INSTRUCTIONS FOR COMPLETION OF FEDERAL ASSISTANCE APPLICATION FORM SSA-96 FOR SOCIAL SECURITY ADMINISTRATION RESEARCH AND DEMONSTRATION GRANT PROGRAMS

Form SSA-96 is used by applicant organizations requesting Federal assistance support under all research and demonstration grant programs administered by the Social Security Administration (SSA). It is to be used to request or to apply for new grants, supplemental funding for an existing grant, continuation of an existing grant, and changes to an existing grant. The application form is comprised of four parts: PART I—FACE SHEET, PART II—BUDGET INFORMATION, PART III—PROGRAM NARRATIVE, and PART IV—ASSURANCES.

Please read and follow the instructions carefully to avoid delays and misunderstandings. An application may be considered incomplete and returned ' if it fails to follow the instructions or if the material presented is insufficient to permit an adequate review.

--Type the application using standard-size type.
--Type on one side only.
--Reproduced copies should be single-sided.
--Do not bind or staple the applications. Secure them with rubber bands or paper clips.
--If continuation pages are required, please use standard size (81/2 " X 11") white bond paper.
--All items on the forms must be completed. Enter "NONE" or "NA" (not applicable) whenever appropriate.

All applicants *must* submit an original and 2 copies of the completed application.

PART I—FACE SHEET

The FACE SHEET is a multipurpose standard form and the standard instructions on the back of the form should be followed for completing the form. The following supplementary information is provided for completing these sections for SSA research and demonstration grant applicants.

Item 6
If the applicant has been assigned an HHS entity number consisting of the Internal Revenue Service (IRS) employer identification number prefixed by "I" and suffixed by a two-digit code, enter the full HHS entity number Otherwise, enter the IRS employer identification.

Item 11
Select a title that is both short and descriptive.

Item 18d
To be valid and acceptable for review, an application must be properly executed by an individual authorized to act for the applicant organization and to assume the obligations imposed by the requirements and conditions for any grant award including the applicable Federal regulations. If the authorized official is not available, an individual authorized to act on his/her behalf may sign as "acting for" the designated official.

PART 11—BUDGET INFORMATION

SECTIONS A, B, C, and D should include budget estimates for the first budget period (usually a year) and SECTION E should present the need for Federal assistance in the subsequent budget period(s).
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SECTION A—BUDGET SUMMARY

Grant applicants requesting assistance to conduct activities under grant programs administered by SSA are expected to contribute towards the total cost of the activity. These costs must be reflected in the grant application. The budget for the activity must include funds requested from SSA and the applicant's share of allowable costs.

Line 1, Columns a and b

In column a, enter "SSA" and in column b, enter the Catalog of Federal Domestic Assistance number.

Line 1, Columns c through g

For new applications, leave columns c and d blank. Enter in column e the amount of Federal funds needed to support the project for the first funding period (usually a year). Enter in column f the amount of the cost of the project to be borne by the applicant. Enter in column g the total of columns e and f.

F*or continuing grant program applications,* enter in columns c and d the estimated amount of funds that will remain unobligated at the end of the current grant period. Enter in columns e and f the amount of funds needed for the upcoming period. The amount in column g should equal the total of columns e and f.

F*or applications which request additional funds* for a currently approved budget period and for other changes to existing grants, do not use columns c and d. Enter in columns e or f, as appropriate, the amount of the increase or decrease of funds. In column g, enter the new total budgeted amount which includes the total of the previous authorized budgeted amount plus or minus, as appropriate, any amounts shown in column e or f. The amount in column g should not equal the total of the amount(s) in columns e and/or f.

Lines 2 through 5, columns a through g of this section are not to be completed.

SECTION B—BUDGET CATEGORIES

Use column 1 only.
Leave columns 2, 3, 4, and 5 blank.

Lines 6a--h
Show the estimated Federal costs for each object class category in column 1.

Line 6a--Personnel
Show salaries and wages only. Fees and expenses for consultants should be included on line h--Other. In computing estimated salary changes, an individual's base salary represents the total authorized annual compensation that an applicant organization would be prepared to pay for a specified work period. The base salary excludes income that an individual may be permitted to earn outside of full-time duties to the applicant organization.

