over any police force or other criminal justice agency of an applicant for federal law enforcement assistance.

B. Financial Requirements

1. Non-Supplanting Certification: This certification, which is a required component of the on-line application, affirms that federal funds will be used to supplement existing funds for equipment purchases and will not replace (supplant) funds that have been appropriated for the same purpose. Potential supplanting will be addressed in the application review as well as in the pre-award review, post-award monitoring, and the audit. Applicant/warranty may be required to supply documentation certifying that a reduction of non-Federal resources occurred for reasons other than the receipt or expected receipt of federal funds.

2. Match Requirement: None

3. Assurances: The on-line application includes a list of assurances that the applicant must comply with in order to receive Federal funds under this program. It is the responsibility of the recipient of the Federal funds to fully understand and comply with these requirements. Failure to comply may result in the withholding of funds, termination of the award, or other sanctions. You will be agreeing to these assurances when you submit your application on-line through GMS.

4. Certifications Regarding Lobbying; Debarment, Suspension, and Other

Responsibility Matters; and Drug-Free Workplace Requirement: This certification, which is a required component of the on-line application, commits the applicant to compliance with the certification requirements under 28 CFR part 69. New Restrictions on Lobbying and 28 CFR part 67. Government-wide Debarment and Suspension (Nonprocurement) and Government-wide Requirements for a Drug-Free Workplace (Grants).

The certification will be treated as a material representation of the fact upon which reliance will be placed by the U.S. Department of Justice in awarding grants.

5. Suspension or Termination of Funding: The Office of Justice Programs may suspend or terminate funding, in whole or in part, or other measures may be imposed for any of the following reasons:

- Failure to substantially comply with the requirements or statutory objectives of the Violent Crime Control and Law Enforcement Act of 1994, program guidelines issued thereunder, or other provisions of federal law.
- Failure to make satisfactory progress toward the goals or strategies set forth in this application.
- Failure to follow grant agreement requirements or standard or special conditions.
- Proposition or implementation of substantial plan changes to the extent that, if originally submitted, the application would not have been selected for funding.
- Failure to submit required reports.
- Filing a false certification in this application or other report or document.

Before taking action, OJP will provide the grantee reasonable notice of intent to impose measures and will make efforts to resolve the problem informally. Hearing and appeal procedures must comport with U.S. Department of Justice regulations in 28 CFR part 18.

VIII. Reporting Requirements

The following reports are required of all program participants:

- **Financial Status Reports (Standard Form 269A):** Financial Status Reports are due within 45 days of the end of each calendar quarter. A report must be submitted for every quarter the award is active (including partial calendar quarters, as well as for periods where no grant activity occurs). The OJP Office of the Comptroller will provide a copy of this form in the initial award package. Future awards and fund drawdowns will be withheld if these reports are delinquent. The final financial report is due 120 days after the end date of the award period.

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- **Categorical Assistance Progress Reports (OJP Form 4587/1):** Categorical Assistance Progress Reports are due within 30 days after the end of the reporting periods, which are June 30 and December 31, for the life of the award. The OJP Office of the Comptroller will provide a copy of this form in the initial award package. Future awards and fund drawdowns will be withheld if these reports are delinquent. The final programmatic progress report is due 120 days after the end date of the award period. These reports should include the following information on the software:
 - Expectations
 - Issues
 - Implementation
 - Overall effectiveness
 - **Financial and Compliance Audit Report:** Recipients that expend \$300,000 or more of Federal funds during their fiscal year are required to submit an organization-wide financial and compliance audit report. The audit must be performed in accordance with the U.S. General Accounting Office Government Auditing Standards and OMB Circular A-133. Audit reports are currently due to the Federal Audit Clearinghouse no later than nine months after the end of the recipient's fiscal year.


In addition, the Attorney General and the Comptroller General of the United States shall have access to any books, documents, or records of recipients of Fiscal Year 2002 New York Equipment Replacement Program Assistance for audit and examination purposes, provided that, in the opinion of the Attorney General or the Comptroller General, these documents are related to the receipt or use of such assistance. The grantee will also give the sponsoring agency or the Comptroller General, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the grant.

Appendix A


On-Line Application Instructions and Job Aid

GMS – Applicant Procedures

Applicant - OJP Grants Management System Welcome Page (AP-1)

Description	Screen
<p>Welcome to the “Applicant Procedures (AP)” for the “OJP Grants Management System.” These Job Aids will guide you through the procedures for using the on-line grant system. If you have additional questions, please contact the Help Desk at 1-888-549-9901 or send an email to: ojp@ojp.usdoj.gov</p> <p>OJP Welcome Page</p> <p>1) Click on “New Applicants click here first” to view instructions to better assist you in navigating through the system.</p> <p>2) Click on “GMS Sign-In” to go to the “Applicant Sign In” page of the GMS, if you already have an account on the “Grants Management System.”</p> <p>3) Click on “New User? Register Here” to go to the “Registration Information” page. On this page you will create a user profile and open an account in the system. You can also reach the “Registration Information” page by clicking on the “First Time User” link on the “Applicant Sign In” page. See Job Aid AP-3 for help on the “Registration Information” page.</p> <p>4) Click on “LLEBG Sign-In” to sign in for the Local Law Enforcement Block Grants Program.</p> <p>5) Click on “Home” to load the OJP main home page.</p>	

GMS – Applicant Procedures
Applicant - Sign In Screen (AP-2)

Description	Screen
<p>Applicant Sign In page: use this screen to sign in to GMS if you are a returning user or use this screen to begin the process of applying for access to the system.</p> <ol style="list-style-type: none">1) Enter your “User ID.” The “User ID” is case sensitive.2) Enter your “Password.” The “Password” is case sensitive.3) Click on “Sign In” after entering your “User ID” and “Password.”4) Click on the “First Time User” link if you are a first time user. This link will help you create an account for the GMS system. You will also create a “User ID” and “Password.”5) Click on “Forgotten your password” to retrieve a lost password. Or, call the GMS Hotline at 1-888-549-9901 option 5 to create a new password. See Job Aid AP-20 for additional information.	

GMS – Applicant Procedures

Applicant - First Time User Registration Information (AP-3)

Description	Screen																																							
<p>First Time User Registration Information: use this page to create a user profile and open an account in the Grants Management System.</p> <p>1) Enter the applicant’s “Employer ID Number (EIN).” Each employer received an “EIN” from the Internal Revenue Service. Your organization should provide you with the “EIN.” Generally, this number can be obtained from your organization’s accountant or comptroller.</p> <p>2) Enter the “Legal Name” of your organization. The “Legal Name” is the name of the parent organization. For example, if you work for the City of Seattle in the Human Services Division, your “Legal Name” would be the City of Seattle. This will be the name used to generate an award document.</p> <p>3) Enter the “Organizational Unit.” The “Organizational Unit” is a subset of the “Legal Name.” For example, if you work for the City of Seattle in the Human Services Division, your “Organizational Unit” is the Human Services Division.</p> <p>4) Enter the “Address” to where official correspondence and notification should be sent. This will be the address of record. This address should be the business address of the authorized signing authority for your grant. Then enter the “City” and use the drop down list to select the “State.”</p> <p>5) Enter the “Zip Code.” You must enter the full 9 digit zip code. Enter the normal 5 digit zip code in the first field and the last 4 digits in the second field. If you do not know your full 9 digit zip code click on the link “Need help for Zip+4?”</p> <p>6) Use the drop down list and select the “Type of Applicant.” If the drop down list does not have an adequate description of your organization, select “Other.” (Note: If you select other you will be required to enter a description for type of other.)</p> <p>7) Use the drop down list to select the “Prefix” to be used before your name (i.e., Dr., Mrs., etc.). If the appropriate “Prefix” is not listed, select “Other.” If “Other” is selected, type in your preferred prefix in the “Prefix: (Other)” field. If you did not choose “Other” skip the “Prefix: (Other)” field.</p>	<p style="text-align: center;">Registration Information *Mandatory fields</p> <table border="1"> <tr> <td>*Employer ID Number (EIN):</td> <td>1</td> <td><input type="text"/> - <input type="text"/></td> </tr> <tr> <td>*Legal Name: (Legal Jurisdiction Name)</td> <td>2</td> <td><input type="text"/></td> </tr> <tr> <td>*Organizational Unit</td> <td>3</td> <td><input type="text"/></td> </tr> <tr> <td>*Address Line 1:</td> <td>4</td> <td><input type="text"/></td> </tr> <tr> <td>Address Line 2:</td> <td></td> <td><input type="text"/></td> </tr> <tr> <td>*City:</td> <td></td> <td><input type="text"/></td> </tr> <tr> <td>County:</td> <td></td> <td><input type="text"/></td> </tr> <tr> <td>*State:</td> <td></td> <td>Select a State <input type="text"/></td> </tr> <tr> <td>*Zip Code:</td> <td>5</td> <td><input type="text"/> - <input type="text"/> Need help for ZIP+4?</td> </tr> <tr> <td>*Type of Applicant:</td> <td>6</td> <td>Select a Type of Applicant <input type="text"/></td> </tr> <tr> <td>Type of Applicant (other):</td> <td></td> <td><input type="text"/></td> </tr> <tr> <td>*Name Prefix:</td> <td>7</td> <td>Prefix <input type="text"/></td> </tr> <tr> <td>Prefix (Other)</td> <td></td> <td><input type="text"/></td> </tr> </table>	*Employer ID Number (EIN):	1	<input type="text"/> - <input type="text"/>	*Legal Name: (Legal Jurisdiction Name)	2	<input type="text"/>	*Organizational Unit	3	<input type="text"/>	*Address Line 1:	4	<input type="text"/>	Address Line 2:		<input type="text"/>	*City:		<input type="text"/>	County:		<input type="text"/>	*State:		Select a State <input type="text"/>	*Zip Code:	5	<input type="text"/> - <input type="text"/> Need help for ZIP+4?	*Type of Applicant:	6	Select a Type of Applicant <input type="text"/>	Type of Applicant (other):		<input type="text"/>	*Name Prefix:	7	Prefix <input type="text"/>	Prefix (Other)		<input type="text"/>
*Employer ID Number (EIN):	1	<input type="text"/> - <input type="text"/>																																						
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*City:		<input type="text"/>																																						
County:		<input type="text"/>																																						
*State:		Select a State <input type="text"/>																																						
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Type of Applicant (other):		<input type="text"/>																																						
*Name Prefix:	7	Prefix <input type="text"/>																																						
Prefix (Other)		<input type="text"/>																																						

First Time User Registration Information continued:

8) Enter your first name. Then enter your middle initial. Do not put a period after your initial. Then enter your last name in the next field. Then, enter your job title in the “**Title**” field.

9) Enter your “**Phone Number**” phone number, beginning with your area code. Enter your phone extension if appropriate. If you have a fax number, then please enter it in the next field. Next, enter the “**User E-Mail Address**.”

10) Create and enter a “**User ID.**” This ID must be a minimum of 6 characters and must not begin with a number. You will use this ID to access the system. The “**User ID**” is case sensitive.

11) Create and enter a “**Password.**” The password must be a minimum of 8 characters and must not begin with a number. To confirm your password, type the password again in the “**Password (confirmation)**” field. Keep records of your “**User ID**” and “**Password**” and remember that they are case sensitive.

12) Check “**Yes**” if you are the Signing Authority. The Signing Authority is the Authorized Representative of your organization who is empowered to receive funds on behalf of the organization. In addition, the Authorized Representative must be legally authorized to enter into agreements on the organization’s behalf. Check “**No**” if you are not the Signing Authority. If you check “**No**,” a new window will appear titled “**Authorized Representative Information.**” Enter the name and contact information for the Authorized Representative in this window. If you check “**Yes**,” a new window titled “**Alternate Contact Information**” will appear asking you for contact information for a person to contact if you are not available. This person will be the alternate point of contact for the application.

