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## VOLUNTEER NH NOTICE OF FUNDING OPPORTUNITY (NOFO) 2024-2025 AmeriCorps Formula Programs

**Assistance Listing Number:** 94.006

### ***Volunteer NH NOFO Contacts:***

- Andrea Johnston, Senior Program Officer ([andrea@volunteernh.org](mailto:andrea@volunteernh.org); 603-410-7768)
- Emily Planchet, Program Officer ([emily@volunteernh.org](mailto:emily@volunteernh.org); 603-271-7204)
- Lesley Rossi, Finance & Grants Officer ([lesley@volunteernh.org](mailto:lesley@volunteernh.org); 603-271-7201)

### ***Important Dates***

- **Friday, March 1:** [Intent to Apply Due](#) by 5pm
- **Thursday, March 28:** - New and Recompete Applications Due in eGrants by 5pm (*with additional documents*)
- **April 15 – 19:** Notification of approval or rejection of application (*clarification requests & subsequent deadlines may also accompany notification*)

### ***Accompanying Guidance:***

Please note that this document has been created by Volunteer NH using the 2024 AmeriCorps NOFO for State & National Grants. All applicants **MUST** review the following documents to receive the full guidance:

- FY 2024 ASN Competitive NOFO
- FY 2024 ASN Application Instructions
- FY 2024 ASN Mandatory Supplemental Information
- FY 2024 ASN Performance Measure Instructions

These documents can be found on <https://www.americorps.gov/funding-opportunity/fy-2024-ameri-corps-state-national-grants>. The full Regulations are available online at [www.ecfr.gov](http://www.ecfr.gov).



## AMERICORPS IN NEW HAMPSHIRE

### PROGRAM DESCRIPTION

#### **Purpose of AmeriCorps Funding**

AmeriCorps improves lives, strengthens communities, and fosters civic engagement through service and volunteering. AmeriCorps brings people together to tackle some of the country's most pressing challenges through national service and volunteering. AmeriCorps members and AmeriCorps Seniors volunteers serve with organizations dedicated to the improvement of communities. AmeriCorps helps make service a cornerstone of our national culture. AmeriCorps grants are awarded to eligible organizations proposing to engage AmeriCorps members in evidence-based or evidence-informed interventions/practices to strengthen communities. An AmeriCorps member is an individual who engages in community service through an approved national service position. Members may receive a living allowance and other benefits while serving. Upon successful completion of their service, members earn a Segal AmeriCorps Education Award that they can use to pay for higher education expenses or apply to qualified student loans.<sup>1</sup>

**Volunteer NH (VNH)** is a nonprofit organization that envisions our state as a place where people volunteer together to build strong and connected communities. We bring our vision to life by engaging those communities to solve local challenges through volunteerism.

As New Hampshire's State Service Commission, Volunteer NH administers its own AmeriCorps State selection process and submits the applications it selects to compete for funding directly to AmeriCorps.

#### **Volunteer NH Focus Areas**

Volunteer NH Priorities, as identified in the State Service Plan, are programs that would seek to address:

1. Affordable Housing
2. Access to Mental Health Resources
3. Food Security

Please see the [AmeriCorps 2024 Competitive Notice of Funding Opportunity](#) to view AmeriCorps' 24-25 Funding Priorities.

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<sup>1</sup> Segal AmeriCorps Education Award: <https://americorps.gov/members-volunteers/segal-ameri-corps-education-award>



To receive priority consideration, applicants must show that the priority area is a significant part of the program focus and intended outcomes and must include a high-quality program design. Proposing programs that receive priority consideration does not guarantee funding.

### **National Performance Measures**

AmeriCorps expects applicants to use National Performance Measures as part of a comprehensive performance measurement strategy that relies on both performance and evaluation data to learn from their work and make tactical and strategic adjustments to achieve their goals.

All applications must include at least one aligned performance measure (output and outcome) that corresponds to the proposed primary intervention. This may be a National Performance Measure or an applicant-determined measure. For more information, please refer to the National Performance Measures Instructions found [here](#).

### **FEDERAL AWARD INFORMATION**

***Disclosure:** Publication of this Notice of Funding Opportunity (Notice) does not obligate AmeriCorps or Volunteer NH to award any specific number of grants or to commit any particular amount of funding. The actual level, timing, and process of grant funding will be subject to the availability of annual appropriations.*

### **Estimated Available Funds**

Volunteer NH expects a highly competitive AmeriCorps grant competition. Volunteer NH reserves the right to prioritize providing funding to existing awards over making new awards. The actual level of funding is subject to the availability of annual appropriations.

### **Estimated Award Amount**

Award amounts will vary as determined by the scope of the projects.

### **Period of Performance**

Volunteer NH anticipates making two-year grants. Continuation awards for subsequent years are not guaranteed; they depend upon availability of appropriations and satisfactory performance.

The project start date may not occur prior to the date Volunteer NH awards the grant. Applicants may not request a start date prior to August 1, 2024. AmeriCorps applicants may not enroll prior to the start date of the award. AmeriCorps applicants may not begin service prior to the



beginning of the member enrollment period as designated in the grant award. A program may not certify any hours an applicant performs prior to the applicant becoming a member in the system of record and the beginning of the member enrollment period.

### **Type of Award**

Volunteer NH may award a Cost Reimbursement or a Fixed Amount grant to any successful applicant.

Cost reimbursement grants draw funds on a reimbursement basis for allowable grant expenses incurred. Fixed amount grants draw funds based on the hours served by recruited members as a percentage of the approved cost per MSY.

## **ELIGIBILITY INFORMATION & OTHER REQUIREMENTS**

### **Eligible Applicants**

The following non-Federal entities (all of which are defined in [2 CFR 200.1](#)) are eligible to apply:

- Indian Tribes
- Institutions of higher education
- Local governments
- Nonprofit organizations
- States

### **Unique Entity Identifier and System for Award Management (SAM)**

All applicants **must** register with the System for Award Management (SAM) at <https://www.sam.gov/SAM/> and maintain an active SAM registration until the application process is complete. If an applicant is awarded a grant, it must maintain an active SAM registration throughout the life of the award.

SAM registration must be renewed annually. AmeriCorps suggests that applicants finalize a new registration or renew an existing one at least three weeks before the application deadline, to allow time to resolve any issues that may arise. Applicants must use their SAM registered legal name and physical address on all grant applications to AmeriCorps. The legal applicant's name and physical address in eGrants must match exactly the applicant's SAM-registered information.

Applications must include an Employer Identification Number.



Applications must include a valid Unique Entity Identifier (UEI), which is generated as part of the SAM registration process.

### **Audit Requirements**

Volunteer NH requires that the applicant organization have independently audited or reviewed financial statements and Single Audit, if applicable.

### **Single State Requirement**

All applicants that wish to operate an AmeriCorps program solely in New Hampshire (with AmeriCorps members serving solely in New Hampshire) **must** apply through Volunteer NH. Applicants that wish to have AmeriCorps members serve in more than one state must apply directly to AmeriCorps.

### **Program Size**

Generally, Volunteer NH requires that all applicants request a **minimum of 10 members** for their program; however, exceptions can be requested. AmeriCorps programs should be large enough to make a significant difference in communities. New applicants may not request more than twenty members.

### **Physical Location**

Unless otherwise waived, Volunteer NH requires all successful applicants to have (or be willing to acquire) physical office space in New Hampshire. All members placed in service must also be assigned to a physical host site within commuting distance of the member. Entirely virtual service is not permitted.

### **New Applicants**

To be considered for Formula Program funding, at least one of the following statements about the Legal Applicant Organization must be true:

- The Legal Applicant Organization has successfully administered an AmeriCorps State grant **for at least one year** or successfully completed a Planning Grant through Volunteer NH.
- the Legal Applicant Organization must have **successfully** administered an AmeriCorps State or National grant **in another state** and be willing to grant Volunteer NH access to any requested compliance and reporting documentation.

Any organization not eligible to apply for a Program Grant may be eligible to apply for a Planning Grant (please see Planning Grant NOFO).



### **Continuation Applicants**

Formula Programs are funded for two years. When in their first year, applicants can submit a Continuation application for their second year of funding (rather than re-competing). Continuation funding is not guaranteed. Factors considered may include - but are not limited to - satisfactory performance, demonstrated capacity to manage the grant, compliance with the grant and match requirements, and organizational priorities.

Applicants may only apply as a Continuation once in their two-year cycle. After an applicant successfully applies as a continuation, the applicant will be required to apply as a re-compete in the next Formula funding competition. Additionally, the applicant is encouraged to apply in the next available Competitive application process.

If eligible to apply for continuation funding, **please read the separate *Continuation Instructions* document** to learn how to submit a Continuation application.

### ***Cost Sharing or Matching***

#### ***Fixed Amount Grants***

There is no match requirement for Fixed Amount grants. AmeriCorps does not provide all the funds necessary to operate the program, therefore organizations should raise the additional revenue required to operate the program.

#### ***Cost Reimbursement Grants***

Applicants are required to match funds based on the chart below. The applicant’s match can be non-AmeriCorps cash and/or in-kind contributions. Applicants must indicate whether the match is proposed or secured. Applicants must demonstrate the ability to meet the match requirement at the time of application submission.

