Item	Field Name	Information
1.	Name of Federal Agency:	U.S. Department of State
2.	Catalog of Federal Domestic Assistance (CFDA) Number/Title:	Number 19.900 Title AEECA PD Programs.
3.	Date Received:	Leave this field blank. This date will be used by the Federal Agency.
4.	Funding Opportunity Number/Title:	NOFO 17-10
5.	Applicant Information:	Enter the following in accordance with agency instructions:
	a. Legal Name:	(Required) Enter the legal name of applicant that will undertake the assistance activity.
	b. Address:	Enter the complete address
	c. Web Address:	Enter the website address or uniform record locator (URL) of the applicant organization.
	d. Type of Applicant: Select Applicant Type Code(s):	(Required) Select up to three applicant type(s) in accordance with agency instructions. A. State Government B. County Government C. City or Township Government D. Special District Government E. Regional Organization F. U.S. Territory or Possession G. Independent School District H. Public/ State Controlled Institution of Higher Education I. Indian/ Native American Tribal Government (Federally Recognized) J. Indian/ Native American Tribal Government (Other than Federally Recognized) K. Indian/ Native American Tribally Designated Organization L. Public/ Indian Housing Authority M. Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education) N. Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education) O. Private Institution of Higher Education P. Individual Q. For-Profit Organization Other than Small Business) R. Small Business S. Hispanic-serving Institution T. Historically Black Colleges and Universities (HBCUs) U. Tribally Controlled Colleges and Universities (TCCUs) V. Alaska Native and Native Hawaiian Serving Institutions **W. Non-domestic (non-US) Entity** X. Other (specify)
	e. Employer/Taxpayer Identification Number (EIN/TIN):	If your organization is not in the US, enter 44-4444444.
	f. Organizational DUNS:	Enter the organization's 9 or 13 digit DUNS number **if you have one**
	g. Congressional District of Applicant:	If the applicant is outside the US, enter 00-000.

6.	Project Information:	Enter the following in accordance with agency instructions:
	a. *Project Title:	(Required) Enter a descriptive title of the project.
	b. *Project Description:	(Required) Enter a brief description of the project.
	c. Proposed Project Start and End Dates:	(Required) Enter the proposed start date and end date of the project in the format mm/dd/yyyy.
7.	Project Director:	Enter the name (First and last name required), title (Required), email, telephone number (Required) and fax number of the project director. Enter the complete address as follows: Street address (Line 1 required), City (Required), County/Parish, State (Required, if country is US), Province, Country (Required), nine-digit Zip/Postal Code (Required, if country is US).
8.	Primary Contact/ Grants Administrator:	Check if this person is also the project director and skip to Item 9. If not the same, enter the name (First and last name required), title (Required), email, telephone number and fax number of the person to contact on matters related to this application. Enter the complete address as follows: Street address (Line 1 required), City (Required), County/Parish, State (Required, if country is US), Province, Country (Required), nine-digit Zip/Postal Code (Required, if country is US). If Primary Contact/Grants Administrator is same as Authorizing Official, please complete both 8 and 9.
9.	Authorizing Official:	(Required) To be signed and dated by the applicant organization. Enter the name (First and last name required), title (Required), telephone number (Required), fax number and email address (Required) of the person authorized to sign for the applicant. A copy of the governing body's authorization for you to sign this application as the official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application). Signature of Authorized Representative completed upon submission to Grants.gov.