13) Click “**Create**” once you have filled in the contact information. After clicking “**Create**,” a new window will appear stating that “**Your information has been saved.**” If you want to check or change this information, click “**Go Back**”. Otherwise, click “**Close Window**” and you will return to the original “**Registration Information**” page.

14) Click “**Create Account**” if you are satisfied with the information you have entered and wish to continue. Click “**Go Back**” if you wish to delete all of the information you have entered and return to the original “**Registration Information**” page without saving your work from this window.

*User First Name & Middle Initial (if any): 8

*User Last Name:

Name Suffix: Suffix

Suffix (Other):

* Title:

* Phone Number: 9 Ext:

Fax Number:

* User E-Mail Address:

* User ID (min. 6 characters): 10

* Password (min. 8 characters): 11

* Password (confirmation):

* Are you the Signing Authority? 12 Yes No

Please make sure that all of the above information is correct before proceeding. Pressing Create Account will establish an account that will allow access to the on-line OJP Grant Management System.

Create Account

Go Back

14

14

Alternate Contact Information - Netscape

File Edit View Go Communicator Help

Alternate Contact Information

*Mandatory fields:

* Name Prefix: Prefix

Prefix (Other):

* User First Name & Middle Initial (if any):

* User Last Name:

Name Suffix: Suffix

Suffix (Other):

* Title: Title

Title (Other):

* Phone Number: Ext:

Fax Number:

* User E-Mail Address:

Please make sure all values are correct before proceeding.

Create 13 Go Back 13

Authorized Representative Information - Netscape

File Edit View Go Communicator Help

Authorized Representative Information

*Mandatory fields:

* Name Prefix: Prefix

Prefix (Other):

* User First Name & Middle Initial (if any):

* User Last Name:

Name Suffix: Suffix

Suffix (Other):

* Title: Title

Title (Other):

* Phone Number: Ext:

Fax Number:

* User E-Mail Address:

Please make sure all values are correct before proceeding.


Create 13 Go Back 13

GMS – Applicant Procedures
Applicant - First Time Applicant Sign In (AP-4)

Description	Screen
<p>Applicant Sign In: use this page to sign in after you have entered the registration information.</p> <p>1) Enter your “User ID” in the field marked “User ID.” In this example, the “User ID” is “johnsmith.” Remember that the “User ID” is case sensitive. For example, if you type in “JOHNSMITH” you will receive an error message. In this example, the proper “User ID” is “johnsmith” in all lower case letters.</p> <p>2) Enter your “Password” in the field marked “Password.” This is the same “Password” you selected earlier, as referenced in Job Aid AP-3. Remember that the “Password” is case sensitive.</p> <p>3) Click “Sign In” to access your account. You can now begin the process of applying for an OJP grant. Your “User ID” and “Password” are immediately active on the system. You can fill out your application completely; <u>however</u>, you may not submit your application to the Program Office until the Program Office has approved your “User ID” and “Password” for use in the system.</p>	

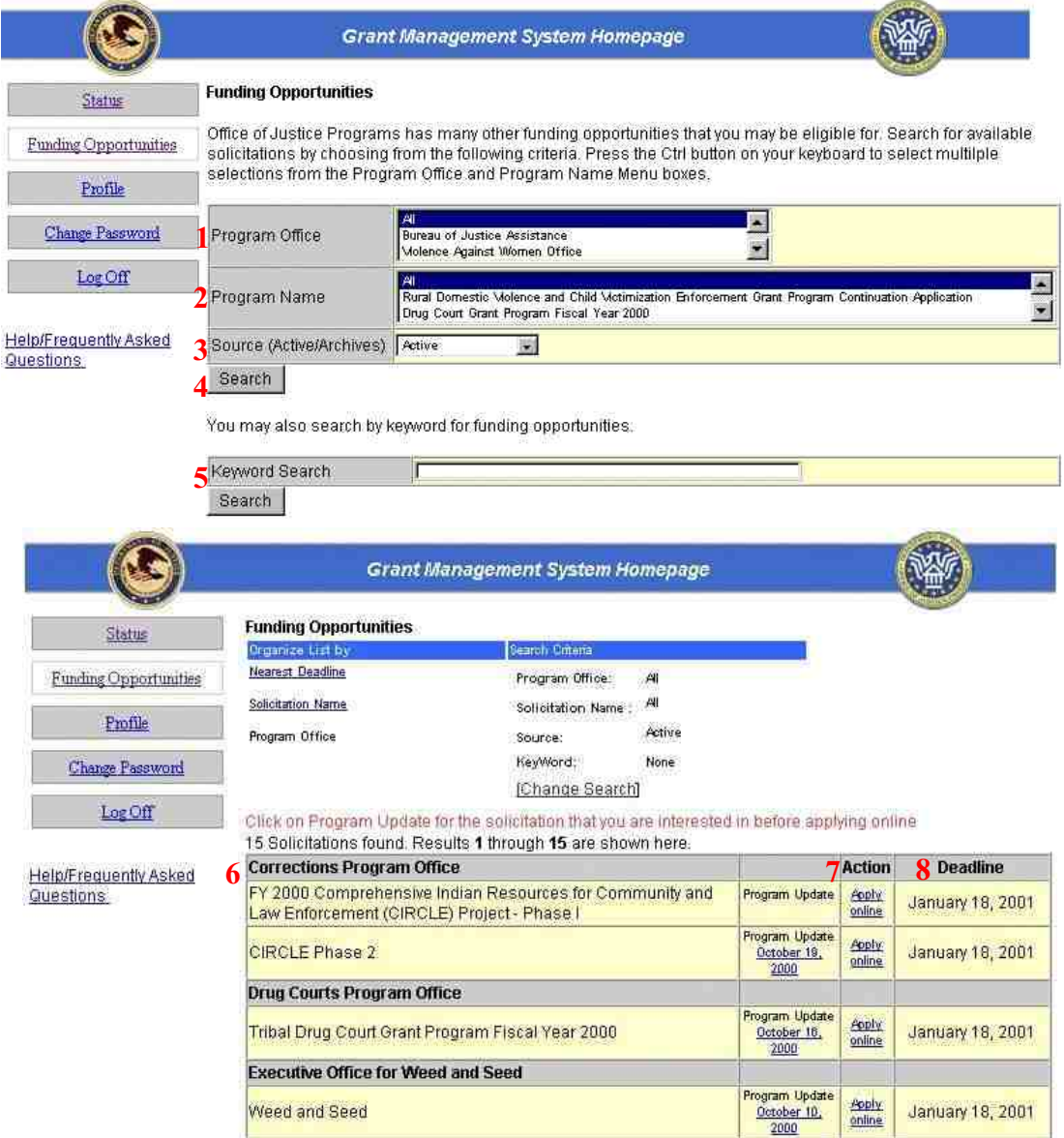
GMS – Applicant Procedures

Applicant - First Time Applicant Sign In - Main Applicant Screen (AP-5)

Description	Screen
<p>Main Applicant Screen: after your “User Id” and “Password” have been successfully entered, you are logged into the system and will be taken to the “Grants Management System Homepage.”</p> <p>1) Click on “Status” to view the status of any pending applications that you have submitted. If you have pending applications that were submitted under the “User Id” and “Password” that you entered at “Sign In,” each application will be listed for you. If you have no applications pending, you will see the message “Currently, there are no applications in GMS for you.” If you do have applications pending, see Job Aid AP-17.</p> <p>2) Click on “Funding Opportunities” to view any available funding opportunities. Use this link to review available funding. See Job Aid AP-6.</p> <p>3) Click on “Profile” to view or update an existing registration information. See Job Aid AP-18.</p> <p>4) Click on “Change Password” to change the password associated with the “User Id” you used at sign in. See Job Aid AP-19.</p> <p>5) Click on “Log Off” to log out of the “Grants Management System” and exit the program.</p>	 <p>1 Status Currently, there are no applications in GMS for you.</p> <p>2 Funding Opportunities Office of Justice Programs has many other funding opportunities that you may be eligible for. To review these opportunities or to start a new application click on Funding Opportunities.</p> <p>3 Profile</p> <p>4 Change Password</p> <p>5 Log Off</p> <p>Help/Frequently Asked Questions</p>

GMS – Applicant Procedures

Applicant - Funding Opportunities (AP-6)

Description	Screen																					
<p>Funding Opportunities: utilize the following screens to search for funding opportunities for which you may be eligible to apply for. Click on “Funding Opportunities” at the upper left of the screen to begin.</p> <ol style="list-style-type: none"> 1) Select the OJP “Program Office” whose funding opportunities you wish to review. The system defaults to search all program offices. 2) Select the “Program Name” that you want to search. The system defaults to search all program names. 3) Choose the “Source” of the solicitation you wish to review. The system will default to review “Active” solicitations (those solicitations for which the OJP is currently accepting applications). 4) Click on the “Search” button to begin the search according to the options you selected above. 5) Searches can be done utilizing key words. Enter the keyword in the field entitled “Keyword Search” and click the “Search” button. 6) The results for this search (“All Program Offices, All Program Names, Active Solicitations”) are displayed. 7) Click on the “Apply online” link next to the solicitation that you wish to apply for to begin an application. 8) Notice the “Deadline” date for submitting applications for each solicitation. 	 <p>The screenshot shows the 'Grant Management System Homepage' with a navigation menu on the left and a search interface. The search form includes dropdown menus for 'Program Office' (selected: Bureau of Justice Assistance, Violence Against Women Office), 'Program Name' (selected: Rural Domestic Violence and Child Victimization Enforcement Grant Program Continuation Application, Drug Court Grant Program Fiscal Year 2000), and 'Source' (selected: Active). A 'Search' button is highlighted with a red '4'. Below the search form, a 'Keyword Search' field is highlighted with a red '5'. The search results table is highlighted with a red '6' and contains the following data:</p> <table border="1" data-bbox="1123 1112 1942 1404"> <thead> <tr> <th data-bbox="1123 1112 1627 1136">6 Corrections Program Office</th> <th data-bbox="1627 1112 1785 1136">7 Action</th> <th data-bbox="1785 1112 1942 1136">8 Deadline</th> </tr> </thead> <tbody> <tr> <td data-bbox="1123 1136 1627 1185">FY 2000 Comprehensive Indian Resources for Community and Law Enforcement (CIRCLE) Project - Phase I</td> <td data-bbox="1627 1136 1785 1185">Program Update Apply online</td> <td data-bbox="1785 1136 1942 1185">January 18, 2001</td> </tr> <tr> <td data-bbox="1123 1185 1627 1234">CIRCLE Phase 2</td> <td data-bbox="1627 1185 1785 1234">Program Update Apply online</td> <td data-bbox="1785 1185 1942 1234">January 18, 2001</td> </tr> <tr> <td data-bbox="1123 1234 1627 1282">Drug Courts Program Office</td> <td data-bbox="1627 1234 1785 1282">Program Update Apply online</td> <td data-bbox="1785 1234 1942 1282">January 18, 2001</td> </tr> <tr> <td data-bbox="1123 1282 1627 1331">Tribal Drug Court Grant Program Fiscal Year 2000</td> <td data-bbox="1627 1282 1785 1331">Program Update Apply online</td> <td data-bbox="1785 1282 1942 1331">January 18, 2001</td> </tr> <tr> <td data-bbox="1123 1331 1627 1380">Executive Office for Weed and Seed</td> <td data-bbox="1627 1331 1785 1380">Program Update Apply online</td> <td data-bbox="1785 1331 1942 1380">January 18, 2001</td> </tr> <tr> <td data-bbox="1123 1380 1627 1404">Weed and Seed</td> <td data-bbox="1627 1380 1785 1404">Program Update Apply online</td> <td data-bbox="1785 1380 1942 1404">January 18, 2001</td> </tr> </tbody> </table>	6 Corrections Program Office	7 Action	8 Deadline	FY 2000 Comprehensive Indian Resources for Community and Law Enforcement (CIRCLE) Project - Phase I	Program Update Apply online	January 18, 2001	CIRCLE Phase 2	Program Update Apply online	January 18, 2001	Drug Courts Program Office	Program Update Apply online	January 18, 2001	Tribal Drug Court Grant Program Fiscal Year 2000	Program Update Apply online	January 18, 2001	Executive Office for Weed and Seed	Program Update Apply online	January 18, 2001	Weed and Seed	Program Update Apply online	January 18, 2001
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Executive Office for Weed and Seed	Program Update Apply online	January 18, 2001																				
Weed and Seed	Program Update Apply online	January 18, 2001																				

Funding Opportunities continued: utilize the following screens to search for funding opportunities for which you may be eligible to apply for.

