

Application Form (two pages) – **REQUIRED FOR APPLICATION SUBMISSION**

Your application should be submitted in this order: Application Checklist, Application Form, Application Narrative. Please read the FOA carefully and in its entirety before beginning the application process.

Contact Information

Applicant's Authorized Representative Name	Applicant's Authorized Representative Job Title
Authorized Representative's Email Address	Authorized Representative's Phone Number
Applicant's Project Manager Name	Applicant's Project Manager Job Title
Applicant's Project Manager Email Address	Applicant's Project Manager Phone Number
Applicant's Financial Contact Name	Applicant's Financial Contact Job Title
Applicant's Financial Contact Email Address	Applicant's Financial Contact Phone Number

Project Ranking (if applicable)

If you are submitting multiple applications, please provide a ranked list of those applications here in order of priority. This list should be the same in your Application Form for all submitted projects. If you are not submitting more than one application, please leave this section blank.

Rank	Project Application Name
1st	
2nd	
3rd	
4th	
5th	
6th	
7th	

Project Summary

Please provide 1-2 sentences in response to the following questions to summarize your proposed project. Please keep your responses to the space provided.

1. What the project purpose? Please describe your project.
2. What problem is this project intended to solve?
3. How will your project solve this problem?
4. Who will be involved in doing this project work?
5. What are the intended outcomes of this project over the course of doing the work and upon project completion?
6. What is the approximate start and end date of your project? Approximate number of months?

Acknowledgements

To be completed by the applicant's authorized representative: By signing and dating below I signify the following:

- I acknowledge I am an authorized representative of my organization.
- I acknowledge that I have reviewed all information included in the FOA.
- I certify that my organization is in good standing with the Internal Revenue Service.
- If applicable, I confirm my organization is authorized to apply on a tribal entity's behalf.
- If applicable, I confirm I have provided authorizing resolution in my Application.
- If our application is successful, we will negotiate with the Commission to determine the exact award amount and period of performance.
- If our application is successful, we agree to the Commission's standard Terms and Conditions, or to negotiating minor changes on a case-by-case basis.
- If our application is successful, we agree to comply with all applicable federal, state, and local regulations.

Printed name of
Authorized Representative

Signature of
Authorized Representative
(a digital signature is acceptable)

Today's Date