AmeriCorps Funding Year	1, 2, 3	4	5	6	7	8	9	10+
Grantee Share Requirements	24%	26%	30%	34%	38%	42%	46%	50%

Law requires that grantees that use other Federal funds as matching funds for an AmeriCorps grant to report those amounts and sources to AmeriCorps on a Federal Financial Report.<sup>2</sup>

<sup>2</sup> Section 121(e)(5) of NCSA (42 U.S.C. §12571(e)).





Grantees must track and be prepared to report on that match separately each year and at closeout to Volunteer NH.

### ***Match Waiver***

Programs may request a match waiver through Volunteer NH that will require AmeriCorps approval. Please contact Volunteer NH to learn more.

## ***Content and Form of Application Submission***

### ***Application Content***

Complete applications must include the following elements:

- Standard Form 424 (SF-424) Face Sheet: This is automatically generated when applicants complete the data elements in the eGrants system.
- Narrative Sections:
  - Executive Summary: This is a brief description of the proposed program.
  - Program Design
  - Organizational Capability
  - Cost-Effectiveness & Budget Adequacy
  - Evaluation Summary/Plan
- Logic Model
- Performance Measures
- Standard Form 424A Budget
- Continuation Changes
- Clarification
- Authorization, Assurances, and Certifications <sup>3</sup>

### ***Page Limits***

There are page limits for the Narratives and Logic Model:

- Narratives
  - Applications must not exceed **ten (10) pages** for the Narratives **as the pages print out from eGrants.**
  - The application sections that count towards the page limit are the:
    - SF-424 Face Sheet
    - Executive Summary

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<sup>3</sup> <https://egrants.cns.gov/cnsmisc/ECERTS.HTM>  
and <https://egrants.cns.gov/cnsmisc/EASSUR.HTM>



- Program Design, Organizational Capability, and Cost-Effectiveness & Budget Adequacy narratives.
  - The application page limit does **not** include the:
    - Evaluation Summary/Plan
    - Clarification Summary
    - Continuation Changes
    - Budget
    - Performance Measures
    - Any required additional documents.
- Logic Model
  - The Logic Model may not exceed **eight (8) pages** when printed with the application from the “Review” tab in AmeriCorps’ web-based management system.

Please note that the length of the application as a word processing document may differ from the length of the document printed out from eGrants. The character limits in eGrants do not align with page limits set in the Notice. **Volunteer NH strongly encourages applicants to print out the application from the “Review and Submit” tab in eGrants prior to submission in order to confirm that the application does not exceed the page limit.**

## ***Award Funding Requirements***

### ***1. Member Living Allowance***

A living allowance is not considered a salary or a wage. Programs are not required to provide a living allowance for members serving in less than full-time terms of service, but Volunteer NH strongly encourages providing all members a living allowance. If a program chooses to provide a living allowance to a less than full-time member, it must comply with the maximum limits in the table below. For Cost Reimbursement grants, the amount must be included in the proposed budget as either AmeriCorps or grantee share. Exceptions are noted below.

While Fixed Amount grant applicants are not required to submit detailed budgets, they are still required to provide a living allowance to members that complies with the minimum and maximum requirements and indicate that living allowance in the fixed amount budget.

**Table: Minimum and Maximum Living Allowance**

<b>Service Term</b>	<b>Minimum # of Hours</b>	<b>Minimum Living Allowance</b>	<b>Maximum Total Living Allowance</b>



Full-time	1,700	\$18,700	\$37,400
Three Quarter-time	1,200	n/a	\$26,180
Half-time	900	n/a	\$18,700
Reduced Half-time	675	n/a	\$14,212
Quarter-time	450	n/a	\$9,724
Minimum-time	300	n/a	\$7,854
Abbreviated-time	100	n/a	\$2,244

### 3. Maximum Cost per Member Service Year (MSY)

The AmeriCorps cost per MSY\* is determined by dividing the AmeriCorps share of budgeted grant costs by the number of MSYs requested. It does not include childcare or the value of the education award a member may earn. The maximum amount an applicant may request from AmeriCorps per MSY is determined on an annual basis.

The maximum cost/MSY for Formula cost-reimbursement and full-cost fixed grants is **\$27,000**.

However, the applicant is encouraged to apply for a cost/MSY closer to the maximum for the Competitive grant competition (\$25,000). Education Award Only Fixed Amount grants have a cost/MSY of \$800.

Volunteer NH reserves to fund a program at a higher or lower cost/MSY.

*\* Member Service Year (MSY): One Member Service Year (MSY) is equivalent to a full-time AmeriCorps position (at least 1,700 service hours.)*

### 4. Indirect Costs

Application budgets may include indirect costs. Based on qualifying factors, applicants may either use a Federally approved indirect cost rate or a 10 percent de minimis rate of modified total direct costs, or may claim certain costs directly, as outlined in 2 CFR 200.4133 states, local governments, and Indian Tribes may use previously approved indirect cost allocation plans. All methods must be applied consistently across all federal awards.

Applicants that have a federal negotiated indirect cost rate, or that will be using the 10% de minimis rate, must enter that information in the Organization section in eGrants. However, under section 121(d) of the National and Community Service Act of 1990, as amended and AmeriCorps' regulations at 45 CFR 2521.95 and 2540.110, no more than five percent of award funds may be used to recover indirect costs on AmeriCorps State and National grants.



Use the AmeriCorps eGrants Indirect Cost Rate (IDCR) User Instructions for how to enter the organization's indirect cost rate. Applicants should not submit documentation addressing the indirect cost rate agreement via email.

**Please note:** To request a federally negotiated indirect cost rate agreement, when AmeriCorps is the applicable cognizant agency for an organization's indirect costs, the applicant must submit a request to [IndirectCostRate@cns.gov](mailto:IndirectCostRate@cns.gov). The applicant may also obtain instructions and additional information by contacting the email address above.

Volunteer NH will elect to retain a share of the 5% of federal funds allocated to indirect costs available to programs. Volunteer NH will retain 2% from all subrecipients, computed from each month's periodic expense report (PER).

### **5. Pre-Award Costs**

Pre-award costs, where authorized, are allowed after receiving written approval from AmeriCorps and Volunteer NH.

## **Other Submission Requirements**

### **Electronic Application Submission in eGrants**

Applicants must submit applications electronically via [eGrants, AmeriCorps' web-based application system](#). Volunteer NH recommends that applicants create an eGrants account and begin the application at least three weeks before the deadline. Applicants should draft the application as a Word document, then copy and paste the text into the appropriate eGrants field no later than 10 days before the deadline.

### **Submission of Additional Documents**

Applicants are required to submit the additional documents below by the application submission deadline. Additional documents must be emailed to [andrea@volunteernh.org](mailto:andrea@volunteernh.org), unless otherwise noted.

Failure to submit the required additional documents may have a negative effect on the assessment of your application and/or on the determination of the application's eligibility to advance for review.

Additional documents must be emailed with the following subject line: "Legal Applicant Name" – "Application ID Number." Emails should include:

- the legal applicant name and its point of contact information



- the application ID number
- a list of documents that are attached to the email by filename, **labeling each document type as below:**
  - Document Header\_LegalApplicant\_AppID (e.g. "Evidence Study #1\_Faux Nonprofit\_23AC867530")

To ensure that all required additional documents are considered, please provide each document as a separate single file, labeled appropriately.

Document	Required for:	Send To:	When Required:	Notes:
Intent to Apply	New, Recompete, AND Continuation applicants	N/A – this is an online form	Friday, March 1	Link: <a href="https://forms.office.com/r/5LMPBDh7eF">https://forms.office.com/r/5LMPBDh7eF</a>
Most recent Audit or Reviewed Financial Statements	All Applicants	<a href="mailto:andrea@volunteernh.org">andrea@volunteernh.org</a>	With submission of <b>application</b>	
Organization Chart	New Applicants	<a href="mailto:andrea@volunteernh.org">andrea@volunteernh.org</a>	With Submission of <b>application</b>	
Application Checklist	New/Recompete Applicants	N/A- Online Form	With Submission of <b>application</b>	Link: <a href="https://forms.office.com/r/MsXFzyvyDn">https://forms.office.com/r/MsXFzyvyDn</a>
Operational and Financial Management Survey	New and Recompete applicants	N/A – this is an online form	With submission of <b>application</b>	Link: <a href="https://forms.office.com/r/qTaxFzgc6U">https://forms.office.com/r/qTaxFzgc6U</a>
Evaluation Briefs, Reports & studies	New and Recompete applicants	<a href="mailto:Andrea@volunteernh.org">Andrea@volunteernh.org</a>	With submission of <b>application</b>	



For Submission - if Applicable to your Organization/Program				
Federally Approved Indirect Cost Agreement	All Applicants <i>(as applicable)</i>	<a href="mailto:andrea@volunteernh.org">andrea@volunteernh.org</a>	With submission of <b>application</b>	
Labor Union Concurrence	New & Recompete applicants <i>(if applicable)</i>	<a href="mailto:andrea@volunteernh.org">andrea@volunteernh.org</a>	With submission of <b>application</b>	
Federal Debt Delinquency	New & recompete applicants <i>(if applicable)</i>	<a href="mailto:andrea@volunteernh.org">andrea@volunteernh.org</a>	With submission of <b>application</b>	
Letters of Support for Consortium Members	Rural Intermediary applicants <i>(new and recompete)</i>	<a href="mailto:andrea@volunteernh.org">andrea@volunteernh.org</a>	With submission of <b>application</b>	

**Please do not submit any items that are not requested in this Notice and Guidance.**

***Late Applications***

All applications received after the submission deadline published in this Notice are presumed to be non-compliant. Organizations can request extensions before the due date, but Volunteer NH reserves the right to deny the request.