9) Select the name of the “**Program Office**” whose funding solicitations you wish to review. To select multiple program offices, press and hold the CTRL key on the keyboard while clicking on the names of the “**Program Offices.**”

10) Select the “**Program Name**” of the solicitation you wish to review. To select multiple program names, press and hold the CTRL key on the keyboard while clicking on the “**Program Names**” you wish to review.

11) Click the “**Search**” button to begin the search according to the criteria you selected above.

12) Read the displayed results for the search. In this situation, we selected to view only the solicitations for proposal from the “**Executive Office for Weed and Seed.**”

13) Click on the “**Apply online**” link next to the solicitation that you wish to apply for to begin an application.

14) Notice the “**Deadline**” date for submitting applications for each solicitation.

Grant Management System Homepage

[Status](#)

[Funding Opportunities](#)

[Profile](#)

[Change Password](#)

[Log Off](#)

[Help/Frequently Asked Questions](#)

Funding Opportunities

Office of Justice Programs has many other funding opportunities that you may be eligible for. Search for available solicitations by choosing from the following criteria. Press the Ctrl button on your keyboard to select multiple selections from the Program Office and Program Name Menu boxes.

Program Office	9	<div style="border: 1px solid gray; padding: 2px;"> Drug Courts Program Office Executive Office for Weed and Seed </div>
Program Name	10	<div style="border: 1px solid gray; padding: 2px;"> All Rural Domestic Violence and Child Victimization Enforcement Grant Program Continuation Application </div>
Source (Active/Archives)		<div style="border: 1px solid gray; padding: 2px;"> Active </div>

[Help/Frequently Asked Questions](#) **11**

You may also search by keyword for funding opportunities.

Keyword Search

Grant Management System Homepage

[Status](#)

[Funding Opportunities](#)

[Profile](#)

[Change Password](#)

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[Help/Frequently Asked Questions](#)

Funding Opportunities

Organize List by	Search Criteria
Nearest Deadline	Program Office: Executive Office for Weed and Seed
Solicitation Name	Solicitation Name : All
Program Office	Source: Active
	KeyWord: None
	[Change Search]

Click on [Program Update](#) for the solicitation that you are interested in before applying online

3 Solicitations found. Results 1 through 3 are shown here.

12 Executive Office for Weed and Seed		13 Action	14 Deadline
Weed and Seed	Program Update October 10, 2000	Apply online	January 18, 2001
Executive Office for Weed and Seed Competitive Solicitation	Program Update	Apply online	January 18, 2001
Weed and Seed Program Support Grants	Program Update	Apply online	January 18, 2001

GMS – Applicant Procedures

Applicant - Applicant Handbook Main Screen Introduction (AP-7)

Description	Screen
<p>Main Screen Introduction: use the tabs across the top of the screen to access information about the status of your application(s).</p> <p>1) Click on the “Application” tab to access the “Applicant Handbook” to input all applicant information and to submit the application.</p> <p>2) This tab is not currently active. However in the future, once your application has been approved for funding by OJP, the “Award” screen will step you through the process of accepting your award.</p> <p>3) This tab is not currently active.</p> <p>4) This tab is not currently active.</p> <p>5) Click here to send and receive email with the Program Office. All email sent or received can also be viewed.</p> <p>6) Use the pull down menu to select and then access other applications that you have submitted or are currently working on.</p>	

Main Screen Introduction continued: use the tabs across the top of the screen to access information about the status of your application(s).

7) Click **“Overview”** to begin the **“Application Handbook.”** Initial information about your application will be gathered. See Job Aid AP-09.

8) Click **“Applicant Information”** to review or modify the contact information for your organization. See Job Aid AP-09.

9) Click **“Project Information”** to input the project information (descriptive title of project, geographic areas affected by the project, project dates, all affected congressional districts & estimated funding amounts). See Job Aid AP-10.

10) Click **“Budget and Program Attachments”** to attach the **“Budget Detail Worksheet,”** the **“Budget Narrative”** and **“Other Program Attachments.”** See Job Aid AP-11.

11) Click **“Assurances & Certifications”** to review the contact information for the Authorized Representative and to read and accept the assurances and certifications. See Job Aid AP-12.

12) Click **“Review SF 424”** to review the entire application package. See Job Aid AP-13.

13) Click **“Submit Application”** to review the status of the application and/or to submit the application. See Job Aid AP-14.

14) Click here for additional help and to view Job Aids for the Grants Management System.

Weed and Seed 2000-W211-MD-WS

Application | Award | Reporting | Payments | Correspondence | Switch to ...

Application Handbook Overview

7 Overview

8 Applicant Information

9 Project Information

10 Budget and Program Attachments

11 Assurances and Certifications

12 Review SF 424

13 Submit Application

14 Help/Frequently Asked Questions

GMS Home

Log Off

This handbook allows you to complete the application process for applying to the Weed and Seed Program Support Grants. At the end of the application process you will have the opportunity to view and print the SF-424 form.

Type of Submission

Application	Preapplication
<input type="radio"/> Construction	<input type="radio"/> Construction
<input type="radio"/> Non-Construction	<input type="radio"/> Non-Construction

Type of Application

If Revision, select appropriate option

If Other, specify

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

b. No Program is not covered by E.O. 12372

c. N/A Program has not been selected by state for review

Save and Continue

GMS – Applicant Procedures

Applicant - Application Handbook Overview (AP-8)

Description	Screen
<p>Application Handbook Overview: use this screen to enter initial information about your application.</p> <p>1) Check “Construction” if this application requests funding to be used entirely or partially for a “Construction” project. If not, check “Non-Construction.”</p> <p>2) Check “Construction” if this pre-application will request funding to be used entirely or partially for a “Construction” project. If this is another type of pre-application check “Non-Construction.”</p> <p>3) Use the drop down list to select the application type.</p> <p>4) Skip this field unless the “Type of Application” is a “Revision” grant. If the application is for a “Revision” grant use the drop down list to select the type of revision. If the revision is not for an award amount or a project duration change, select “Other” from the list.</p> <p>5) Skip this field unless “Other” is selected from the “Type of Revision” drop down menu. If “Other” is selected, enter the type of revision.</p> <p>6) Check “Yes” if the applicant is subject to review by the “State Executive Order 12372.” If you are subject to review, check “Yes” and use the drop down menu to select the date on which the application was made available to the state for review.</p> <p>7) Check “No” if the program is not covered by the “executive order 12372.” Check “N/A” if the program has not been selected for review.</p> <p>8) Click “Save and Continue” when finished.</p>	<p>The screenshot shows the 'Application Handbook Overview' screen. At the top, there is a blue header with the text 'Weed and Seed 2000-W211-MD-WS' and two circular logos. Below the header is a navigation bar with tabs for 'Application', 'Award', 'Reporting', 'Payments', and 'Correspondence', along with a 'Switch to ...' dropdown menu. The main content area is titled 'Application Handbook Overview' and contains a form with several sections:</p> <ul style="list-style-type: none"> Overview: This handbook allows you to complete the application process for applying to the Weed and Seed Program Support Grants. At the end of the application process you will have the opportunity to view and print the SF-424 form. Type of Submission: This section has two columns: 'Application' and 'Preapplication'. Each column has radio buttons for 'Construction' and 'Non-Construction'. A red '1' is next to the 'Construction' radio button in the 'Application' column, and a red '2' is next to the 'Construction' radio button in the 'Preapplication' column. Type of Application: This section has a dropdown menu for 'Type of Application' (red '3') and a dropdown menu for 'Type of Revision' (red '4'). Below these is a text input field for 'If Other, specify' (red '5'). Is application subject to review by state executive order 12372 process?: This section has three radio buttons: 'Yes' (red '6'), 'No' (red '7'), and 'N/A' (red '7'). The 'Yes' option has a date selector below it. <p>At the bottom of the form is a 'Save and Continue' button (red '8'). On the left side of the screen, there are several links: 'Overview', 'Applicant Information', 'Project Information', 'Budget and Program Attachments', 'Assurances and Certifications', 'Review SF 424', and 'Submit Application'. There are also links for 'Help/Frequently Asked Questions', 'GMS Home', and 'Log Off'.</p>

GMS – Applicant Procedures

Applicant - Application Handbook Applicant Information (AP-9)

Description	Screen
<p>Applicant Information Screen: use this screen to enter information about the applicant.</p> <p>1) Check “Yes” if the applicant is delinquent on any federal debt. Categories of debt include delinquent audit allowances, loans, and taxes. Otherwise, check “No.”</p> <p>2) Review the following fields and make revisions if required: “Employer Identification Number, Type of Applicant, Type of Applicant (other) Organizational Unit, Legal Name, Address 1, Address 2, City, County/Parish, State, and ZIP.” See Job Aid AP-3 for descriptions of each field.</p> <p>3) Review the following fields. These fields should list the name and phone number of the person to be contacted on matters involving this application. The information will automatically transfer from the registration information you previously entered. If the information is incorrect, click on the “GMS Home,” followed by the “Profile” button. See Job Aid AP-18.</p> <p>4) Click “Save and Continue” when you have completed this screen.</p>	

GMS – Applicant Procedures
Applicant - Application Handbook Project Information (AP-10)

Description

Project Information Screen: use this screen to enter information about the proposed project.

- 1) Enter the **“Descriptive Title of Applicant’s Project.”** The title describes the project, it should include: the title of the program as it appears in the solicitation, the name of the Federal agency responsible for the grant, your organization’s fiscal year, i.e. twelve month audit period.
- 2) Enter the **“Areas Affected by Project.”** These include the geographic area(s) that will be impacted by the project. Indicated **“Statewide”** or **“National”** if applicable.
- 3) Use the drop down lists to select the **“Start Date”** of the project. Use the drop down lists to select the **“End Date”** of the project.
- 4) Use the drop down list to select the **“Congressional District(s)”** where the project will be located as well as the **“Congressional Districts”** that will be impacted by the project. To select multiple Districts hold down the control key on your keyboard while clicking on the Districts.
- 5) Enter the amount of **“Federal”** funding you are requesting, the amount of **“Applicant”** Funding being supplied (if any), the amount of **“State”** Funding being received (if any), the amount of **“Local”** Funding being received (if any), the amount of funding from **“Other”** sources being received (if any), as well as any anticipated income from the program (if any) in the blocks provided.
- 6) Click on **“Save and Continue”** when finished.

Screen

Weed and Seed 2000-W211-MD-WS

Application Award Reporting Payments Correspondence Switch to ...