Line 6b--Fringe Benefits
Fringe benefits may be requested as a direct cost to the extent that they are treated consistently by the applicant organization as a direct cost to all sponsors. As an alternative, fringe benefits may be included in the calculation of the applicant organization's indirect costs. If a fringe benefit rate has been negotiated with the Social Security Administration or another Federal agency, indicate the agency and the applicable rate under SECTION F. Otherwise, indicate the method used in computing the amount of fringe benefits claimed.

Line 6c--Travel
Include the cost of travel for employees only. Travel for consultants should be included on line 6h-Other. Under SECTION F describe the purpose of any travel, number of trips involved, destinations, individuals who will be traveling and the projected cost per trip, i.e., local transportation, air travel, per diem, etc. Include the computations used in determining the cost.

Line 6d--Equipment
Include only nonexpendable personal property which has a useful life of more than 1 year and an acquisition cost of S5000 or more per unit. Under SECTION F, list and explain the need for each item of equipment.

Line 6e--Supplies
Include all tangible personal property except that listed on line 6d. If the total exceeds S500, list and explain the need for the items under SECTION F.

Line 6f--Contracual
Include all procurement contracts (except those which belong on other lines such as equipment, supplies, consultant, etc.). List each contract, the amount and purpose under SECTION F

Line 6g--Construction

SSA programs do not have construction authority but may support limited alteration and renovation costs. Amounts included under this category must be fully explained under SECTION F.

Line 6h--Other
Use for all direct costs not clearly covered by lines a through g. Examples are computer use charges, consultant costs, and equipment rentals. Amounts entered under this category must be itemized and fully explained under SECTION F including- the method used in computing the cost.

Line 6I--Total Direct Costs
Enter the total of lines 6a through 6h.

Line 6j--1ndirect Costs
Applicants which are State and local governments, enter the amount of indirect costs. List and explain these costs under SECTION F. Indicate if the costs are claimed in accordance with an approved State cost allocation plan.

Applicants other than State and local governments, enter the amount of indirect costs. If the costs are claimed in accordance with an approved indirect cost rate negotiated with the Department of Health and Human Services or another Federal agency, include the name of the agency and the rate under SECTION F. If a rate has not been negotiated, list and explain the costs, including the method of computation.

Line 6k--Totals
Enter the total of lines 6i and 6j.

Line 7--Program Income

Enter the estimated amount of income, if any, expected to be generated from this project. Do not add or subtract this amount from the total project amount. Explain the nature and source of income under SECTION F.

SECTION C—NON-FEDERAL RESOURCES

On line 8, column a, enter SSA. In column b, enter the amount of funds or the value of in-kind contributions to be provided by the applicant. In column c, enter the amount of State funds. In column cl, enter the amount of funds or the value of in-kind contributions from other sources. Enter the totals in column e. Line 12 need not be completed.

SECTION D—FORECASTED CASH NEEDS

Line 13 - Enter the amount of Federal cash needed by quarter during the first year.

Line 14 - Enter the amount of cash from all other non Federal sources needed by quarter during the first year.

Line 15 - Enter the totals of amounts on lines 13 and 14.

SECTION E-BUDGET ESTIMATES OF FEDERAL FUNDS **NEEDED FOR BALANCE OF THE PROJECT**

This . section need not be completed for (1) noncompeting continuation applications or (2) amendments, changes or supplements (augmentation) to funds for the current year of existing grants.

For new ,-rant applications, on line 16, enter SSA. In column s b throuzh e enter the amounts of Federal funds which *will* be needed to complete the project over the succeeding funding periods (in years).

SECTION F-OTHER BUDGET INFORMATION

Line 21 - Use this space to explain amounts for individual direct object-class cost categories that may appear to be out of the ordinary or to explain the details as required bv the instructions.

The information provided should include sufficient detail to facilitate a determination as to allowability, relevance to the project, and cost/benefit.

Line 22 - Enter the type of indirect rate (provisional, predetermined, final or fixed) that will be in effect during the funding period, the estimated amount of the base to which the rate is applied, and the total indirect expense.