## APPLICATION INSTRUCTIONS

Please use these application instructions if you are a **new** or **recompeting** applicant to AmeriCorps.

If you are submitting a request for continuation to AmeriCorps, please see the separate **Continuation Instructions**.

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

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

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

1. AmeriCorps Regulations 45 CFR §§ 2520–2550 take precedence over the
2. *Notice of Federal Funding Opportunity/Notice of Federal Funding Availability*, which takes precedence over the
3. Application Instructions.

### **Review Criteria**

Each applicant must describe a project that will deploy AmeriCorps members effectively to solve a significant community problem. Volunteer NH urges applicants to submit high quality applications that carefully follow the guidance in this *Notice* and in the Application Instructions. The quality of an application will be an important factor in determining whether an organization will receive funding.

Please be aware that Volunteer NH’s review process does not mirror this process exactly but is given to provide an idea on the importance of each section. All applications are reviewed by





both Volunteer NH Staff and an outside committee of reviewers. VNH may also take other factors into consideration (such as past performance, submitted additional documents, and others) when determining funding.

Categories/Subcategories	Percentage
<b>Executive Summary</b>	<b>0</b>
<b>Program Design</b>	<b>50</b>
<b>Organizational Capability</b>	<b>25</b>
<b>Cost-Effectiveness and Budget Adequacy</b>	<b>25</b>

***New and Recompeting Applicants***

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

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

- From the home screen, under the “Creating an Application” section:
  - Click “New”
- Then, in the “Select a Program Area” screen:
  - Select: “AmeriCorps” and click “Go”
- Select a NOFA Screen:
  - Click: “FY 2024 AmeriCorps State and Territory (New and Cont.)”
    - *You may get a “Warning” message saying that the NOFA is already closed. You can ignore this and click “OK” and then click “Next”*
- NOFA Information:
  - “Which State are you applying to”
    - Select “New Hampshire” from the dropdown menu
  - Select a Prime Application ID
    - Select the one option that appears and click next. You should then be navigated to your new application.

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

- I. Applicant Info
- II. Application Info
- III. Narratives
- IV. Logic Model
- V. Performance Measures
- VI. Program Information





- VII. Documents
- VII. Budget
- IX. Funding/Demographics
- X. Review
- XI. Authorize, and Submit

### I. Applicant Info

Information entered in the Applicant Info, Application Info, and Budget sections will populate the SF 424 Face sheet.

- If you are applying for the first time, select **New**
- If you are a current planning grantee applying for an implementation grant, select **New**
- If you are recompeting, select "Continuation/Renewal"

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

Please note that the *Authorized Representative* and the *Program Director* should be two separate people from your organization.

### II. Application Info

In the Application Info Section enter:

- Areas affected by your proposed program. Please include "NH." For city or county information, please follow each one with "NH."
- Requested project period start and end dates (this should be ONE YEAR exactly and **not before** August 1, 2024).
- The Application is Subject to Review by State Executive Order 12372 Process: This is pre-filled as "No, this is not applicable."
- Indicate Yes or No if you are delinquent on any federal debt. If yes, provide an explanation.
- State Application Identifier: **Enter N/A.**

### III. Narratives

The narrative section of the application is your opportunity to convince reviewers that your project meets the selection criteria as outlined in the *Notice*. Below are some general recommendations to help you present your project in a way the reviewers will find compelling and persuasive.

- **Lead from your program strengths and be explicit.** Do not make the mistake of trying to stretch your proposed program description to fit funding priorities and special considerations articulated in the regulations or the *Notice*.



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

In eGrants, you will enter text for

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

Note: The Narratives Section also includes fields for Evaluation Summary or Plan, Clarification Summary, Amendment Justification, and Continuation Changes. **Please enter N/A in all fields.**

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

### **A. Executive Summary**

Please fill in the blanks of these sentences to complete the Executive Summary. Do not deviate from the template below.

The [Name of the organization] will have [Number of] AmeriCorps members who will [service activities the members will be doing] in [the locations the AmeriCorps members will serve]. At the end of the first program year, the AmeriCorps members will be responsible for [anticipated outcome of project]. In addition, the AmeriCorps members will leverage [number of leveraged



volunteers, if applicable] who will be engaged in [what the leveraged volunteers will be doing.]

The AmeriCorps investment will be matched with \$[amount of projected match], \$[amount of local, state, and Federal funds] in public funding and \$[amount of non-governmental funds] in private funding.

*\*Fixed-Amount grant applicants (EAP, Full-Cost Fixed, No Cost Slots) should list their Other Revenue (see Mandatory Supplemental Information) because they are not required to provide a specific amount of match, but still raise significant additional resources to operate the program. The language here should then say, "The AmeriCorps investment will be supported by other revenue of \$[Total Other Revenue], \$ \_\_\_\_\_ in public funds, and \$ \_\_\_\_\_ in private funds"\**

### **Program Design (50 percent)**

Reviewers will consider the quality of the application's response to the criteria below. Do not assume all sub-criteria are of equal value. Please ensure the Community and Logic Model incorporates the funding priorities listed above, for example supporting communities historically excluded and/or underserved from government services, addressing structural and institutional inequities, or increasing opportunity in order to achieve sustainable change in communities.

### **SECTION HEADINGS**

Please use the following headings in the Program Design and Organizational Capability Sections:

- Executive Summary
- Program Design:
  - Community & Logic Model
  - Evidence Base
  - Member Experience
- Organizational Capability:
  - Organizational Background & Staffing
  - Member Supervision
  - Commitment to DEIA
- Budget Adequacy:
  - Member Recruitment
  - Member Retention
  - Data Collection
  - Budget Alignment to Program Design



## **1. Community and Logic Model (24 points)**

### **The Community shall address:**

The applicant will provide a detailed summary of the community problem, including:

- The role current or historical inequities faced by underserved communities may play in contributing to the problem.
- The community need as it relates to the [CDC's Social Vulnerability Index](#) and to communicate the severity and prevalence of the problem.

The applicant's intervention is likely to lead to the outcomes identified in the organization's Logic Model. No narrative is needed other than what is contained within the logic model.

### **The Logic Model Shall Depict:**

- The inputs or resources that are necessary to deliver the intervention, including but not limited to:
  - Locations or sites in which members will provide services
  - Context in which the intervention is delivered (e.g., the setting where the intervention is delivered)
  - Number of AmeriCorps members who will deliver the intervention
  - Characteristics of AmeriCorps members, including specific knowledge, skills, and abilities required to implement the intervention
- The core activities that define the intervention or program model that members will implement or deliver, including:
  - Duration of the intervention (e.g., the total number of weeks, sessions or months of the intervention)
  - Dosage of the intervention (e.g., the number of hours per session or sessions per week)
  - Target population for the intervention (e.g., disconnected youth, third graders at a certain reading proficiency level)
- The measurable outputs that result from delivering the intervention (i.e., number of beneficiaries served, types and number of activities conducted, equity gaps closed). If applicable, identify which [National Performance Measures](#) will be used as output indicators.
- Outcomes that demonstrate meaningful changes in knowledge/skill, attitude, behavior, or condition that occur as a result of the intervention. If applicable, identify which National Performance Measures will be used as outcome indicators.
- Outcomes that demonstrate changes in knowledge/skill, attitude, behavior, or condition that occur as a result of the intervention. If applicable, identify which National Performance Measures will be used as outcome indicators.



Note: The Logic Model is a visual representation of the applicant’s Theory of Change. Programs should include short, medium, or long-term outcomes in the Logic Model. Applicants are not required to measure all components of their Logic Model. The applicant’s performance measures should be consistent with the program’s Logic Model and should represent significant program activities.

Rationales and justifications should be informed by the organization’s performance data (e.g., program data observed over time that suggests targets are reasonable), relevant research (e.g. targets documented by organizations running similar programs with similar populations), or prior program evaluation findings.

Applicants with multiple interventions should complete one Logic Model chart which incorporates each intervention. Logic Model content that exceeds eight pages will not be reviewed.

**To complete the Logic Model in eGrants:**

- To begin entering your logic model, from your eGrants application page select “Logic Model” in the left side navigation menu.
- In the first blank row of the logic model, click “edit.” Clicking this link will open a pop-up screen with fields for each column of the logic model. Complete any fields that are applicable; there are no required fields in this screen. When you are finished, click “save and close.”
- You may add an unlimited number of rows to the logic model by clicking “add a new row.” However, please be mindful of the 8-page limit.
- You may edit or delete an existing row by clicking “edit” or “delete” in the last column of the logic model.