Application Handbook Project Information

[Overview](#)

[Applicant Information](#)

[Project Information](#)

[Budget and Program Attachments](#)

[Assurances and Certifications](#)

[Review SF 424](#)

[Submit Application](#)

[Help/Frequently Asked Questions](#)

[GMS Home](#)

[Log Off](#)

Descriptive Title of Applicant's Project

Areas Affected by Project

Proposed Project

Start Date

End Date

Congressional Districts of Project

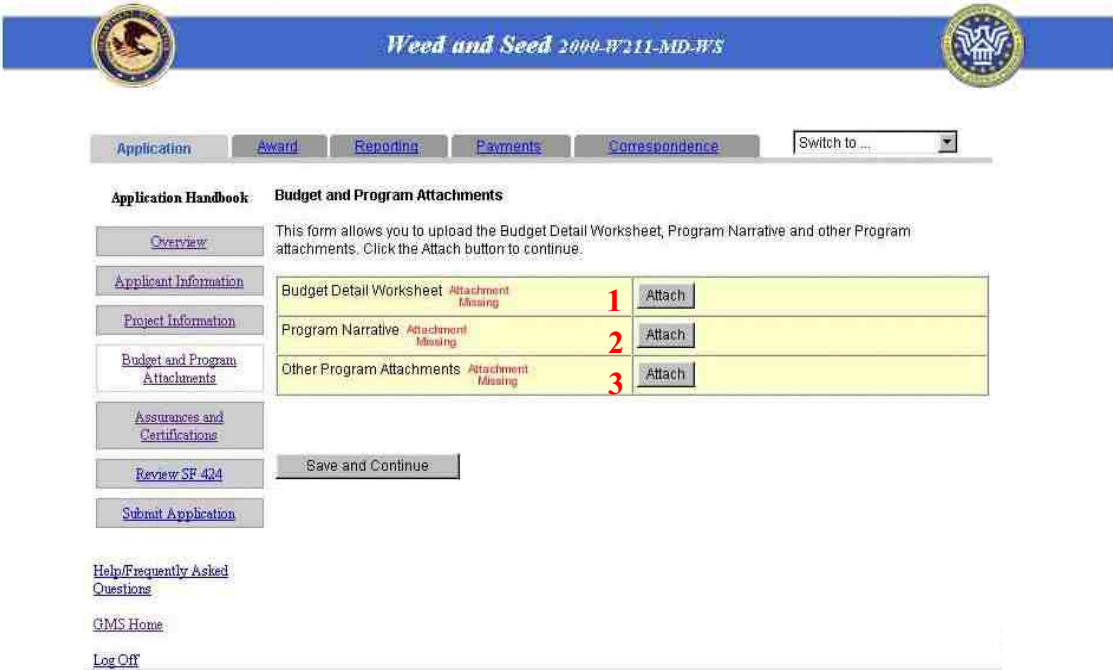
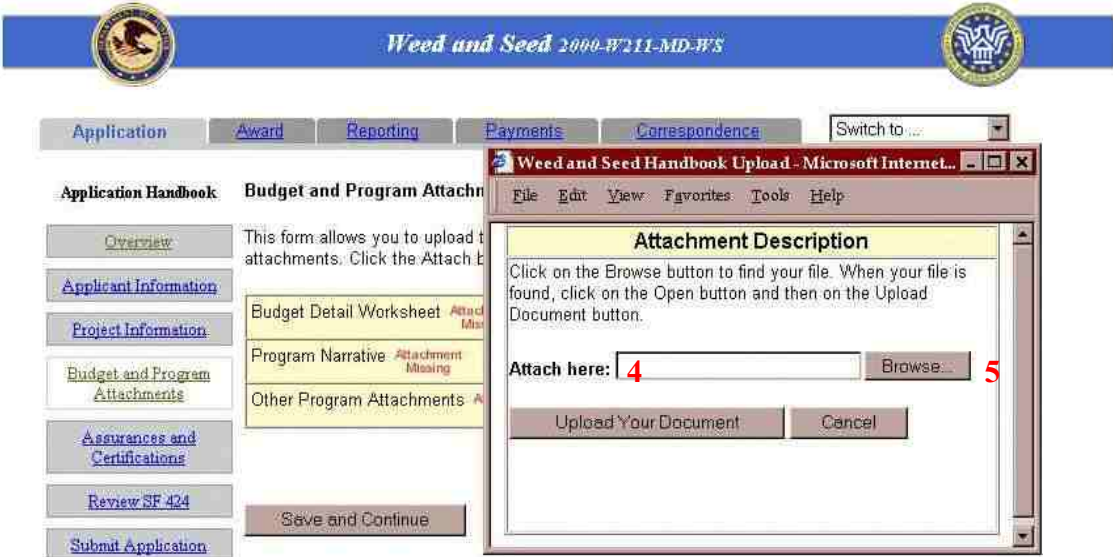
Estimated Funding

Federal	\$ 0	.00
Applicant	\$ 0	.00
State	\$ 0	.00
Local	\$ 0	.00
Other	\$ 0	.00
Program Income	\$ 0	.00
TOTAL	\$ 0	.00

Save and Continue

GMS – Applicant Procedures

Applicant - Application Handbook Budget and Program Attachments (AP-11)

Description	Screen
<p>Budget and Program Attachments Screen: use this screen to attach the “Budget Detail Worksheet,” the “Program Narrative” and the “Other Program Attachments” to the application.</p> <ol style="list-style-type: none"> 1) Attach the “Budget Detail Worksheet” by clicking “Attach.” Proceed to Step 4. 2) Attach the “Program Narrative” by clicking “Attach.” Proceed to Step 4. 3) Attach the “Other Program Attachments” by clicking “Attach.” <p><i>You must complete these steps for all three requested attachments to fully complete the application process. After you have completed attaching one file, you must return to the above steps until “Budget Detail Worksheet,” “Program Narrative,” and “Other Program Attachments” have ALL been attached to your application. Refer to solicitation for specific guidance.</i></p> <ol style="list-style-type: none"> 4) Type in the directory path for the file you wish to attach; or proceed to step five below. 5) Click on “Browse.” A new window will open which will allow you to search for the file. 	 

Budget and Program Attachments Screen continued: use this screen to attach the “**Budget Detail Worksheet,**” the “**Program Narrative**” and the “**Other Program Attachments**” to the application.

6) Locate the directory where you store the “**Budget Detail Worksheet,**” the “**Program Narrative**” and the “**Other Program Attachments**” files.

7) Remember to sort in the drop down list marked “**File Type**” by “**All Files.**”

8) Select the appropriate file and click on “**Open.**” The file selection window will close.

9) Notice that the attachment window will appear with the directory path to the selected file visible in the window marked “**Attach here.**”

10) Click on “**Upload Your Document**” to transmit your attachment to the OJP.

The screenshot displays the 'Weed and Seed Handbook Upload' web application. The main navigation bar includes 'Application', 'Award', 'Reporting', 'Payments', and 'Correspondence'. The 'Application Handbook' section is active, showing 'Budget and Program Attachments'. A sidebar on the left contains navigation links: 'Overview', 'Applicant Information', 'Project Information', 'Budget and Program Attachments', 'Assurances and Certifications', 'Review SF 424', and 'Submit Application'. The main content area explains that this form allows uploading the Budget Detail Worksheet, Program Narrative, and other attachments. A 'File Upload' dialog box is open, showing the 'My Computer' view with drives C: and D: visible. A red '6' is placed over the drive list. The 'Files of type' dropdown is set to 'All Files (*.*)' with a red '7' next to it. The 'Open' button has a red '8' next to it. An 'Attachment Missing' error message is visible in the background. Below the dialog, an 'Attachment Description' window is shown with the text: 'Click on the Browse button to find your file. When your file is found, click on the Open button and then on the Upload Document button.' The 'Attach here:' field contains the path 'C:\DOJ\Budget Detail.doc' with a red '9' next to it. The 'Upload Your Document' button has a red '10' below it.

Budget and Program Attachments Screen continued: use this screen to attach the “**Budget Detail Worksheet,**” the “**Program Narrative**” and the “**Other Program Attachments**” to the application.

11) To view the attached file, click the link marked “**Attachment OK.**” The file will open.

12) Remember to click on “**Save and Continue**” to save your files as part of the application.

You must complete these steps for all three requested attachments to fully complete the application process. After you have completed attaching one file, you must return to the above steps until “Budget Detail Worksheet,” “Program Narrative,” and “Other Program Attachments” have ALL been attached to your application. Refer to solicitation for specific guidance.

Weed and Seed 2000-W211-MD-W5

Application Award Reporting Payments Correspondence Switch to ...

Budget and Program Attachments

Application Handbook

Overview Applicant Information Project Information Budget and Program Attachments Assurances and Certifications Review SF 424 Submit Application

Help/Frequently Asked Questions GMS Home Log Off

This form allows you to upload the Budget Detail Worksheet, Program Narrative and other Program attachments. Click the Attach button to continue.

Budget Detail Worksheet Attachment OK	11	Attach
Program Narrative Attachment OK		Attach
Other Program Attachments Attachment OK		Attach

12

Save and Continue

GMS – Applicant Procedures

Applicant - Application Handbook Assurances and Certifications (AP-12)

Description	Screen
<p>Assurances and Certifications: use this screen to complete the required “Assurances and Certifications” for this application.</p> <p>1) Click on the “Assurances” link and a window with the assurance statement will appear. Read the document and Click “Accept” at the bottom of the window in order to confirm compliance of the project with Federal statutes, regulations and requirements. You must be authorized by your organization in order to click “Accept.”</p> <p>2) Click on the “Certifications Regarding Lobbying...” link and a window with the certifications will appear. Read the document and Click “Accept” at the bottom of the window in order to comply with the stated certifications. You must be authorized by your organization in order to click “Accept.”</p> <p>3) Read the following contact information for the organization’s Authorized Representative. The Authorized Representative is the person legally authorized to enter into agreements on behalf of your agency. Review the information in the following fields and change if necessary.</p> <p>4) Read the statement and check the box if the statement is correct. The individual checking this box must be the Authorized Representative or an individual delegated the authority by the organization.</p> <p>5) Click “Save and Continue” when you have reviewed the “Assurances and Certifications” and completed this screen.</p>	<p>Application Handbook Assurances and Certifications</p> <p>Overview To the best of my knowledge and belief, all data in this application/preapplication is true and correct, the document has been duly authorized by the governing body of the applicant and the applicant will comply with the attached assurances if the assistance is awarded.</p> <p>Applicant Information Your typed name, in lieu of your signature represents your legal binding acceptance of the terms of this application and your statement of the veracity of the representations made in this application. The document has been duly authorized by the governing body of the applicant and the applicant will comply with the following:</p> <p>Project Information 1. <u>Assurances</u></p> <p>Budget and Program Attachments 2. <u>Certifications Regarding Lobbying; Debarment, Suspension and Other Responsibility Matters; and Drug-Free Workplace requirements.</u></p> <p>Assurances and Certifications 1. Prefix 3 Mr. <input type="text"/></p> <p>Review SF 424 Name Prefix (Other) <input type="text"/></p> <p>Submit Application First Name & Middle Initial (if any) Tom <input type="text"/></p> <p>Help/Frequently Asked Questions Last Name Jones <input type="text"/></p> <p>GMS Home Suffix Suffix <input type="text"/></p> <p>Log Off Name Suffix (Other) <input type="text"/></p> <p>Title Director <input type="text"/></p> <p>Address Line 1 4800 Chase Ave <input type="text"/></p> <p>Address Line 2 <input type="text"/></p> <p>City Bethesda <input type="text"/></p> <p>County <input type="text"/></p> <p>State Maryland <input type="text"/></p> <p>Zip Code 11111 - 11111 <input type="text"/></p> <p>Phone 301 - 111 - 1111 Ext: <input type="text"/></p> <p>Fax <input type="text"/></p> <p>E-mail Tom.J@aol.com <input type="text"/></p> <p>4 <input type="checkbox"/> I have examined the information provided here regarding the signing authority and certify it is accurate. I am the signing authority, or have been delegated or designated formally as the signing authority by the appropriate authority of official, to provide the information requested throughout this application system on behalf of this jurisdiction. Information regarding the signing authority, or the delegation of such authority, has been placed in a file and is available on-site for immediate review.</p> <p><input type="button" value="Save and Continue"/></p> <p>5</p>