Line 23 - Provide any other explanations or comments deemed necessary.

SECTION G-PERSONNEL

An example for completion of this section is included on the back of the form.

1. Personnel
List all personnel chargeable as a direct cost to the project by title, salary and percentage of effort. Include names for key positions only.

Enter in column I the annual (12 months) salary rate for each position which will be filled for all or any part of the vear bv an incumbent working on the project. This rate may not be more than that paid by the grantee to other employees in comparable positions or, if the grantee has no comparable positions, the rate may not be more than that paid for such services elsewhere in the community.

Enter in column 2 the number of months the position be filled by an incumbent working on the project.
Enter in column 3 the percent of time or effort the incumbent *will* devote to the project during the number of months shown in column **2.**

Enter in column 4 the total amount required as computed from the information shown in columns I through 3. Use the following formula:

$$\text{Annual Salary (Col. 1)} \times \frac{\text{No. of Months (Col. 2}}{12} \times$$

$$\text{Percent of Effort (Col. 3)} = \text{Total Amount Required (Col. 4)}$$

2. Fringe Benefits
Enter in the parenthesis the applicable fringe benefit rate(s). In column 4, enter the amount determined by applying the rate to the total of the salaries in column 4 to which the rate(s) applies
.

3. Option for Salary Detail Submission
Applicants may request that the salary rates and amounts requested for individuals not be made available to HHS reviewing consultants. To do so, an additional copy of this page must be submitted, complete in all respects, except that columns I and 4 may be left blank.

4. Function/Task Description
Attach a description of the function or task to be performed for all personnel listed.

PART 111-PROGRAM NARRATIVE

The review of grant applications is aided material]), when project descriptions are presented in a reasonably uniform pattern. For this reason, the following guidelines should be used in completing the program narrative.

Continuation pages should be typed, single-spaced on one side only of standard-size white bond paper. Each page should be numbered consecutively at the bottom beginning with page III-1

NEW AND COMPETING CONTINUATION GRANTS

The program narrative should describe the major issues of concern, the research and demonstration methodology to be used in addressing these issues, and the potential for implementation of the results. Review of the narrative will concentrate on the above and on the manageability of the design as reflected in the work plan. Should the proposed project be funded, the information provided in the narrative will form the basis for monitoring the project and evaluating progress for future funding decisions as well as aiding SSA in planning for required technical assistance and for the implementation and dissemination of project will findings.

The narrative should be or-eanized under the following major headings:

1. Project Title and Objectives
11. Background and Importance of Project
111. Research and Demonstration Methodology
IV. Evaluation Plan
V. Work Plan
VI.. Project Staff and Facilities
VII. Implementation Potential
VIII. Dissemination of Results

The program narrative should be completed as follows:

1. Project Title and Objectives

A . Select a title that is both short and descriptive.
B . Specify the objectives of the project.

11.Backcround and Importance of Project

A . Discuss the major areas the project will address and the national significance of these problem areas. Include factual comments on the number of individuals (recipients) affected and the maenitude of the human, physical and fiscal resources involved.

B . Discuss the state-of-the-art in resolving these problems. Include approaches that have been or are being taken in resolving the problems and the outcomes of these approaches. Also include (1) the organizational structures which currently deal with the problems, (2) the services provided, and (3) the administrative methods currently used.

C . Discuss the approaches proposed for resolving the problems included with this project and the rationale supporting the proposed resolution.

D. If the performance of any of the project activities is to be transferred to a third party (e.g., evaluation of the project - see IV. E.) include the following information: (1) a description of the activities in question; (2) a justification for the performance by a third party; (3) estimated costs and time schedule; and (4) a description of the kinds of organizations or other parties to be selected and the method of selection.

E. Summarize important results obtained by others which bear on this project, citing publications where applicable. It should be apparent from the summary that existing literature has been critically reviewed and that related programs being carried on elsewhere are known to the applicant.

F. Cite the most important publications of the Project Director on this or closely related work. If none, list the most important publications in other related fields over the last 5 years.