**2. Evidence Base (20 points)**

The assessment of an applicant’s evidence base has two parts. First, the applicant will be assigned to an evidence tier (see the *Mandatory Supplemental Information*.) Second, the quality of the applicant’s evidence and the degree to which it supports the proposed program design, including program aligned with the priority areas identified above, will be assessed and scored.

**Evidence Tier (12 points):**

*\*\*Please see pages 3-4 (under “Evidence Tiers”) of the [Mandatory Supplemental Information](#) for detailed descriptions of Pre-Preliminary, Preliminary, Moderate, and Strong Evidence. \*\**

An evidence tier will be assessed for each applicant for the purpose of understanding the relative strength of each applicant’s evidence base and the likelihood that the proposed intervention will lead to outcomes identified in the logic model.



In 2023, the evidence tiers of successful AmeriCorps State and National applicants that were competing were as follows: Strong 25 percent, Moderate 12 percent, Preliminary 20 percent, and Pre-Preliminary 43 percent. As these figures indicate, AmeriCorps values and funds programs at all points along the evidence continuum and expects programs to progress along the evidence continuum over time. **Thus, applicants should not be deterred from applying for funding due to their current evidence level.**

Applicants who have outcome or impact evaluation reports of the same intervention described in the application (see Mandatory Supplemental Information for a definition of “same intervention”) may submit up to 2 of those reports, plus (if applicable) the evaluation report from their last three-year grant cycle, to qualify for the Preliminary, Moderate, or Strong evidence tier. In order to qualify for consideration, the intervention evaluated in the submitted report(s) must match the intervention proposed by the applicant in the following areas, all of which must be clearly described in the Program Design and Logic Model sections of the application:

- Characteristics of the beneficiary population, including evidence of current or historic inequities facing the population;
- Characteristics of the population delivering the intervention;
- Dosage (frequency and duration) and design of the intervention, including all key components and activities;
- The context in which the intervention is delivered; and
- Outcome of the intervention.

Submitted reports that do not sufficiently match the intervention proposed by the applicant in all of these areas will not be considered applicable and will not be reviewed or receive any points. Submission of additional documents that are not consistent with the guidance and requirements described in the *Notice* (e.g., advocacy pieces, policy briefs, other narratives that are not research studies or program evaluations) will not be reviewed.

In the Evidence Tier section of the application narrative, applicants must (1) summarize the study design and key findings of any outcome or impact evaluation report(s) submitted and (2) describe any other evidence that supports their program, including past performance measure data and/or other research studies that inform their program design. Applicants who submit evaluation reports for consideration must also describe in the Evidence Base section of the application narrative how the intervention described in the submitted reports is the same as the intervention described in the application (see *Mandatory Supplemental Information*).





Applicants should provide citations for the studies they describe, if applicable; however, reviewers will not review any documents external to the application other than evaluation report(s) submitted in accordance with the *Notice* instructions.

Applicants must meet all requirements of an evidence tier in order to be considered for that tier.

If the evaluation reports submitted by the applicant do not meet the definitions in the Mandatory Supplemental Information, the applicant may be considered for a lower evidence tier.

### **Evidence Quality (8 points)**

After the applicant's evidence tier has been assessed, the quality of the applicant's evidence and the extent to which it supports the proposed program design will be assessed and scored.

Applicants who are assessed as being in the **Preliminary, Moderate, or Strong** evidence tiers, reviewers will score the submitted evaluation reports using the following standards:

- The submitted reports are of satisfactory methodological quality and rigor for the type of evaluation conducted (e.g., adequate sample size and statistical power, internal and/or external validity, appropriate use of control or comparison groups, etc.);
- The submitted reports describe evaluations that were conducted relatively recently, preferably within the last six years;
- The submitted reports show a meaningful and significant positive effect on program beneficiaries in at least one key outcome of interest.

Applicants that are assessed as being in the **Pre-Preliminary** evidence tier, reviewers will score the narrative provided in the Evidence Base section of the application using the following standards:

- The applicant uses relevant evidence, including past performance measure data and/or cited research studies, to inform their proposed program design;
- The described evidence is relatively recent, preferably from the last six years;
- The evidence described by the applicant indicates a meaningful positive effect on program beneficiaries in at least one key outcome of interest.

Applicants assessed in the Pre-Preliminary evidence tier that do not provide adequate responses to the Evidence Quality standards will not meet the threshold requirements for this Notice and will **not be considered for funding**.



### **3. Notice Priority (0 points)**

The applicant proposed program fits within one or more of the Volunteer NH funding priorities as outlined in the Funding Priorities section. THIS IS NOT A NARRATIVE SECTION.

### **4. Member Experience (6 points)**

The narrative should address the following topics:

- The applicant details how AmeriCorps members will be provided an opportunity to be leaders and gain skills during their term of service that will be valued by future employers (e.g., workforce pathways, increasing levels of responsibility and leadership roles for members).
- The applicant details how AmeriCorps members will be provided a high quality orientation to the community they will serve in that is from an asset-based frame and guided and informed by the community.

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

Reviewers will consider the quality of the applications' response to the following criteria below. Do not assume all sub-criteria are of equal value.

#### **1. Organizational Background and Staffing (15 points)**

The narrative should address the following:

- The applicant details the roles, responsibilities, and structure of the staff that will be implementing, providing oversight, and monitoring the program.
- The applicant has facilitated, partnered, or participated in educational or workforce development programs (i.e., pre-apprenticeship/registered apprenticeship, work experience and job training programs, etc.)
- The applicant describes their organization's mission and relevant experience in areas such as volunteer recruitment and management, community outreach, overcoming project implementation challenges, etc.

#### **2. Member Supervision (6 points)**

The narrative should address the following:

- The applicant details how AmeriCorps members will receive sufficient guidance and support from their supervisor to provide effective service (e.g., structure for member supervision: cadence and format of supervisor/AmeriCorps member check-ins, member and supervisor opportunities to assess strengths and opportunities for growth, member training plan, etc.).
- The applicant details how AmeriCorps supervisors will be adequately trained/prepared to follow AmeriCorps and program regulations, priorities, and expectations (e.g., structure





for support of supervisors, training plan for supervisors related to supervision and AmeriCorps rules and regulations, cadence and format of AmeriCorps supervisors/their supervisors check ins, opportunities to assess strengths and opportunities for growth of supervisors, etc.).

### **3. Commitment to Diversity, Equity, Inclusion, and Accessibility (4 points)**

The narrative should address the following:

- The leadership and staff of the organization have similar lived experience as the beneficiary population and/or community being served.
- The applicant's definitions of diversity, equity, inclusion, and accessibility is demonstrated by the organization (e.g., diversity on the Board of Directors, agency staff and leadership, and/or volunteers) and the organization upholds a supportive and safe environment for individuals of diverse backgrounds.

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

Reviewers will assess the quality of the application's response to the following criteria below.

#### **1. Member Recruitment (7 points)**

The narrative should address the following:

- The applicant provides a description of budget expenses to support successful recruitment of AmeriCorps members best suited to serve the community, for example from geographic or demographic communities in which the program operates.

#### **2. Member Retention (8 points)**

The narrative should address the following:

- The applicant provides a description of budget expenses to support retention of AmeriCorps members (e.g., additional member benefits such as increasing above the minimum living allowance, supporting workforce pathways, certifications, coaching for members, resume building, individual benefit as well as community building, network building, member recognition, alumni programming, etc.).

#### **3. Data Collection (7 points)**

The narrative should address the following:

- The applicant provides a description of budget expenses to support data collection, continuous improvement activities, and evaluation in service to evaluating the interventions and impact on the community and the member experience).



#### 4. Budget Alignment to Program Design (3 points)

The narrative should address the following:

- The applicant’s budget is aligned to the program design outlined in the narrative, meaning activities discussed in the narrative are incorporated in the budget in the agency or applicant share.

**Please See Budget Instructions (Section VII) for specific guidance on Budget Items.**

#### C. Evaluation Summary or Plan

Enter N/A

#### D. Amendment Justification

Enter N/A.

#### E. Clarification Information

Enter N/A.

#### F. Continuation Changes

Enter N/A.

### IV. Performance Measures

All applicants must submit performance measures with their application. See the attachment for instructions for entering performance measures, and see the **Performance Measure Instructions** for details about the number and type of performance measures required.

### V. Program Information

In the Program Information Section, applicants must check the relevant boxes in order to be considered for AmeriCorps’ assessment of the strategic considerations and Special Initiatives. Applicants should only check the boxes for those characteristics that represent a **significant part** of the program.

#### AmeriCorps Funding Priorities

Check any priority area(s) that apply to the proposed program. Only select Priorities that represent a significant part of the program focus and intended outcomes.

#### Grant Characteristics

Check any grant characteristics that are a **significant** part of the proposed program.



## VI. Documents

In addition to the application submitted in eGrants, you are required to provide your evaluation, labor union concurrence (if necessary – see B., below), other required documents listed in the *Notice* (if applicable), and an explanation of federal debt delinquency (if applicable), as part of your application. After you have submitted the documents via the instructions in the *Notice*, change the status in eGrants from the default “Not Sent” to the applicable status “Sent,” “Not Applicable,” or “Already on File at AmeriCorps.”