GMS – Applicant Procedures

Applicant - Application Handbook SF-424 Review (AP-13)



Description	Screen														
<p>SF 424 Review Screen: use this screen to review the information you have supplied for the “SF-424” form. If there are areas that need correction or need to be updated, click the appropriate button on the left side of the screen.</p> <p>1) Click on the “Print a Copy” link to print a copy of the SF-424 for your records.</p> <p>2) Click on “Overview” link on the left side of the screen to correct inaccuracies about the “Type of Submission.”</p> <p>3) Click on “Applicant Information” to correct inaccuracies on your “Legal name, Organizational Unit, Address, and point-of-contact information.” The point-of-contact may be different from the authorizing official, and indicates the person with whom contact will be maintained.</p> <p>4) Click on “Project Information” to correct inaccuracies on your “Employer Identification Number, Type of Applicant, Type of Applications” and the “Name of Federal Agency” that you are applying for an award from.</p> <p>5) Click on “Project Information” to correct inaccuracies in the “Descriptive Title” for your project and the areas affected by the project.</p>	<p>Application Handbook</p> <ul style="list-style-type: none"> Overview Applicant Information Project Information Budget and Program Attachments Assurances and Certifications Review SF 424 Submit Application <p>Help/Frequently Asked Questions GMS Home Log Off</p> <p>APPLICATION FOR FEDERAL ASSISTANCE</p> <p>1. Type of Submission</p> <p>2. DATE SUBMITTED</p> <p>3. DATE RECEIVED BY STATE</p> <p>4. DATE RECEIVED BY FEDERAL AGENCY</p> <p>Applicant Identifier State Application Identifier Federal Identifier 2000-W211-MD-WS</p> <p>5. APPLICANT INFORMATION</p> <p>Legal Name: <i>State of Maryland</i></p> <p>Organizational Unit: <i>Justice Programs</i></p> <p>Address: <i>4600 Chase Ave, Suite 1000, Bethesda, County, Maryland 20814-1000</i></p> <p>Name and telephone number of the person to be contacted on matters involving this application: <i>Jones, Tom, 301-555-1000</i></p> <p>6. EMPLOYER IDENTIFICATION NUMBER (EIN): <i>75-3730105</i></p> <p>7. TYPE OF APPLICANT: <i>State</i></p> <p>8. TYPE OF APPLICATION</p> <p>9. NAME OF FEDERAL AGENCY: <i>Executive Office for Weed and Seed</i></p> <p>10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: <i>16-595</i></p> <p>11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT</p> <p>CFDA TITLE: <i>WEED AND SEED</i></p> <p>12. AREAS AFFECTED BY PROJECT</p> <p>13. PROPOSED PROJECT: Start Date, End Date</p> <p>14. CONGRESSIONAL DISTRICTS OF: a. Applicant, b. Project</p> <p>15. ESTIMATED FUNDING:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Federal</td><td>\$0</td></tr> <tr><td>Applicant</td><td>\$0</td></tr> <tr><td>State</td><td>\$0</td></tr> <tr><td>Local</td><td>\$0</td></tr> <tr><td>Other</td><td>\$0</td></tr> <tr><td>Program Income</td><td>\$0</td></tr> <tr><td>TOTAL</td><td>\$0</td></tr> </table> <p>16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?</p> <p>17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT? No</p> <p>18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS REQUIRED.</p> <p style="text-align: center;">Continue</p>	Federal	\$0	Applicant	\$0	State	\$0	Local	\$0	Other	\$0	Program Income	\$0	TOTAL	\$0
Federal	\$0														
Applicant	\$0														
State	\$0														
Local	\$0														
Other	\$0														
Program Income	\$0														
TOTAL	\$0														

SF 424 Review Screen continued: use this screen to review the information you have supplied for the “SF-424” form. If there are areas that need correction or need to be updated, click the appropriate button on the left side of the screen.

6) Click on “**Project Information**” to modify the proposed project Start Date and End Date.

7) Click on “**Project Information**” to modify your funding request, and the answers to the questions: “Is application subject to review by State Executive Order 12372 Process?” and “Is the applicant delinquent on any federal debt?”

8) Click on “**Continue**” to save your work and to move forward in the process.


Weed and Seed 2000-W211-MD-WS


Application
Award
Reporting
Payments
Correspondence
Switch to ...

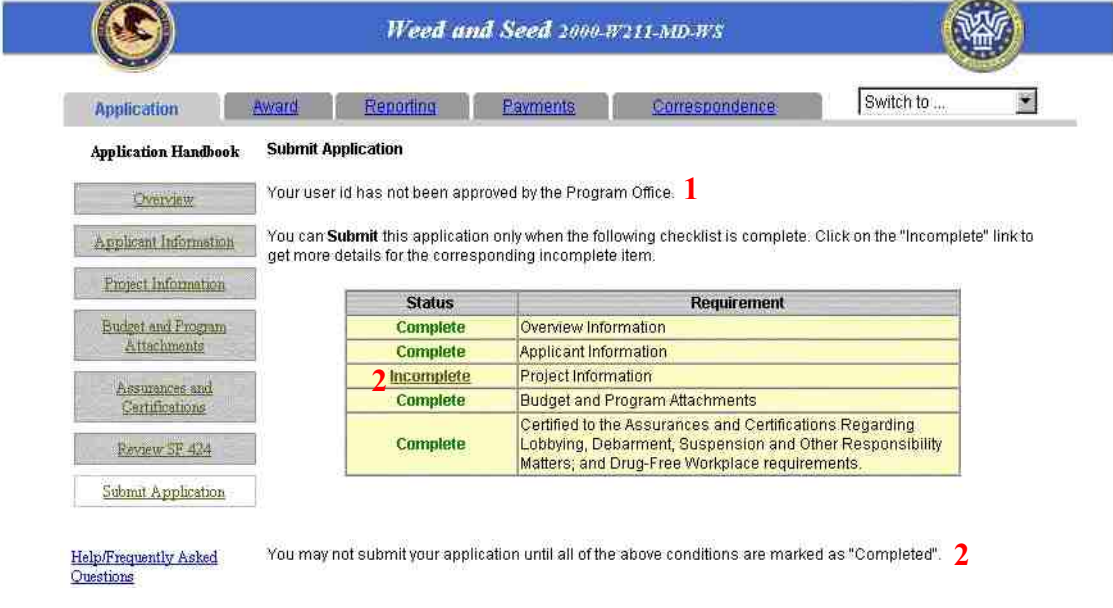
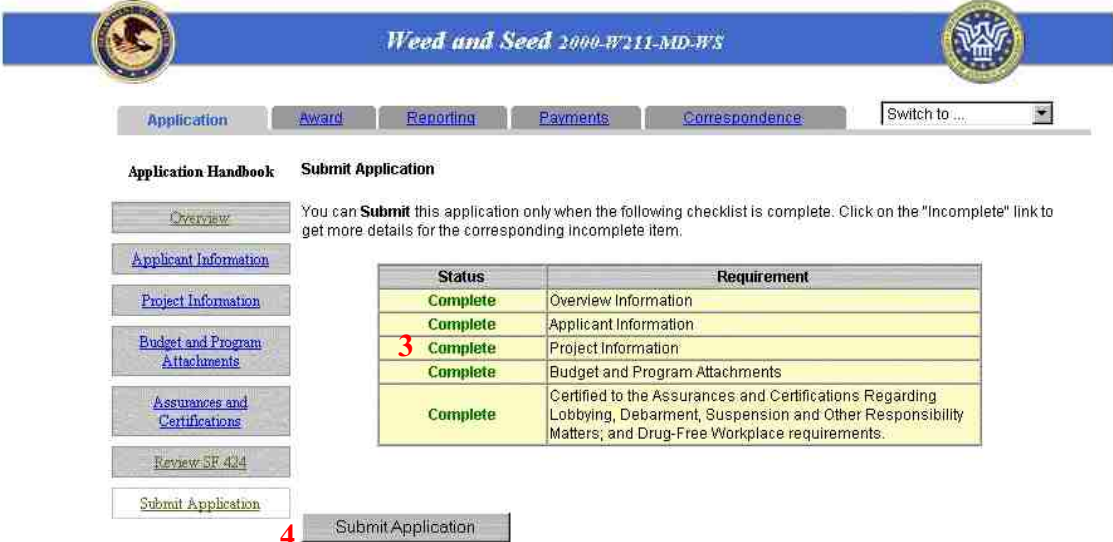
[Review SF-424](#) [Print a Copy](#)

<p>Application Handbook</p> <p>Overview</p> <p>Applicant Information</p> <p>Project Information</p> <p>Budget and Program Attachments</p> <p>Assurances and Certifications</p> <p>Review SF 424</p> <p>Submit Application</p> <p>Help/Frequently Asked Questions</p> <p>GMS Home</p> <p>Log Off</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">APPLICATION FOR FEDERAL ASSISTANCE</td> <td>2. DATE SUBMITTED</td> <td>Applicant Identifier</td> </tr> <tr> <td rowspan="2">1. Type of Submission</td> <td colspan="2">3. DATE RECEIVED BY STATE</td> <td>State Application Identifier</td> </tr> <tr> <td colspan="2">4. DATE RECEIVED BY FEDERAL AGENCY</td> <td>Federal Identifier 2000-W211-MD-WS</td> </tr> <tr> <td colspan="4">5. APPLICANT INFORMATION</td> </tr> <tr> <td colspan="2">Legal Name <i>State of Maryland</i></td> <td colspan="2">Organizational Unit <i>Justice Programs</i></td> </tr> <tr> <td colspan="2">Address <i>4600 Chase Ave Suite 1000 Bethesda, County Maryland 20814-1000</i></td> <td colspan="2">Name and telephone number of the person to be contacted on matters involving this application <i>Jones, Tom 301-555-1000</i></td> </tr> <tr> <td colspan="2">6. EMPLOYER IDENTIFICATION NUMBER (EIN) <i>75-3750105</i></td> <td colspan="2">7. TYPE OF APPLICANT <i>State</i></td> </tr> <tr> <td colspan="2">8. TYPE OF APPLICATION</td> <td colspan="2">9. NAME OF FEDERAL AGENCY <i>Executive Office for Weed and Seed</i></td> </tr> <tr> <td colspan="2">10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER <i>16.595</i></td> <td colspan="2">11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT</td> </tr> <tr> <td colspan="2">CFDA TITLE <i>WEED AND SEED</i></td> <td colspan="2"></td> </tr> <tr> <td colspan="4">12. AREAS AFFECTED BY PROJECT</td> </tr> <tr> <td colspan="2">13. PROPOSED PROJECT:</td> <td colspan="2">14. CONGRESSIONAL DISTRICTS OF:</td> </tr> <tr> <td colspan="2">Start Date</td> <td colspan="2">a. Applicant</td> </tr> <tr> <td colspan="2">End Date</td> <td colspan="2">b. Project</td> </tr> <tr> <td colspan="2">15. ESTIMATED FUNDING:</td> <td colspan="2">16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?</td> </tr> <tr> <td>Federal</td> <td style="text-align: right;">\$0</td> <td colspan="2" rowspan="6"></td> </tr> <tr> <td>Applicant</td> <td style="text-align: right;">\$0</td> </tr> <tr> <td>State</td> <td style="text-align: right;">\$0</td> </tr> <tr> <td>Local</td> <td style="text-align: right;">\$0</td> </tr> <tr> <td>Other</td> <td style="text-align: right;">\$0</td> </tr> <tr> <td>Program Income</td> <td style="text-align: right;">\$0</td> </tr> <tr> <td>TOTAL</td> <td style="text-align: right;">\$0</td> <td colspan="2">17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT? <i>No</i></td> </tr> <tr> <td colspan="4">18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/ PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS REQUIRED.</td> </tr> </table>	APPLICATION FOR FEDERAL ASSISTANCE		2. DATE SUBMITTED	Applicant Identifier	1. Type of Submission	3. DATE RECEIVED BY STATE		State Application Identifier	4. DATE RECEIVED BY FEDERAL AGENCY		Federal Identifier 2000-W211-MD-WS	5. APPLICANT INFORMATION				Legal Name <i>State of Maryland</i>		Organizational Unit <i>Justice Programs</i>		Address <i>4600 Chase Ave Suite 1000 Bethesda, County Maryland 20814-1000</i>		Name and telephone number of the person to be contacted on matters involving this application <i>Jones, Tom 301-555-1000</i>		6. EMPLOYER IDENTIFICATION NUMBER (EIN) <i>75-3750105</i>		7. TYPE OF APPLICANT <i>State</i>		8. TYPE OF APPLICATION		9. NAME OF FEDERAL AGENCY <i>Executive Office for Weed and Seed</i>		10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER <i>16.595</i>		11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT		CFDA TITLE <i>WEED AND SEED</i>				12. AREAS AFFECTED BY PROJECT				13. PROPOSED PROJECT:		14. CONGRESSIONAL DISTRICTS OF:		Start Date		a. Applicant		End Date		b. Project		15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?		Federal	\$0			Applicant	\$0	State	\$0	Local	\$0	Other	\$0	Program Income	\$0	TOTAL	\$0	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT? <i>No</i>		18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/ PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS REQUIRED.			
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6
7
8
[Continue](#)