111. Research and Demonstration Afethodologj,

A. List the hypotheses to be tested and explain how they relate to the project objectives.

B. If experimental and control groups are appropriate, discuss the experimental design of the project.

1. Discuss how the control or comparison groups will be formed. Specify how subjects will be selected (and who will do the selecting) for both control and test

2 .Indicate the intended number of subjects to be served (enrolled, surveyed, etc.).
3. Specify how the size of these groups will be or was determined based on the hypotheses to be tested.
4. Describe the process of identifying and acquiring "eligible" subjects.
5. Describe any incentives to encourage subjects to participate.
6. Describe how dropouts *will* be handled.
7. Comment on the methodological problems that may arise and how they will be treated.

C .Explain by what procedures the hypotheses will be rejected or accepted.

IV . *Evaluation Plan*

The evaluation plan refers only to the plan for evaluating the ultimate success or failure of the project and not the plan for evaluating the progress of the project staff in accomplishing the project objectives. The latter evaluation will be an ongoing effort of SSA research and demonstration staff.

A. Discuss the criteria by which the project will be judged a success or failure.
B . List the data to be collected and the normal variability associated with the data.
C. Indicate by what procedures the data are to be collected (survey, computer tapes, interviews, etc.) and how often.
D. Discuss how the data are to be analyzed to establish the success or failure of the project.

E . Indicate who is to conduct the evaluation. If an independent contractor, include the scope of work for the Request for Proposal (RFP).

V. Work Plan

A. List and describe each task (at least one paragraph per task) that must be completed to carry out the project. (Most projects should have between 10 and 20 tasks.)

B. Specify the product(s) for each task that can be provided to SSA on request as proof that the task has been completed.

C. Prepare a Gantt chart showing the start and end dates for each task. Include milestones such as:
 -onsite acquisition of staff;
 -physical acquisition of facilities and equipment;
 -pretest of measurement devices;
 -establishment of linkages with ongoing programs;
 -acquisition of subjects for testing;
 -signing of agreements and contracts;
 -arrangements with public and private agencies to provide services, data or other support;
 -steps to involve potential users; and
 -completion and dissemination of final report.

D. Show the level of effort in man-months (b\ project personnel, if possible) required to complete each task.

E. Indicate the formats for the interim and final progress reports to be submitted to SSA.

VI . Project Staff and Facilities

A. Include a project staff organization chart and, if applicable, show the linkages with State/county organization charts. Note that the Project Director should be full-time, if possible.

B. Staff Qualifications-Include a biographical sketch of the proposed Project Director and other key project staff, highlighting special qualifications that relate to the accomplishment of project objectives, such as education and experience. For each of the key staff not identified at the time of application, provide (in lieu of a biographical sketch) a job description, qualifications sought and a projection of how long after notification of grant award the recruitment of these staff will take.

C. Discuss other qualifications of staff or of organizations affiliated with the project that enhance its potential success.

D. Include copies of endorsements or letters of agreement from State administrators, private service providers and other potential users.

E. Describe the facilities where the activity will be conducted and the location.

V 11. Implementation Potential

A. Estimate the costs and the benefits that might accrue from replication or installation on a statewide basis, specifying the assumptions and logic used in making the estimate.

B. Specify any special features of the target group(s) and the operational environment in which the project will operate that would vary in other locations, thus influencing utilization potential, e.g., rural population, minority composition, political climate, governmental centralization or decentralization, etc.

C. Specify how final products will be oriented toward facilitating implementation in other locations.

D. Discuss commitments made by Federal, State or local governments and other organizations to continue the project or implement its findings after completion
.

V I I I . *Dissemination* of *Results*

A. Specify the means to disseminate the results and promote utilization of these results by others in the field.

B. Describe the training methods and content to be packaged for dissemination and use for others. Note an), restrictions or limitations (patent, copyright, proprietary interest, etc.) on its use by SSA.

NONCOMPETING CONTINUATION GRANTS

In the narrative for noncompeting continuation applications, include changes or additions to the original proposal that are required to make it an up-to-date representation of the project. Include changes or modifications in the project objectives, work plan, and evaluation design and the reasons for the changes.