### A. Evaluation

Select “Not Applicable”

### B. Labor Union Concurrence

- 1) If a program applicant—
  - a) Proposes to serve as the placement site for AmeriCorps members; and
  - b) Has employees engaged in the same or substantially similar work as that proposed to be carried out by AmeriCorps members; and
  - c) Those employees are represented by a local labor organization  
--then the application must include the written concurrence of the local labor organization representing those employees. Written concurrence can be in the form of a letter or e-mail from the local union leadership.
  
- 2) If a program applicant:
  - a) Proposes to place AmeriCorps members at sites where they will be engaged in the same or substantially similar work as employees represented by a local labor organization, then the applicant must submit a written description of how it will ensure that:
    - i) AmeriCorps members will not be placed in positions that were recently occupied by paid staff.
    - ii) No AmeriCorps member will be placed into a position for which a recently resigned or discharged employee has recall rights as a result of a collective bargaining agreement, from which a recently resigned or discharged employee was removed as a result of a reduction in force, or from which a recently resigned/discharged employee is on leave or strike.

For the purposes of this section, “program applicant” includes any applicant to Volunteer NH.

### C. Federally-approved Indirect Cost Agreement

Provide the Federally-approved Indirect Cost Agreement (if applicable) via the e-mail listed in the *Notice*, as part of your application. Otherwise, select “Not Applicable”.



#### **D. Other Documents**

Provide other required documents list in the *Notice* (if applicable) via the e-mail listed in the *Notice*, as part of your application.

#### **E. Delinquent on Federal Debt**

Any applicant who checks “Yes” to the question on federal debt delinquency must submit a complete explanation to [andrea@volunteernh.org](mailto:andrea@volunteernh.org) at the same time they submit their application.

#### **F. Submission Instructions for Evaluations, Labor Union Concurrence, Other Required Documents, and Explanation of Federal Debt Delinquency, as applicable.**

Please submit the required documents to the e-mail listed in the *Notice* using the naming convention and other instructions found there. This information must be received at Volunteer NH by the deadline in the *Notice*.

### **VII. Budget Instructions**

For Cost-Reimbursement Grants – Please see Attachment B

For Fixed Amount grants, including EAPs – Please see Attachment C.

### **VIII. Funding/Demographics**

In the Funding/Demographics Section enter the information requested which could include:

- **Other Revenue funds.** Enter the amount of funds that your program uses to run the program that are not identified on the application budget as CNCS share or grantee share (match). Note: Programs should not enter the total operating budget for their organization unless the entire operating budget supports the AmeriCorps program. Programs that have additional revenue sources not included in the matching funds section of the budget should provide the amount of this additional revenue that supports the program. This amount should not include the CNCS or grantee share amounts in the budget. Fixed amount grantees should enter all non-CNCS funds that support the program in this field. All fixed grants will have other revenue.
- **Number of Volunteers Generated by AmeriCorps members.** Please enter the number of volunteers participating in one day service projects or ongoing volunteer commitments that the proposed AmeriCorps members will generate.



## IX. Review, Authorize, and Submit

Applicants must submit common federal government-wide Representations and Certifications through SAM.gov. Entities creating new registrations in SAM.gov and existing entities completing their annual registration renewals in SAM.gov are required to review financial assistance representations and certifications before their registration can be activated. As entities renew and re-register their accounts, the data collected make SAM.gov the federal repository for the government-wide information.

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

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

Read the Authorization, Assurances, and Certifications carefully

(<https://espan.cns.gov/cnsmisc/ECERTS.HTM>, and <https://espan.cns.gov/cnsmisc/EASSUR.HTM>). The person who authorizes the application must be the applicant's Authorized Representative or his/her designee and must have an active eGrants account to sign these documents electronically. An Authorized Representative is the person in your organization authorized to accept and commit funds on behalf of the organization. A copy of the governing body's authorization for this official representative to sign must be on file in the applicant's office.

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

**Note: Anyone within your organization who will be entering information in the application at any point during application preparation and submission in the eGrants system must have their own eGrants account.** Individuals may establish an eGrants account by accessing



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

### ***Continuation Requests***

Please see separate document for Continuation requests.



## ***ATTACHMENT A: Performance Measures Instructions***

### **About the Performance Measures Module**

In the performance measures module, you will:

- Provide information about your program's connection to AmeriCorps focus areas and objectives.
- Show MSY and member allocations.
- Create the required performance measure(s) as specified in the Performance Measure Instructions
- Set targets and describe data collection instruments and strategies for your performance measures.

### **Home Page**

To start the module, click the "Begin" button on the Home Page.

As you proceed through the module, the Home Page will summarize your work and provide links to edit the parts of the module you have completed. You may also navigate sections of the module using the tab feature at the top of each page.

Once you have started the module, clicking "Continue Working" will return you to the tab you were on when you last closed the module.

To edit the interventions, objectives, MSYs, and member allocations for your application, click the "Edit Objectives/MSYs/Members" button.

After you have created at least one performance measure, the Home Page will display a chart summarizing your measures. To edit a performance measure, click the "Edit" button. To delete a measure, click "Delete." To create a new performance measure, click the "Add New Performance Measure" button.

### **Objectives Tab**

On the objectives tab, applicants will account for the full range of their program activity. Applicants are not expected to create performance measures for every focus area, objective, or intervention they select on this tab.

An expandable list of AmeriCorps focus areas appears on this tab. When you click on a focus area, a list of objectives appears. A list of common interventions appears under each objective





First click on a focus area. Then click on an objective. Only the performance measures that correspond to the objectives you select on this tab will be available for selection as you continue through this module. To see which performance measures correspond to which objective, refer to the Performance Measure Instructions.

Next, select all interventions that are part of your program design. Interventions are the activities that members and/or volunteers will carry out to address the problem(s) identified in the application. Select "other" if one of your program's interventions does not appear on the list. Repeat these actions for each of your program's focus areas. Select "other" for your focus area and/or objective if your program activities do not fall within one of the AmeriCorps focus areas or objectives.

Choose your program's primary focus area from the drop-down list. Only the focus areas that correspond to the objectives you selected above appear in the list. Next, select the primary intervention within your primary focus area. You will be required to create an aligned performance measure (output paired with outcome) that contains your primary intervention. Note that your primary intervention, and the performance measure associated with your primary intervention, must be focused on the community impact of the program, not on AmeriCorps member development.

You may select a secondary focus area and a secondary intervention. The primary and secondary focus area may be the same if you have more than one intervention within the focus area.

### **MSYs/Members Tab**

On this tab, you will enter information about the allocation of MSYs and members across the focus areas and objectives you have selected. You must allocate 100% of your program's MSYs to focus areas and objectives. When you create your performance measures, you will be asked to allocate MSYs to each performance measure; however, you will not be required to assign 100% of your total MSYs to performance measures.

Begin by entering the total MSYs for your program. This must match the total MSYs in your budget. Please double-check your budget to make sure that the total MSY values match.

Next, enter the number of MSYs your program will allocate to each objective. Only the objectives that were selected on the previous tab appear in the MSY chart. If some of your program's objectives are not represented in the chart, return to the previous tab and select additional objectives. The MSY chart must show how all your program's resources are





allocated. If the only activity in an objective that you have selected is focused on AmeriCorps member development rather than beneficiary impact, enter 0 MSYs for that objective.

As you enter MSYs into the MSY column of the chart, the corresponding percentage of MSYs will calculate automatically. When you have finished entering your MSYs, the total percentage of MSYs in the chart must be 100%. The total number of MSYs in the chart must equal the number of MSYs in your budget.

In the “members” column, enter the number of members who will be assigned to each objective. Some members may perform services across more than one objective. If this is the case, allocate these members to all applicable objectives. For example, if one member performs service in both school readiness and K-12 success, allocate one member to each of these objectives. It is acceptable for the total number of members in this table to exceed total slots requested in the application due to counting members’ service across multiple objectives. If the only activity in an objective that you have selected is focused on AmeriCorps member development rather than beneficiary impact, enter 0 members for that objective.

To ensure that information is entered accurately, please refer to additional instructions in Appendix A of the Performance Measure Instructions on calculating and entering MSY and member allocations.

### **Performance Measure Tab**

This tab allows you to create performance measures for all the grant activities you intend to measure.

Begin by creating the aligned performance measure for your primary intervention. After creating your required performance measure, you will be able to create additional performance measures if desired.

To create a performance measure, begin by selecting an objective. The list of objectives includes those you selected on the objectives tab. Note that programs may not create performance measures for the Find Opportunity, Teacher Corps, Green Jobs, or Access & Attract objectives, since these are member-focused objectives. Member-focused outputs and outcomes related to these objectives may be reported as Performance Data Elements on grantee progress reports.

Provide a short, descriptive title for your performance measure.

Briefly describe the problem your program will address in this performance measure.