GMS – Applicant Procedures

Applicant - Application Handbook Submit Application (AP-14)

Description	Screen																								
<p>Submit Application Screen: use this screen to submit your application. (NOTE: All information must be fully complete and your “User Id” must be approved by the Program Office before the application can be submitted.)</p> <p>1) Review this field that comments on the completion of your application. In this example, the Program Manager at the Program Office has not approved your access to the system. Your application will be saved but cannot be submitted until you are approved to access the system. You will be notified via email when your “User Id” has been approved.</p> <p>2) Notice that in this example that the Project Information is incomplete. You must then complete all of required fields in the Project Information section. Click on the “Incomplete” link to return to the corresponding incomplete section. The system will provide you with more detailed information about the items that are incomplete.</p> <p>3) Verify that your “User Id” has been approved and the status of each requirement is complete.</p> <p>4) Click “Submit Application” to send the complete application to the Program Office at OJP.</p>	 <p>Application Handbook Submit Application</p> <p>Overview Your user id has not been approved by the Program Office. 1</p> <p>Applicant Information You can Submit this application only when the following checklist is complete. Click on the "Incomplete" link to get more details for the corresponding incomplete item.</p> <table border="1" data-bbox="1199 527 1808 711"> <thead> <tr> <th>Status</th> <th>Requirement</th> </tr> </thead> <tbody> <tr> <td>Complete</td> <td>Overview Information</td> </tr> <tr> <td>Complete</td> <td>Applicant Information</td> </tr> <tr> <td>2 Incomplete</td> <td>Project Information</td> </tr> <tr> <td>Complete</td> <td>Budget and Program Attachments</td> </tr> <tr> <td>Complete</td> <td>Certified to the Assurances and Certifications Regarding Lobbying, Debarment, Suspension and Other Responsibility Matters; and Drug-Free Workplace requirements.</td> </tr> </tbody> </table> <p>Help/Frequently Asked Questions You may not submit your application until all of the above conditions are marked as "Completed". 2</p>  <p>Application Handbook Submit Application</p> <p>Overview You can Submit this application only when the following checklist is complete. Click on the "Incomplete" link to get more details for the corresponding incomplete item.</p> <table border="1" data-bbox="1230 1122 1829 1305"> <thead> <tr> <th>Status</th> <th>Requirement</th> </tr> </thead> <tbody> <tr> <td>Complete</td> <td>Overview Information</td> </tr> <tr> <td>Complete</td> <td>Applicant Information</td> </tr> <tr> <td>3 Complete</td> <td>Project Information</td> </tr> <tr> <td>Complete</td> <td>Budget and Program Attachments</td> </tr> <tr> <td>Complete</td> <td>Certified to the Assurances and Certifications Regarding Lobbying, Debarment, Suspension and Other Responsibility Matters; and Drug-Free Workplace requirements.</td> </tr> </tbody> </table> <p>4 Submit Application</p>	Status	Requirement	Complete	Overview Information	Complete	Applicant Information	2 Incomplete	Project Information	Complete	Budget and Program Attachments	Complete	Certified to the Assurances and Certifications Regarding Lobbying, Debarment, Suspension and Other Responsibility Matters; and Drug-Free Workplace requirements.	Status	Requirement	Complete	Overview Information	Complete	Applicant Information	3 Complete	Project Information	Complete	Budget and Program Attachments	Complete	Certified to the Assurances and Certifications Regarding Lobbying, Debarment, Suspension and Other Responsibility Matters; and Drug-Free Workplace requirements.
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GMS – Applicant Procedures

Applicant - Application Handbook Application Submission Confirmation (AP-15)

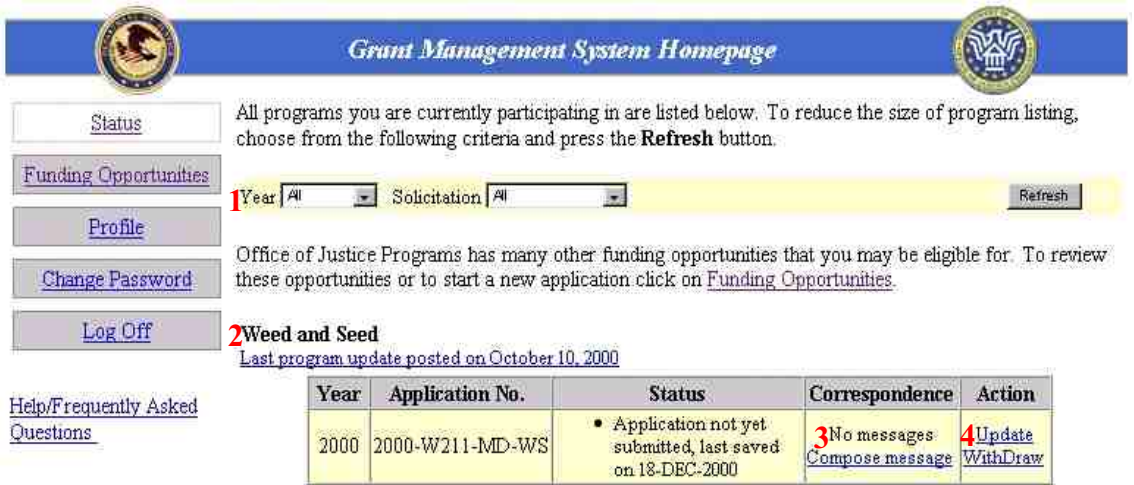
Description	Screen
<p>Submission Confirmation Screen: this screen will confirm that your application has been successfully submitted to OJP. (NOTE: After the application has been submitted no changes or edits can be made to the application.)</p> <p>1) Click on the “Return to GMS Home” link to return to the “Grants Management System Homepage.” The Homepage is the page you saw when you first entered the system.</p> <p>2) Click on the “Log Out” link to log off of the “Grants Management System.”</p>	 <p>1 2</p>

GMS – Applicant Procedures


Applicant - Application Handbook Correspondence (AP-16)

Description	Screen
<p>Correspondence Screen: use this screen to send and receive email to and from the Program Office. Any email sent or received becomes part of the official grant file for this application.</p> <ol style="list-style-type: none"> 1) View the new correspondence from the Program Office by clicking “New Mail.” This is also the default opening screen. 2) View correspondence you have previously sent to the Program Office by clicking “Sent Mail.” 3) View old correspondence between the Program Office and yourself by clicking “Old Mail.” 4) View “Mail, Date, Sender,” and “Subject” in this field. 5) Send a message to your point of contact at the Program Office by clicking “Send a Message.” This will open a new frame to the right of the button. The addressee is already filled in for you. You may fill in anyone you wish to “cc:” in the line below it. 6) Place the text of your original message in the field marked “Message.” 7) Press “Send” to send the mail. 8) Press “Cancel” to cancel the process. The mail will not be sent, you will return to the original screen, and your mail message will not be saved. 	<p>The top screenshot shows the 'New Email Messages' interface. It features a navigation bar with 'Application', 'Award', 'Reporting', 'Payments', and 'Correspondence' tabs. Below the tabs are buttons for 'New Mail', 'Sent Mail', 'Old Mail', and 'Send a Message'. A table with columns 'Date', 'Sender', and 'Subject (Click to Read Message)' is present, along with a 'No New Emails' message. A red number '4' is placed near the table. Navigation links for 'Help/Frequently Asked Questions', 'GMS Home', and 'Log Off' are at the bottom.</p> <p>The bottom screenshot shows the 'Send An Email Message' form. It has the same navigation bar and buttons. The 'Send a Message' button is highlighted with a red number '5'. The form fields are: 'To: Weed and Seed Program Support Grants Office', 'CC: [empty field]', 'Subject: Re: Application Number 2000-W233-MD-WS', and 'Message: [empty text area]'. A red number '6' is placed near the message field. At the bottom are 'Send' and 'Cancel' buttons, with red numbers '7' and '8' respectively.</p>

GMS – Applicant Procedures
Applicant - Main Screen Status Return User (AP-17)

Description	Screen										
<p>Return User Status Screen: use this screen to review the status of the programs you are currently participating in. Click on the “Status” link to begin.</p> <p>1) Select the fiscal “Year” and the “Solicitation” that you want to review by using the pull down list. The system will default to “All” fiscal “Years” and “All” “Solicitations.” Click the “Refresh” button.</p> <p>2) The system will display all programs that match the criteria you selected above.</p> <p>3) Click “Compose message” on the specific application to send email to the Program Office. See Job Aid AP-16 for more information on sending email to the Program Office.</p> <p>4) Click on “Update” or “Withdraw” to modify or delete an application that has not been submitted. Click “Update” to review and make changes to this application. Click “Withdraw” to completely remove this specific application from the system. If an application has previously been submitted you will see a “View” link. Click “View” to review these applications.</p>	 <p>The screenshot shows the 'Grant Management System Homepage' with a navigation menu on the left containing links for Status, Funding Opportunities, Profile, Change Password, and Log Off. The main content area includes a 'Status' section with a text description and a 'Refresh' button, followed by filter dropdowns for 'Year' and 'Solicitation', both currently set to 'All'. Below this is a 'Weed and Seed' section with a table of application status.</p> <table border="1" data-bbox="1150 602 1898 711"> <thead> <tr> <th>Year</th> <th>Application No.</th> <th>Status</th> <th>Correspondence</th> <th>Action</th> </tr> </thead> <tbody> <tr> <td>2000</td> <td>2000-W211-MD-WS</td> <td> <ul style="list-style-type: none"> Application not yet submitted, last saved on 18-DEC-2000 </td> <td>3 No messages Compose message</td> <td>4 Update Withdraw</td> </tr> </tbody> </table>	Year	Application No.	Status	Correspondence	Action	2000	2000-W211-MD-WS	<ul style="list-style-type: none"> Application not yet submitted, last saved on 18-DEC-2000 	3 No messages Compose message	4 Update Withdraw
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GMS – Applicant Procedures
Applicant - Main Screen Applicant Profile (AP-18)