1. Discuss progress towards meeting the project's objectives covering the following points:
   (a) Accomplishments, findings, and products to date. List in chronological order the sequence of significant events and accomplishments. Explain any time lags in completing tasks and adhering to the work plan and time schedule originally approved.
   (b) Problems encountered, particularly with respect to methodology, sampling and control group identification.

2. Discuss changes in project personnel and provide biographical information for new key personnel.

PART IV-ASSURANCES

This form must be executed by an authorized official of the applicant organization or agency and submitted with the grant application.

OMB Approval No. 0348-0043

APPLICATION FOR FEDERAL ASSISTANCE

1. TYPE OF SUBMISSION: *Application*: ☐ Construction ☐ Non-Construction *Preapplication*: ☐ Construction ☐ Non-Construction	2. DATE SUBMITTED	Applicant Identifier
	3. DATE RECEIVED BY STATE	State Application Identifier
	4. DATE RECEIVED BY FEDERAL AGENCY	Federal Identifier

5. APPLICANT INFORMATION

Legal Name:	Organizational Unit:
Address (give city, county, state, and zip code):	Name and telephone number of the person to be contacted on matters involving this application (give area code)

6. EMPLOYER IDENTIFICATION NUMBER (EIN): ☐☐ ☐☐☐☐☐☐☐

7. TYPE OF APPLICANT: (enter appropriate letter in box) ☐

A. State	H. Independent School Dist.
B, County	I. State Controlled Institution of Higher Learning
C. Municipal	J. Private University
D. Township	K. Indian Tribe
E. Interstate	L. Individual
F. Intermunicipal	M. Profit Organization
G. Special District	N. Other (Specify): ____________________

8. TYPE OF APPLICATION:
☐ New ☐ Continuabon ☐ Revision

If Revision, enter appropriate letter(s) in box(es): ☐ ☐

A- Increase Award B. Decrease Award C. Increase Duration

D. Decrease Duration Other (specify):

____

9. NAME OF FEDERAL AGENCY:

10. CATALOG OF FEDERAL DOMESTIC ASSISTANT NUMBER: ☐☐ ☐☐☐

TITLE:

11. DESCRIPTIVE TITLE OF APPLICANTS PROJECT:

12. AREAS AFFECTED BY PROJECT (cities, counties, states, etc.):

13. PROPOSED PR0JECT:		14. CONGRESSIONAL DISTRICTS OF:	
Start Date	Ending Date	a. Applicant	b. Project

15. ESTIMATED FUNDING:	
a. Federal	$ .00
b. Applicant	$ .00
c. State	S .00
d. Local	$ .00
e. Other	$ .00
f. Program Income	$ .00
g. TOTAL	$ .00

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

a. YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON:

DATE________________________

b. NO. ☐ PROGRAM IS NOT COVERED BY E.O. 12372

☐ OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW

17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?

☐ Yes If "Yes," attach an explanation. ☐ No

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 THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED

a Typed Name of Authorized Representative	b. Title	c. Telephone number
d. Signature of Authorized Representative		e. Date Signed

INSTRUCTIONS FOR THE SF 424

This is a standard form used by applicants as a required facesheet for preapplications and applications submitted for Federal assistance. It will be used by Federal agencies to obtain applicant certification that States which have established a review and comment procedure in response to Executive Order 12372 and have selected the program to be included in their process, have been given an opportunity to review the applicant's submission.