Select the intervention(s) to be delivered by members and/or member-supported volunteers. The list of interventions includes the ones you selected previously for this objective. Select only the interventions that will lead to the outputs (plus outcomes, if applicable) of the performance measure and that are applicable to all beneficiaries counted under the measure. If you selected “other” as an intervention and wish to include an applicant-determined intervention in your aligned performance measure, click “add user intervention” and enter a one or two word description of the intervention. Do not a user-defined intervention that duplicates an intervention already available in the system.

Select output(s) for your performance measure. The output list includes only the National Performance Measure outputs that correspond to the objectives you have selected. If you do not wish to select National Performance Measures, and if the objective you have selected permits applicant-determined outputs, you may create an applicant-determined output by clicking in the checkbox next to the empty output text box and entering the text of your output indicator. You may create additional applicant-determined outputs for the performance measure by clicking “Add User Output.” (Note: you are not permitted to create an applicant-determined output that duplicates a National Performance Measure output. If you do not see the National Performance Measure output that you wish to use, check the Selection Rules in the Performance Measure Instructions to make sure you selected the correct objective associated with that National Performance Measure output.)

Select outcome(s). If you have selected a National Performance Measures output that has corresponding National Performance Measures outcome(s), these outcomes will be available to select. If you do not wish to select a National Performance Measure outcome, you may create an applicant-determined outcome by clicking in the checkbox next to the empty outcome text box and entering the text of your outcome indicator. If you do not wish to select any outcome for your National Performance Measure output, click in the checkbox next to the empty outcome text box and enter “NA” in the outcome indicator text box.

If you have not selected a National Performance Measure output, or if there is no corresponding National Performance Measure outcome, create an applicant-determined outcome by clicking “Add User Outcome.” All applicant-determined outputs must be paired with an applicant-determined outcome.

Enter the number of MSYs and members your program will allocate to achieving the outcomes and/or outputs you have selected in this performance measure. Since programs are not required to measure all grant activities, the number you enter does not have to correspond to the MSY chart you created on the MSY/Members tab; however, the total number of MSYs across all performance measures within a single objective cannot exceed the total number of



MSYs previously allocated to that objective. Members may be double-counted across performance measures, but MSYs may not.

Click “next” to proceed to the data collection tab. Later you can return to this tab to create additional performance measures.

### **Data Collection Tab**

On this tab, you will provide additional information about your interventions, instruments, and plan for data collection.

Describe the design and dosage (frequency, intensity, duration) of the interventions you have selected. Frequency refers to how often an intervention occurs (for example, number of sessions per week); intensity refers to the length of time devoted to the intervention (for example, number of minutes per session); and duration refers to the period of time over which the intervention occurs (for example, how many total weeks of sessions).

Expand each output and outcome and enter data collection information.

Select the data collection method you will use to measure the output or outcome. To select more than one method, click the “Add new method” button. To de-select a method, click the first (blank) line in the method drop-down.

Describe the specific instrument(s) you will use to measure the output or outcome. Include the title of the instrument(s), a brief description of what it measures and how it will be administered, and details about its reliability and validity if applicable. For outcomes, specify how much improvement in knowledge, attitude, behavior or condition is required to be counted as having improved and clearly explain how the instrument measures this.

Enter the target number for your output or outcome. Targets must be numbers, not percents.

For applicant-determined outputs and outcomes, enter the unit of measure for your target. The unit of measure should describe the beneficiary population you intend to count (children, miles, etc.). Do not enter percents or member service hours as units of measure. In most cases, the unit of measure should be the same for the outputs and outcomes in an aligned performance measure.

For output-only performance measures, eGrants will require text in the outcome data collection fields. If you do not wish to have an outcome for your National Performance Measure output, enter the following:



- Method: Select “other.”
- Instrument Description: Enter “NA”
- Target: Enter “1”
- Unit of Measure: Enter “NA”

After entering data collection information for all outputs and outcomes, click “Mark Complete.” You will return to the Performance Measure tab. If you wish to create another performance measure, repeat the process. If you would like to continue to the next step of the module, click “Next.”

### **Summary Tab**

The summary tab shows all of the information you have entered in the module.

To print a summary of all performance measures, click “Print PDF for all Performance Measures.”

To print one performance measure, expand the measure and click “Print This Measure.”

Click “Edit Performance Measure” to return to the Performance Measure tab.

Click “Edit Data Collection” to return to the Data Collection tab.

“Click Validate Performance Measures” to validate this module prior to submitting your application. You should also use the Performance Measures Checklist in Appendix B of the Performance Measure Instructions to self-assess your measure(s) prior to submission.



## **ATTACHMENT B: Budget Instructions – Cost Reimbursement Grants**

### **A. Match Requirements**

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

- Grantees are required to meet an overall matching rate that increases over time. You have the flexibility to meet the overall match requirements in any of the three budget areas, as long as the minimum match of 24% for the first three years, and the increasing minimums in years thereafter, are maintained. See 45 CFR §§ 2521.35–2521.90 for the specific regulations.
- If you are applying for the first time, you must match with cash or in-kind contributions at least 24% of the project’s total Operating Costs (Section I) plus Member Costs (Section II) plus Administrative Costs (Section III). If you are re-competing, please see 45 CFR §§ 2521.40-2521.95 for the match schedule.
- The acceptable sources of matching funds are federal, state, local, and/or private sector funds in accordance with applicable AmeriCorps requirements.
- In the “Source of Funds” field that appears at the end of Budget Section III, enter a brief description of the match. Identify each match source separately. Identify if the match is secured or proposed. Include dollar amount, the match classification (cash or in-kind), and the source type (Private, State/Local, or Federal) for your **entire match**. (The total amount in the Source of Funds field should match the total amount in the budget narrative exactly.) Define all acronyms the first time they are used. See *Notice* for instructions for applying for the Alternative Match Schedule.

*Note:* AmeriCorps legislation permits the use of non-AmeriCorps federal funds as match for the grantee share of the budget. Please discuss your intention of using federal funds to match an AmeriCorps grant with the other agency prior to submitting your application. Section 121(e)(5) of the National Community Service Act requires that grantees who use other federal funds as match for an AmeriCorps grant report the amount and source of these funds to AmeriCorps. If you use other federal funds as match, you must ensure you can meet the requirements and purpose of both grants. Subgrantees who use federal funds as match will be required to report the sources and amounts to Volunteer NH

### **B. Preparing Your Budget**

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



As you enter your detailed budget information, eGrants will automatically populate a budget summary and budget narrative report. Prior to submission be sure to review the budget checklist (Attachment) to ensure your budget is compliant. In addition, eGrants will perform a limited compliance check to validate the budget. If eGrants finds any compliance issues you will receive a warning and/or error messages. You must resolve all errors before you can submit your budget.

Programs must comply with all applicable federal laws, regulations, and the requirements of the Uniform Guidance. Please refer to the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR Part 200) for allowable, allocable, and reasonable cost information, as well as, audit requirements, including the need to provide audits to the Clearinghouse if expending over \$750,000 in federal funds. The OMB Uniform Guidance can be found on-line at [https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200\\_main\\_02.tpl](https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl).

## **Section I. Program Operating Costs**

Complete Section I, Program Operating Costs, of the Budget Worksheet by entering the “Total Amount,” “CNCS Share,” and “Grantee Share” for Parts A-I, for Year 1 of the grant, as follows:

### **A. Personnel Expenses**

Under “Position/Title Description,” list each staff position separately and provide salary and percentage of effort as percentage of FTE devoted to this award. Each staff person’s role listed in the budget must be described in the application narrative and each staff person mentioned in the narrative must be listed in the budget as either CNCS or Grantee share. Because the purpose of this grant is to enable and stimulate volunteer community service, do not include the value of direct community service performed by volunteers. However, you may include the value of volunteer services contributed to the organization for organizational functions such as accounting, audit work, or training of staff and AmeriCorps members.

**Per Volunteer NH policy, programs must budget one full-time position.** Applicants may only include a maximum of three staff positions in this section and all positions included must have at least 10% of their time budgeted. Host Site Supervisors (i.e. staff from outside host sites who provide their time as match to the grant) are exempted from this policy.

If an applicant wishes to request an exception to this policy, please email [Andrea@volunteernh.org](mailto:Andrea@volunteernh.org) with the request and the reasoning behind it no later than five business day BEFORE the application is due.





If budgeting **host site supervisor time** for member supervision costs, please be aware that, per VNH policy, only the time spent by the supervisor directly supervising the member can be counted in this line item (e.g. for weekly check-ins, site supervisor training, etc.). Please contact [andrea@volunteernh.org](mailto:andrea@volunteernh.org) with questions on this policy.

## **B. Personnel Fringe Benefits**

Under “Purpose/Description,” identify the types of fringe benefits to be covered and the costs of benefit(s) for each staff position. Allowable fringe benefits typically include FICA, Worker’s Compensation, Retirement, SUTA, Health and Life Insurance, IRA, and 401K. You may provide a calculation for total benefits as a percentage of the salaries to which they apply or list each benefit as a separate item. If a fringe benefit amount is over 30%, please list covered items separately and justify the high cost. Holidays, leave, and other similar vacation benefits are not included in the fringe benefit rates, but are absorbed into the personnel expenses (salary) budget line item.