Description	Screen																																																
<p>Applicant Profile Screen: use this screen to review the information you entered about the applicant.</p> <p>1) Review the applicant’s Federal “Employer Identification Number (EIN).” If it is necessary to make changes click “Update Profile” at the bottom of the screen to make changes.</p> <p>2) Review the “Legal Name” of the applicant. If it is necessary to make changes click “Update Profile” at the bottom of the screen. See item #7 on the following page.</p> <p>3) Review the address information for the applicant. If it is necessary to make changes click “Update Profile” at the bottom of the screen.</p> <p>4) Review the “User Name” for the person using the Grants Management System to submit this application. If it is necessary to make changes click “Update Profile” at the bottom of the screen.</p> <p>5) Review the Authorized Representative’s information starting with “User Prefix.” If it is necessary to make changes click “Update Profile” at the bottom of the screen.</p>	 <table border="1" data-bbox="1092 462 1953 1307"> <thead> <tr> <th colspan="2">Profile Information</th> </tr> <tr> <th colspan="2">Organization Information</th> </tr> </thead> <tbody> <tr> <td>* Employer ID Number (EIN):</td> <td>1 22-3344656</td> </tr> <tr> <td>* Legal Name:</td> <td>2 State of Maryland</td> </tr> <tr> <td>* Organizational Unit:</td> <td>Maryland State Police</td> </tr> <tr> <td>* Address Line 1:</td> <td>3 4500 Chase Ave</td> </tr> <tr> <td>Address Line 2:</td> <td>Suite 2000</td> </tr> <tr> <td>* City:</td> <td>Bethesda</td> </tr> <tr> <td>County:</td> <td></td> </tr> <tr> <td>* State:</td> <td>Maryland</td> </tr> <tr> <td>* Zip Code:</td> <td>20814-2000</td> </tr> <tr> <td>* Type of Applicant:</td> <td>State</td> </tr> <tr> <td>Type of Applicant (other):</td> <td></td> </tr> <tr> <td>* Applicant Congressional District:</td> <td>Congressional District 03, MD</td> </tr> <tr> <td>* User Name:</td> <td>4 johntumer</td> </tr> <tr> <th colspan="2">Authorized Representative:</th> </tr> <tr> <td>* User Prefix:</td> <td>5 Dr.</td> </tr> <tr> <td>prefix (other):</td> <td></td> </tr> <tr> <td>* User First Name:</td> <td>Robert</td> </tr> <tr> <td>* User Last Name:</td> <td>Smith</td> </tr> <tr> <td>* Title:</td> <td>Executive Director</td> </tr> <tr> <td>* Phone Number:</td> <td>3015551000 Ext.: 300</td> </tr> <tr> <td>Fax Number:</td> <td>3015551200</td> </tr> <tr> <td>* User E-mail Address:</td> <td>robertsmith@MSP.gov</td> </tr> </tbody> </table>	Profile Information		Organization Information		* Employer ID Number (EIN):	1 22-3344656	* Legal Name:	2 State of Maryland	* Organizational Unit:	Maryland State Police	* Address Line 1:	3 4500 Chase Ave	Address Line 2:	Suite 2000	* City:	Bethesda	County:		* State:	Maryland	* Zip Code:	20814-2000	* Type of Applicant:	State	Type of Applicant (other):		* Applicant Congressional District:	Congressional District 03, MD	* User Name:	4 johntumer	Authorized Representative:		* User Prefix:	5 Dr.	prefix (other):		* User First Name:	Robert	* User Last Name:	Smith	* Title:	Executive Director	* Phone Number:	3015551000 Ext.: 300	Fax Number:	3015551200	* User E-mail Address:	robertsmith@MSP.gov
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Fax Number:	3015551200																																																
* User E-mail Address:	robertsmith@MSP.gov																																																

Applicant Profile Screen continued: use this screen to review the information you entered about the applicant.

6) Review the Alternate Contact's information starting with "User Prefix." If it is necessary to make changes click "Update Profile" at the bottom of the screen.

7) Click "Update Profile" to update any information in the applicant profile. You will be taken to a screen where modifications can be made. After the modifications are complete click "Update Profile" at the bottom of the screen.

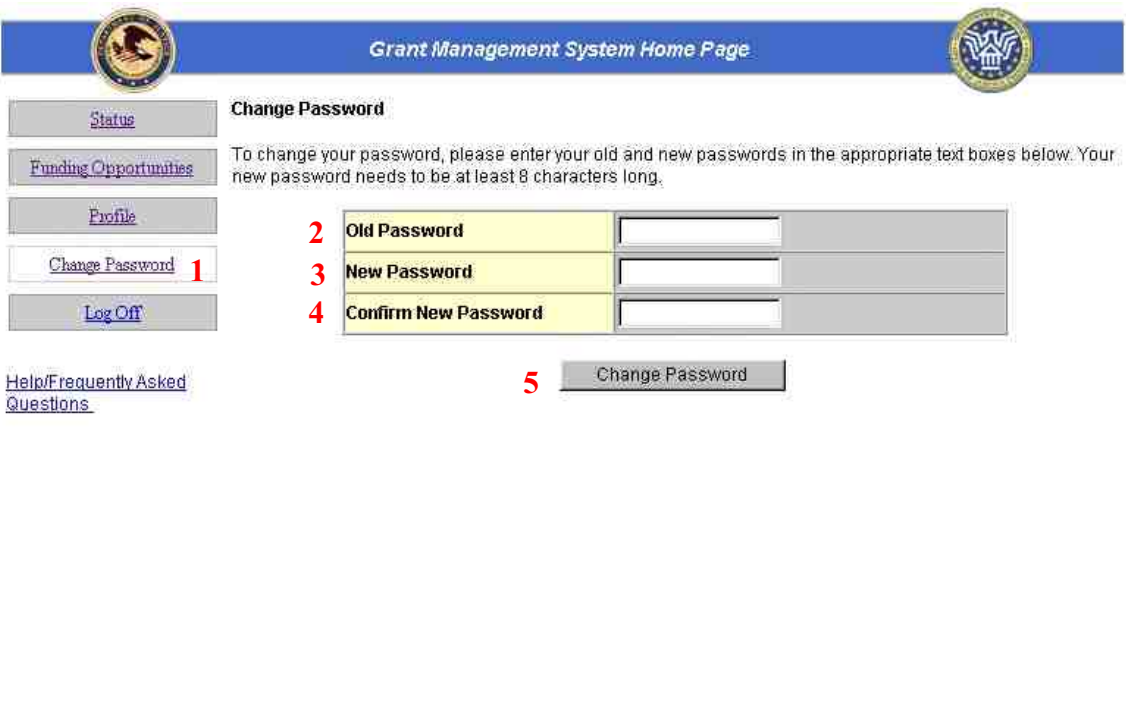


The screenshot displays the "Grant Management System Homepage" with a blue header bar containing two circular logos. Below the header is a form titled "Alternate Contact:" with the following fields:

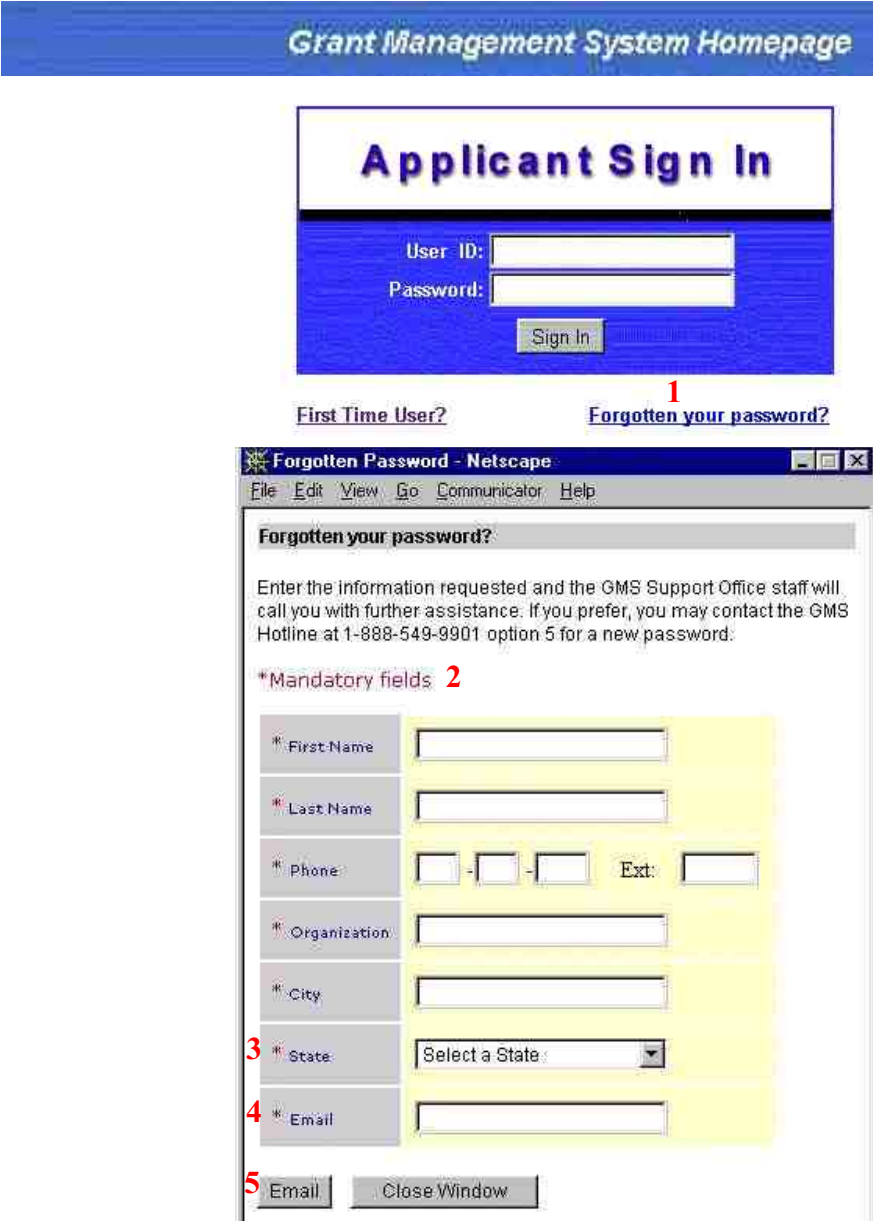
Alternate Contact:	
* User Prefix:	Mr.
prefix (other):	
* User First Name:	John
* User Last Name:	Turner
* Title:	Director
* Phone Number:	3015551000 Ext : 250
Fax Number:	3015551100
* User E-mail Address:	johnturner@MSP.gov

Below the form is a button labeled "Update Profile" with a red number 7 next to it.