Item:	Entry:
1.	Self-explanatory.
2.	Date application submitted to Federal agency (or State if applicable) & applicant's control number (if applicable).
3.	State use only (if applicable).
4.	If this application is to continue or revise an existing, award, enter present Federal identifier number. If for a new project, leave blank.
5.	Legal name of applicant organization, name of primary organizational unit which will undertake the assistance activity, complete address of the applicant, and name and telephone number of the person to contact on matters related to this application.
6.	Enter Employer Identification Number (EIN) as assigned by the Internal Revenue Service.
7.	Enter the appropriate letter in the space provided.
8.	Check appropriate box and enter appropriate letter(s) in the space(s) provided: "New" means a new assistance award. -"Continuation" means an extension for an additional fund in a/budget period for a project with a projected completion date. -"Revision" means any change in the Federal Government's financial obligation or contingent liability from an existing obligation.
9.	Name of Federal a 'gency from which assistance is being, requested with this application.
10.	Use the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested.
11.	Enter a brief descriptive title of the project. If more than one program is involved, you should append an explanation on a separate sheet. If appropriate (e.g., construction or real property projects), attach a map showing project loca tion. For preapplications, use a separate sheet to provide a summary description of this project.
12.	List only the largest political entities affected (e. g., State, counties, cities).
13.	Self-explanatory.
14.	List the applicant's Congressional District and any District(s) affected by the program or project.
15.	Amount requested or to be contributed during the first funding budget period by each contributor. Value of in-kind contributions should be included on appropriate lines as applicable. If the action will result in a dollar chan2e to an existing award, indicate on1y the amount of the chancre. For decreases, enclose the amounts in parentheses. If both basic and supplemental amounts are included, show breakdown on an attached sheet. For multiple program funding, use totals and show breakdown using same categories as item 15.
16.	Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State intergovernmental review process.
17.	This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans and taxes.
18.	To be signed by the authorized representative of the applicant. A copy of the governing body's authorization for you to sign this application as official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.)

PART 11 - BUDGET INFORMATION

(Round to nearest dollar)

SECTION A - BUDGET SUMMARY

Grant Program, Function or Activity (a)	Federa(Catalog No. (b)	Estimated Unobligated Funds		Now or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal M	Total
1.		$	$	$	$	$
2.						
3.						
4.						
5. TOTALS		$	$	$	$	$

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	Grant Program, Function or Activity				Total
	(1)	(2)	(3)	(4)	(5)
a. Personnel	$	$	$	$	$
b. Fringe Benefits					
c. Travel					
d. Equipment					
e. Supplies					
I. Contractual					
g. Construction					
h. Other					
i. Total Direct Costs					
j. Indirect Costs					
k. TOTALS	$	$	$	$	$
7. Program Income	$	$	$	$	$

SECTION C - NON-FEDERAL RESOURCES

(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(a) TOTALS
8.	$	$	$	$
9.				
10.				
11.	$	$	$	$
12. TOTALS (sum of lines 8 - 11)				

SECTION D - FORECASTED CASH NEEDS

	Total for 1 st Year	I st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	$	$	$	$	$
14. Non-Federal					
15. TOTAL (sum of lines 13 and 14)	$	$	$	$	$

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

	FUTURE FUNDING PERIODS (Years)			
(a) Grant Program	(b) Second	(c) Third	(d) Fourth	(e) Fifth
16.	$	$	$	$
17.				
18.				
19.				
20. TOTALS (sum of lines 16-19)	$	$	$	$

SECTION F - OTHER BUDGET INFORMATION

(Attach additional Sheets if Necessary)

21. Direct Charges:	Indirect Charges:
23. Remarks:	

Par., 11 (Continued)

SECTION G - PERSONNEL

Name and Position Title	Annual Salary Rate	No. Mos. Budg.	% Time	Total Amount Required
	(1)	(2)	(3)	(4)
	Total Salaries and Wages			_
Fringe Benefits (Rate______________________________)	Total Fdnge Benefits			_
			TOTAL	$

Part 11 (Continued)

EXAMPLES	(1)	(2) (3) (4)		
NAME	Annual Salary Rate	No. Mos. Budg.	% Time	Total Amount Required
John Doe, Project Director2/	24,000	12 T2	100	24,000
Jane Smith, Asst. DirJ	18,500	10 12	1 DO	15,417
Senior CounselorV	19,750	12 12	60	11,850
Secretaryv	11,500	9 12	75	6,469
	Total Salaries and Wages			57,736
Fringe Benefits (Rate: 1/ -21% 2/ - 15%	Total Frnge Benefits			8,278 2,748
	CATEGORY TOTAL:			68,762

PART IV ASSURANCES

OMB Approval No. 0348-D040

Note: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant I certify that the applicant____

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.

2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting, standards or agency directives.