### **C. 1. Staff Travel**

Describe the purpose for which program staff will travel. Provide a calculation that includes itemized costs for airfare, transportation, lodging, per diem, and other travel-related expenses multiplied by the number of trips/staff. Where applicable, identify the current standard reimbursement rate(s) of the organization for mileage, daily per diem, and similar supporting information. Reimbursement should not exceed the federal mileage rate unless a result of applicant policy and justified in the budget narrative. Only domestic travel is allowable.

Please itemize the costs. For example: One staff member will attend the annual Northeast Regional Conference.

\$50 ground transportation + (1 day) X \$400 lodging + \$35 per diem = \$485

**Programs are expected to budget travel costs for at least one appropriate staff member to attend the ASC National Service Training. Please assume airfare will be involved.**

**Programs should budget a \$0 on the line labeled “Travel to CNCS-Sponsored Meetings”. Subgrantees do not attend this conference.**

### **C. 2. Member Travel**

Describe the purpose for which members will travel. Provide a calculation that includes itemized costs for airfare, transportation, lodging, per diem, and other related expenses for members to travel outside their service location or between sites. Costs associated with local travel, such as bus passes to local sites, mileage reimbursement for use of car, etc., should be included in this budget category. Where applicable, identify the current standard reimbursement rate(s) of the



organization for mileage, daily per diem, and similar supporting information. Per AmeriCorps policy, commuting mileage cannot be reimbursed.

#### **D. Equipment**

Equipment is defined as tangible, non-expendable personal property having a useful life of more than one year AND an acquisition cost of **\$5,000 or more per unit** (including accessories, attachments, and modifications). Any items that do not meet this definition should be entered in E. Supplies below. Purchases of equipment are limited to 10% of the total CNCS funds requested. If applicable, show the unit cost and number of units you are requesting. Provide a brief justification for the purchase of the equipment under Item/Purpose.

#### **E. Supplies**

Supplies included in this section should be consumable items and materials used to support the AmeriCorps program and members that do not fit the “equipment” definition above. You must individually list any single item costing \$1,000 or more.

Supplies budgeted here are meant to support the program and/or AmeriCorps members **directly**. For example, items could include laptops or tablets for members to collect program data and submit timesheets; office supplies and printing of program and member materials, such as Member Handbooks; printed outreach materials to recruit members to the program; and member service gear\* and items.

Supplies **cannot** be used to support the programming or the beneficiaries of the service. For example, if an education program places members in a summer school, a program could not budget t-shirts for the students or the printing of the students’ schoolwork handouts. If a program placed members on a conservation crew building a trail bridge, a program could not budget the wood or the shovels to build the bridge.

*\*Note on Member Service & Other Gear:* Please note that AmeriCorps members **must** wear an AmeriCorps logo on a daily basis and wearable member gear (with the AmeriCorps logo) is a required budget expense in this section (federal or match share). If not included, the applicant must explain how they will provide the required gear outside of the budget. Grantees may add the AmeriCorps logo to their own local program uniform items using federal funds. Except for safety equipment, grantees may only charge the cost of member service gear to the federal share if it includes the AmeriCorps logo. All safety gear may be charged to the federal share, regardless of whether it includes the AmeriCorps logo. All other service gear must be purchased with non-AmeriCorps funds.

#### **F. Contractual and Consultant Services**





Include costs for consultants related to the project's operations, except training or evaluation consultants, who will be listed in Sections G. and H., below. There is not a maximum daily rate.

### **G. 1. Staff Training**

Include the costs associated with training staff on project requirements and training to enhance the skills staff need for effective project implementation, i.e., project or financial management, team building, etc. If using a consultant(s) for training, indicate the estimated daily rate. There is not a maximum daily rate.

**Programs must budget \$400 registration fee for at least one staff member to attend the ASC Regional Conference.**

### **G. 2. Member Training**

Include the costs associated with member training to support them in carrying out their service activities. You may also use this section to request funds to support training in Life after AmeriCorps. If using a consultant(s) for training, indicate the estimated daily rate. There is not a maximum daily rate.

**Programs must include \$70 registration cost per member for attendance to the Annual Governor's Conference on Volunteerism.**

### **H. Evaluation**

This is not a required cost for Formula programs. However, you may include costs for project evaluation activities, including additional staff time or subcontracts, use of evaluation consultants, purchase of instrumentation, and other costs specifically for this activity not budgeted in Section A Personnel Expenses. This cost does not include the daily/weekly gathering of data to assess progress toward meeting performance measures, but is a larger assessment of the impact your project is having on the community, as well as an assessment of the overall systems and project design. Indicate daily rates of consultants, where applicable.

### **I. Other Program Operating Costs**

Allowable costs in this budget category should include when applicable:

- **Criminal history checks:** **Programs must budget at least \$37 + the cost of the state of residence check per covered individual (staff and members) on the CNCS share of the budget.** Note in the calculation description if the budget is reduced for staff/members previously checked in a prior budget period.
- Office space rental for projects operating without an approved indirect cost rate agreement that covers office space. If space is budgeted and it is shared with other projects or activities, the costs must be equitably pro-rated and allocated between the activities or



projects. Donated space must have an independent appraisal to determine the maximum allowed value in order to be used as match. Only space to support the AmeriCorps program staff and AmeriCorps members is allowed – space for program recipients/beneficiaries is **not** an allowable cost.

- Utilities, telephone, internet, postage, copying, and similar expenses that are specifically used for AmeriCorps members and AmeriCorps project staff, and are not part of the organization's indirect cost allocation pool. If such expenses are budgeted and shared with other projects or activities, the costs must be equitably pro-rated and allocated between the activities or projects.
- Recognition costs for members. List each item and provide a justification in the budget narrative. Gifts and/or food in an entertainment/event setting are **not** allowable costs.
- Member recruitment costs are allowed and encouraged. Examples include the cost of tabling events, program outreach in print, radio, or television media, social media campaigns, etc. Recruitment/Retention incentives may be allowed with prior approval from Volunteer NH.

## **Section II. Member Costs**

Member Costs are identified as "Living Allowance" and "Member Support Costs." Your required match can be federal, state, local, or private sector funds.

### **A. Living Allowance**

The narrative should clearly identify the number of members you are supporting by category (i.e., full-time, three-quarter-time, half-time, reduced-half-time, quarter-time, minimum-time, and abbreviated-time) and the amount of living allowance they will receive, allocating appropriate portions between the AmeriCorps share (CNCS Share) and grantee share (match).

In eGrants, enter the total number of members you are requesting in each category. Enter the average amount of the living allowance for each type of member. In addition, enter the number of members for whom you are not requesting funds for a living allowance, but for whom you are requesting education awards.

### **B. Member Support Costs**

Consistent with the laws of the states where your members serve, you must provide members with the benefits described below.

1. **FICA.** Unless exempted by the IRS, all projects must pay FICA for any member receiving a living allowance, even when AmeriCorps does not supply the living allowance. If exempted, please note in the narrative. In the first column next to FICA, indicate the number of members who will receive FICA. Calculate the FICA at 7.65% of the total amount of the living allowance.



2. **Health Care.** You must offer or make available health care benefits to full-time members in accordance with AmeriCorps requirements. Except as stated below, you may not pay health care benefits to less-than-full-time members with AmeriCorps funds. You may choose to provide health care benefits to less-than-full-time members from other sources (i.e., non-federal) but the cost cannot be included in the budget. Less-than-full-time members who are serving in a full-time capacity for a sustained period of time (such as a full-time summer project) are eligible for health care benefits. If you budget health insurance for less-than-full-time members serving in a full-time capacity, indicate in the budget narrative. In your budget narrative, indicate the number of members who will receive health care benefits. AmeriCorps will not pay for dependent coverage. If health care is not budgeted for all full-time members, please confirm all full-time members will have access to coverage.
- **Worker's Compensation.** Some states require worker's compensation for AmeriCorps members. You must check with State Departments of Labor or State Commissions where members serve to determine if you are required to pay worker's compensation and if so at what level. If you are not required to pay worker's compensation, you must obtain Occupational, Accidental, Death and Dismemberment coverage for members to cover in-service injury or accidents.
- **Unemployment Insurance and Other Member Support Costs.** Include any other required member support costs here. Per the state of New Hampshire, you may not charge the cost of unemployment insurance taxes to this grant.

### Section III. Administrative/Indirect Costs

#### Definitions

Administrative costs are general or centralized expenses of the overall administration of an organization that receives AmeriCorps funds and do not include particular project costs. These costs may include administrative staff positions. For organizations that have an established indirect cost rate for federal awards, administrative costs mean those costs that are included in the organization's indirect cost rate agreement. Such costs are generally identified with the organization's overall operation and are further described in Office of Management and Budget Uniform Guidance.

Volunteer NH will elect to retain a share of the 5% of federal funds allocated to indirect costs available to programs. Volunteer NH will retain 2% from all subrecipients, computed from each month's periodic expense report (PER).

#### Options for Calculating Administrative/Indirect Costs (choose either A, B, OR C)

Applicants choose one of three methods to calculate allowable administrative costs – a CNCS-fixed percentage rate method, a federally approved indirect cost rate method, or a *de minimis*



method. Regardless of the option chosen, the CNCS share of administrative costs is limited to 5% of the total CNCS funds **actually expended** under this grant. Do not create additional lines in this category.