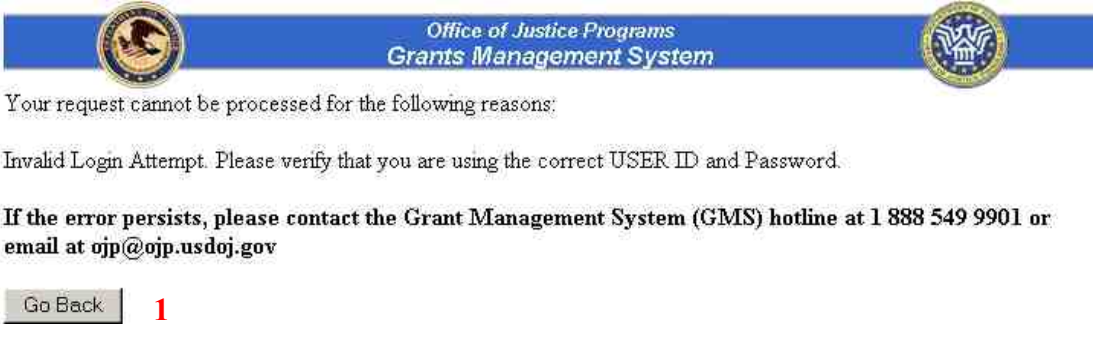
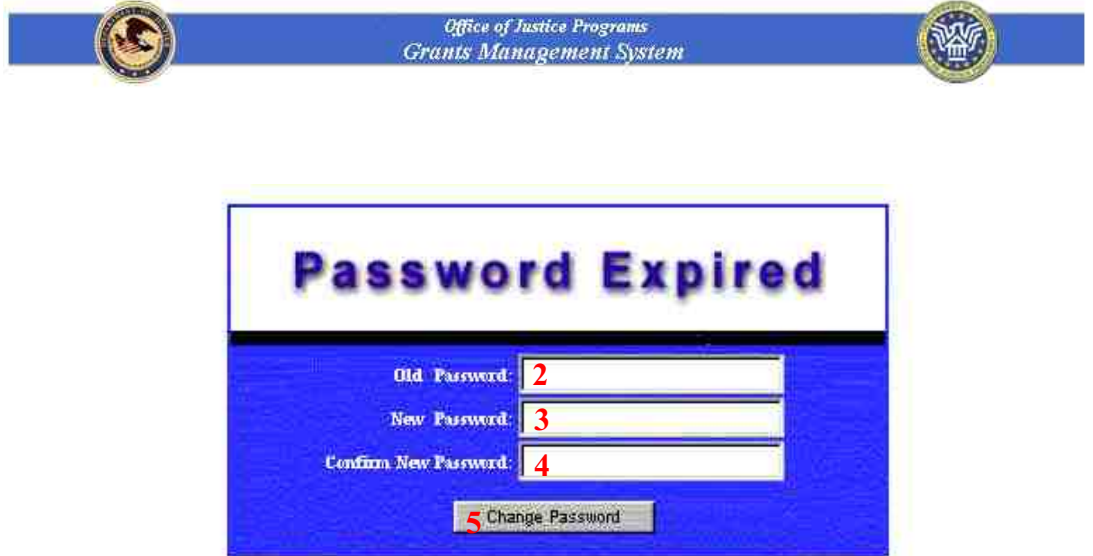
GMS – Applicant Procedures
Applicant - Main Screen Change Password (AP-19)

Description	Screen
<p>Change Password Screen: use this screen to change your password. Remember that the passwords are all case sensitive.</p> <ol style="list-style-type: none"> 1) Click on “Change Password” at the left of the screen. 2) Enter your “Old Password.” (NOTE: the Password characters will appear on the screen as *s) 3) Enter your “New Password.” (NOTE: the Password characters will appear on the screen as *s) 4) Confirm your “New Password” by re-entering the Password. (NOTE: the Password characters will appear on the screen as *s) 5) Click on “Change Password” to complete the process. 	

GMS – Applicant Procedures
Applicant - SF-424 Forgotten Password (AP-20)

Description	Screen
<p>Forgotten Password Screen: use this screen to assist you if you have forgotten or misplaced your password.</p> <ol style="list-style-type: none"> 1) Click on the “Forgotten your password?” link at the bottom of the “Applicant Sign In” page. A new window will appear on the screen. 2) Fill in the mandatory fields on the screen and the GMS Support Office will call you with further assistance. Or if you prefer, you may call the GMS Hotline at 1-888-549-9901. 3) Select your State from the pull down menu. 4) Enter your email address as it appeared on your user registration. 5) Click the “Email” button to send the information to GMS and the click “Close Window” to close the window. Wait for GMS to contact you via telephone with your password 	 <p>The screenshot shows the Grant Management System Homepage with a blue header. Below the header is a white box titled "Applicant Sign In" with a blue background. It contains fields for "User ID:" and "Password:" and a "Sign In" button. Below this box are two links: "First Time User?" and "Forgotten your password?". A red number "1" is placed above the "Forgotten your password?" link.</p> <p>Below the links is a Netscape browser window titled "Forgotten Password - Netscape". The browser window shows a form titled "Forgotten your password?". The form contains the following fields: <ul style="list-style-type: none"> * First Name: <input type="text"/> * Last Name: <input type="text"/> * Phone: <input type="text"/> - <input type="text"/> - <input type="text"/> Ext: <input type="text"/> * Organization: <input type="text"/> * City: <input type="text"/> * State: <input type="text" value="Select a State:"/> * Email: <input type="text"/> A red number "2" is placed to the right of the "Mandatory fields" label. At the bottom of the form are two buttons: "Email" (with a red number "3" to its left) and "Close Window" (with a red number "4" to its left). A red number "5" is placed to the left of the "Email" button. </p>

GMS – Applicant Procedures
Applicant - Sign In Error Messages (AP-21)

Description	Screen
<p>Sign In Error Message Screen: use this screen to correct errors received at login.</p> <p>1) Read the error statement that appears due to an Invalid Login Attempt. Click “Go Back” to return to the “Applicant Sign In” page and then enter the correct “User ID” and “Password.” <u>Remember that the “User ID” and “Password” are case sensitive.</u> You can verify your password by clicking on the “Forgotten your password?” link on the “Applicant Sign In” page. If the error still persists after entering the correct “User ID” and “Password,” please contact the Help Desk at 1-888-549-9901 or send an email to ojp@ojp.usdoj.gov.</p> <p>2) Enter your current “Password.” To help ensure a secure system, your “Password” will expire every 60 days and you will be prompted to create a new “Password.”</p> <p>3) Enter a new “Password” that is different from your current “Password.” Remember, the “Password” must be a minimum of 8 characters long and must not begin with a number.</p> <p>4) Confirm the new “Password” by reentering it in the field. Reenter exactly the same “Password” as you entered in the “New Password” field.</p> <p>5) Click on “Change Password” to submit the new “Password” and to log on to the system.</p> <p>* Remember to record your new password for your records. Also remember that the password is case sensitive.</p>	 

6) If you receive the error message pictured here, you have selected a “**User Id**” that has already been assigned in the system.

7) Click the “**Go Back**” button to return to your registration information screen and select a different “**User Id.**”

Your request cannot be processed for the following reasons:

The User Id you have chosen is already in use. Please select a new User Id. **6**

If the error above persists, please contact the Grant Management Help desk at ojp@ojp.usdoj.gov or 1 888 549 9901

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Appendix B

Sample Budget Detail Worksheet

**Fiscal Year 2003 Terrorism Early Alert and Strategic Planning System
Budget Detail Worksheet**

Purpose: The Budget Detail Worksheet may be used as a guide to assist you in the preparation of the budget and budget narrative. You may submit the budget and budget narrative using this form or in the format of your choice (plain sheets, your own form, or a variation of this form). However, all required information (including the budget narrative) must be provided. Any category of expense not applicable to your budget may be deleted.

A. Personnel - List each position by title and name of employee, if available. Show the annual salary rate and the percentage of time to be devoted to the project. Compensation paid for employees engaged in grant activities must be consistent with that paid for similar work within the applicant organization.

Name/Position

Computation

Cost

TOTAL _____

B. Fringe Benefits - Fringe benefits should be based on actual known costs or an established formula. Fringe benefits are for the personnel listed in budget category (A) and only for the percentage of time devoted to the project. Fringe benefits on overtime hours are limited to FICA, Workman's Compensation, and Unemployment Compensation.

<u>Name/Position</u>	<u>Computation</u>	<u>Cost</u>
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TOTAL _____

Total Personnel & Fringe Benefits _____

C. Travel - Itemize travel expenses of project personnel by purpose (e.g., staff to training, field interviews, advisory group meeting, etc.). Show the basis of computation (e.g., six people to 3-day training at \$X airfare, \$X lodging, \$X subsistence). In training projects, travel and meals for trainees should be listed separately. Show the number of trainees and unit costs involved. Identify the location of travel, if known. Indicate source of Travel Policies applied, Applicant or Federal Travel Regulations.

<u>Purpose of Travel</u>	<u>Location</u>	<u>Item</u>	<u>Computation</u>	<u>Cost</u>
--------------------------	-----------------	-------------	--------------------	-------------

TOTAL _____

D. Equipment - List non-expendable items that are to be purchased. Non-expendable equipment is tangible property having a useful life of more than two years. (Note: Organization's own capitalization policy and threshold amount for classification of equipment may be used). Expendable items should be included either in the "Supplies" category or in the "Other" category. Applicants should analyze the cost benefits of purchasing versus leasing equipment, especially high cost items and those subject to rapid technical advances. Rented or leased equipment costs should be listed in the "Contractual" category. Explain how the equipment is necessary for the success of the project. Attach a narrative describing the procurement method to be used.

Item

Computation

Cost

TOTAL _____

E. Supplies - List items by type (office supplies, postage, training materials, copying paper, and other expendable items such as books, hand held tape recorders and show the basis for computation. (Note: Organization's own capitalization policy and threshold amount for classification of supplies may be used). Generally, supplies include any materials that are expendable or consumed during the course of the project.

Supply Items

Computation

Cost

TOTAL _____

F. Construction - As a rule, construction costs are not allowable. In some cases, minor repairs or renovations may be allowable. Consult with the program office before budgeting funds in this category.

Purpose

Description of Work

Cost

TOTAL _____

G. Consultants/Contracts - Indicate whether applicant's formal, written Procurement Policy or the Federal Acquisition Regulations are followed.

Consultant Fees: For each consultant enter the name, if known, service to be provided, hourly or daily fee (8-hour day), and estimated time on the project. Consultant fees in excess of \$450 per day require additional justification and prior approval from OJP.

<u>Name of Consultant</u>	<u>Service Provided</u>	<u>Computation</u>	<u>Cost</u>
---------------------------	-------------------------	--------------------	-------------

Subtotal _____

Consultant Expenses: List all expenses to be paid from the grant to the individual consultant in addition to their fees (i.e., travel, meals, lodging, etc.)

<u>Item</u>	<u>Location</u>	<u>Computation</u>	<u>Cost</u>
-------------	-----------------	--------------------	-------------

Subtotal _____

Contracts: Provide a description of the product or services to be procured by contract and an estimate of the cost. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source contracts in excess of \$100,000.

Item

Cost

Subtotal _____

TOTAL _____

H. Other Costs - List items (e.g., rent, reproduction, telephone, janitorial or security services, and investigative or confidential funds) by major type and the basis of the computation. For example, provide the square footage and the cost per square foot for rent, and provide a monthly rental cost and how many months to rent.

Description

Computation

Cost

TOTAL _____

I. Indirect Costs - Indirect costs are allowed only if the applicant has a Federally approved indirect cost rate. A copy of the rate approval, (a fully executed, negotiated agreement), must be attached. If the applicant does not have an approved rate, one can be requested by contacting the applicant's cognizant Federal agency, which will review all documentation and approve a rate for the applicant organization, or if the applicant's accounting system permits, costs may be allocated in the direct costs categories.

Description

Computation

Cost

TOTAL _____

Budget Summary - When you have completed the budget worksheet, transfer the totals for each category to the spaces below. Compute the total direct costs and the total project costs. Indicate the amount of Federal requested and the amount of non-Federal funds that will support the project.

<u>Budget Category</u>	<u>Amount</u>
A. Personnel	_____
B. Fringe Benefits	_____
C. Travel	_____
D. Equipment	_____
E. Supplies	_____
F. Construction	_____
G. Consultants/Contracts	_____
H. Other	_____
Total Direct Costs	_____
I. Indirect Costs	_____
TOTAL PROJECT COSTS	_____

Federal Request _____

Non-Federal Amount _____



Appendix C
Sample Equipment Coordination Certification



**Fiscal Year 2003
Terrorism Early Alert
and Strategic Planning System**

Equipment Coordination Certification

I certify that:

! Use of these funds to create an anti-terrorism risk management and planning system for state and local responders will be coordinated with other ongoing Federal initiatives and with the State's domestic preparedness strategy.

Chief Executive Officer:

Name

Title

Appendix D

Application Checklist

Application Checklist

G On-Line Application

G File Attachments:

1. Program Narrative
 2. Budget Detail Worksheet
 3. Equipment Coordination Certification
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