3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.

4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.

5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§ 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).

6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title V1 of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. H 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§ 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Off-ice and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimina tion on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§ 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title V111 of the Civil Rights Act of 1968 (42 U.S.C. § 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

7. Will comply, or has already complied, with the requirements of Titles Il and HI of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.

8. Will comply with the provisions of the Hatch Act (5 U.S.C. §§ 1501-1508 and 7324-7328) which limit the political activities of employees whose principal em ployment activities are funded in whole or in part with Federal funds.

9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§ 276a to 276a-7), the Copeland Act (40 U.S.C. § 276c and 18 U.S.C. §§ 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§ 327-333), regarding labor standards for federally assisted construction subagreements.

10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection-Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is $10,000 or more.

11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91 190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§ 1451 et seq.); (f) conformity of Federal actions to State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. § 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).

12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§ 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).

14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.

15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.

16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§ 4801 et seq.) which pro hibits the use of lead based paint in construction or rehabilitation of residence structures.

17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.

18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE

APPLICANT ORGANIZATION	DATE SUBMITTED

PART IV
ASSURANCES (Continued)

PRIVACY ACT

The Privacy Act of 1974 (5 U.S.C. 552a) gives individuals the rieht of access to information concerning themselves and provides a mechanism for correction or amendment of the records. The Privacy Act also provides for protection of information pertaining to an individual, but it does not prevent disclosure of such information if required to be released under the Freedom of Informafion Act. The Privacy Act requires that a Federal agency, advise each individual whom it asks to supply information of the authoritv which authorizes the solicitation, whether disclosure is voluntary or mandatory, the principal purpose or purposes for which the information is intended to be used, the use outside the agency individual, if any, of not providing all or any part of the requested information.

SSA is requesting the information called for in this application pursuant to its statutory authority for awarding grants. Provision of the information requested is entirely voluntary. The collection of this information is for the purpose of aiding in the review of applications prior to grant award decisions and for management of SSA programs. A lack of sufficient information may hinder SSA's ability to review applications, monitor grantee performance, or perform overall management of grant programs.

This information will be used within the Department of Health and Human Services, and may also be disclosed outside the Department as permitted by the Privacy Act, including disclosures to the public as required by the Freedom of Information Act, to the Congress, the National Archives, the Bureau of the Census, law enforcement agencies upon their request, the General Accounting Office, and pursuant to court order. It may also be disclosed outside the Department, if necessary, for the following purposes:

1. To the cognizant audit agency for auditing.

2. To the Department of Justice as required for litigation.

3. To a congressional office from the record of an individual in the response to an inquiry from the congressional office made at the request of that individual.

4. To qualified experts not within the definition of Department employees as prescribed in the Department regulations (45 CFR, Part 5b.2) for opinions as a part of the application review process.

5. To a Federal agency, in response to its request, in connec tion with the letting of a contract, or the issuance of a license, grant, or other benefit by the requesting agency, to the extent that the record is relevant and necessary to the requesting agency's decision on the matter.

6. To individuals and organizations deemed qualified by SSA to carry out specific research related to the review and award processes of SSA

7. To organizations in the private sector with whom SSA has contracted for the purpose of collating, analyzing, aggregating, or otherwise refining records in a system. Relevant records will be disclosed to such a contractor. The contractor shall be required to maintain Privacy Act safeguards with respect to such records.

8. To the grantee institution relative to performance or administration under the terms and conditions of the award.

FREEDOM OF INFORMATION ACT

The Freedom of Information Act and the associated Public Information Regulations (45 CFR Part 5) of the Department of Health and Human Services require the release of certain information regarding grants requested by any member of the public. The intended use of the information will not be a criterion for release. Grant applications and grant related reports are generally available for inspection and copying except that information considered to be an unwarranted invasion of personal privacy will not be disclosed. For specific guidance on the availability of information, refer to 45 CFR Part 5.

PUBLIC REPORTING BURDEN

Public reporting burden for this collection of information is estimated to average 14 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to the Social Security Administration ATTN: Reports Clearance Officer I-A-21 Operations Bldg., Baltimore, MD 21235 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.