### **A. CNCS-Fixed Percentage Method**

#### **Five/Ten Percent Fixed Administrative Costs Option**

The CNCS-fixed percentage rate method allows you to charge administrative costs up to a cap without a federally approved indirect cost rate and without documentation supporting the allocation. If you choose the CNCS-fixed percentage rate method (Section IIIA in eGrants), you may charge, for administrative costs, a fixed 5% of the total of the CNCS funds expended. In order to charge this fixed 5%, the grantee match for administrative costs may not exceed 10% of all direct cost expenditures.

Volunteer NH will elect to retain a share of the 5% of federal funds allocated to indirect costs available to programs. Volunteer NH will retain 2% from all subrecipients, computed from each month's periodic expense report (*PER*).

1. To determine the maximum CNCS share for Section III that a program can retain use the following calculation:

$$([\text{Section I CNCS Total}] + [\text{Section II CNCS Total}] \times 0.0526) \times (0.60) = \text{Subgrantee Portion}$$

Enter this amount as the CNCS share for Section III A – Corporation Fixed Amount.

3. To determine the Grantee share for Section III: Multiply the total (both CNCS and grantee share) of Sections I and II by 10% (0.10) and enter this amount as the grantee share for Section III A – Corporation Fixed Amount.
4. To determine the amount of administrative funds to be retained by Volunteer NH use the following calculation:

$$([\text{Section I CNCS Total}] + [\text{Section II CNCS Total}] \times 0.0526) \times (0.40) = \text{Commission Portion}$$

Enter this amount as the CNCS share for Section III A – Commission Fixed Amount

### **B. Federally Approved Indirect Cost Rate**

If you have a federally approved indirect cost rate, this method must be used and the rate will constitute documentation of your administrative costs, not to exceed the 5% maximum federal share payable by AmeriCorps. Specify the Cost Type for which your organization has current



documentation on file, i.e., Provisional, Predetermined, Fixed, or Final indirect cost rate. Supply your approved IDC rate (percentage) and the base upon which this rate is calculated (direct salaries, salaries and fringe benefits, etc.). AmeriCorps does not restrict the overall indirect cost rate claimed. It is at your discretion whether or not to claim your entire IDC rate to calculate administrative costs. If you choose to claim a lower rate, please include this rate in the Rate Claimed field.

1. Determine the base amount of direct costs to which you will apply the IDC rate, including both the CNCS and Grantee shares, as prescribed by your established rate agreement (i.e., based on salaries and benefits, total direct costs, or other). Then multiply the appropriate direct costs by the rate being claimed. This will determine the total amount of indirect costs allowable under the grant.

2. To determine the CNCS share: Multiply the sum of the CNCS funding share in Sections I and II by 0.0526. This is the maximum amount you can claim as the CNCS share of indirect costs. The calculation should be noted in the text description. Please also include the following language **"Volunteer NH retains 2% of the federal funds"** in the text description. There is no separate line item to show this calculation.

3. To determine the Grantee share: Subtract the amount calculated in step 2 (the CNCS share) from the amount calculated in step 1 (the Indirect Cost total). This is the amount the applicant can claim as grantee share for administrative costs.

### **C. De Minimis Rate of 10% of Modified Total Direct Costs**

Organizations who do not currently have a federally negotiated indirect cost rate (except for those non-Federal entities described in Appendix VII to Part 200—States and Local Government and Indian Tribe Indirect Cost Proposals, paragraph (d)(1)(B)) and who receive less than \$35 million in direct federal funding, may indefinitely use a *de minimis* rate of 10% of modified total direct costs (MTDC).

Additional information regarding what is included in MTDC and use of this option can be found at 2 CFR 200.414(f) and 200.68. If this option is elected, it must be used consistently across all federal awards.

1. Determine the base amount of direct costs to which you will apply the *de minimis* rate, including both the CNCS and Grantee shares. MTDC includes all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and up to the first \$25,000 of each subaward (regardless of the period of performance of the subawards under the award). MTDC excludes equipment, capital expenditures, charges for patient care, rental costs, tuition



remission, scholarships and fellowships, participant support costs and the portion of each subaward in excess of \$25,000. Other items may only be excluded when necessary to avoid a serious inequity in the distribution of indirect costs, and with the approval of the cognizant agency for indirect costs. Once you determine the base, multiply the appropriate costs by 0.10. This will determine the total amount of costs allowable in this section.

2. To determine the CNCS share: Multiply the sum of the CNCS funding share in Sections I and II by 0.0526. This is the maximum amount you can claim as the CNCS share of indirect/administrative costs. Please also note that **Volunteer NH retains 2% of the federal funds** in the text description. There is no separate line item to show this calculation.

3. To determine the Grantee share: Subtract the amount calculated in step 2 (the CNCS share) from the amount calculated in step 1 (the total Indirect Costs allowed). This is the amount the applicant can claim as grantee share for indirect/administrative costs.

### **Source of Funds**

In the "Source of Funds" field that appears at the end of Budget Section III, enter a brief description of the match. Identify each match source separately. Identify if the match is **secured or proposed**. Include dollar amount, the match classification (cash or in-kind), and the source type (Private, State/Local, or Federal) for your **entire match**. (The total amount in the Source of Funds field should match the total amount in the budget narrative exactly.) Define all acronyms the first time they are used. The total amount of Source of Match should equal the Grantee Share amount.

**Note:** the value of the Segal Education Awards that members earn for their service is not identified in the budget. Also, the childcare reimbursements provided to eligible members is not included in the budget.





## ATTACHMENT C: Budget Instructions - Fixed Grants

**These instructions apply only to applicants for fixed amount grants, including education award programs (EAPs). Do not use if you are a Professional Corps applicant.**

EAP and Fixed Amount grant applicants may only request a fixed amount of funding per MSY. Therefore, Fixed Amount applicants are not required to complete a detailed budget or complete the grantee share column. However, you must complete the source of match chart to identify the sources of the additional revenue you need to operate the program. If you are applying for a full-cost fixed amount grant, you must pay at least the minimum living allowance listed in the Notice for each type of position you are proposing.

Please note: Volunteer NH withholds 2% in administrative funds from all grants, including fixed price grants.

### Budget Section II. AmeriCorps Member Positions

Identify the number of members you are requesting by category (i.e. full-time, three quarter-time, half-time, reduced half-time, quarter-time, minimum-time, and abbreviated-time) and list under the column labeled **#Mbrs w/o Allow** (without AmeriCorps-funded living allowance.) In the **Allowance Rate** field, enter the average amount of the living allowance for each type of member. Enter zero in the column labeled **#Mbrs w/ Allow**. **Leave all other columns blank.** See example below (applies to a Full-Cost Fixed Amount grant):

Member Positions <span style="float: right;">?</span>						
Item	# Mbrs w/ Allow	Allowance Rate	# Mbrs w/o Allow	Total Amount	CNCS Share	Grantee Share
Full Time (1700 hrs)	0	\$16,502	5	\$0	\$0	\$0
Three Quarter Time (1200 hours)	0	\$14,000	7	\$0	\$0	\$0

The total number of member service years (MSY) will **automatically calculate** at the bottom of the Member Positions chart. The MSY are calculated as follows:

<b>Member Positions</b>	<b>Calculation</b>	<b>MSY</b>
_____ Full-time (1700 hours)	(_____ members x 1.000)	= _____





_____ Three quarter-time (1200 hours)	(_____ members x 0.70000000)	_____	=
_____ Half-time (900 hours)	(_____ members x 0.500)	_____	=
_____ Reduced half-time (675 hours)	(_____ members x 0.3809524)	_____	=
_____ Quarter-time (450 hours)	(_____ members x 0.26455027)	_____	=
_____ Minimum-time (300 hours)	(_____ members x 0.21164022)	_____	=
_____ Abbreviated-time (100 hours)	(_____ members x 0.07054674)	_____	=
<b>Total MSY</b>			_____

**B. Fixed Award** Display your calculation in the following format:

Total # of MSYs \_\_\_\_\_ x MSY amount (See *Notice* for amounts) \_\_\_\_\_ = Total Grant Request \$ \_\_\_\_\_

Type the total amount requested in the “Total Amount” and “CNCS Share” columns. Leave the “Grantee Share” blank. See example below (applies to a Full-Cost Fixed Amount grant):

Purpose	Calculation	Total Amount	CNCS Share	Grantee Share		
<b>Program Grant Request</b>	47.5 MSY X \$9,500/MSY	\$451,250	\$451,250	\$0		
<b>Subtotal</b>		\$451,250	\$451,250	\$0		

In the “Source of Funds” field that appears at the end of Budget Section III, enter a brief description of the other revenue used to support the program. Identify each source separately. Identify if revenue is “**secured**” or “**proposed**”. Include the dollar amount, the revenue classification (cash or in-kind), and the source type (Private, State/Local, or Federal) for **all other revenue**. The total amount of listed in the Source of Funds should equal the amount indicated for Other Revenue in the Funding/Demographics section and in the Executive Summary.