

ACP OUTREACH GRANT PROGRAM APPLICATION TEMPLATE INSTRUCTIONS

TEMPLATE INSTRUCTIONS

The Federal Communications Commission (FCC) has established the Affordable Connectivity Outreach Grant Program (ACP Outreach Grant Program), which provides eligible partners grant funds to conduct outreach in support of the Affordable Connectivity Program (ACP). To be considered for funding, each eligible entity is required to submit the requirements listed in the ACP Outreach Grant Program Notice of Funding Opportunity (NOFO), which includes this ACP Outreach Grant Program Application Template. This template must be used by each applicant to demonstrate the eligible entity's ability to implement proposed projects that will benefit ACP-eligible households and address the grant program purpose, goals, and objectives.

Eligible entities must submit this ACP Outreach Grant Program Application Template as part of the overall application submission through Grants.gov **no later than January 9, 2023, at 11:59 p.m. Eastern Standard Time (EST)**. Eligible entities may submit up to two (2) proposed projects: One project can be used to explain outreach activities conducted by the applicants; the second proposed project must explain outreach activities that will be implemented by a subrecipient/pass-through entity, if applicable. Applicants are encouraged to adhere to the recommended funding minimum (floor) and maximum (ceiling) funding requests amounts listed in the ACP Outreach Grant Program NOFO.

Helpful Tips When Navigating the ACP Outreach Grant Program Application Template

Naming Convention When Submitting Completed Application Template:

Applications must use the following file naming convention when submitting the required Application Template:

- Governmental and Nongovernmental Entities: <State Abbreviation>_FY23_Outreach Grant_<Applicant Name>
- Tribal Nations: FY23_Outreach Grant_<Applicant Name>

Copying & Pasting in the Application Template:

Some applicants may find it helpful to begin drafting their Application Template information in Microsoft Word (MS Word) and then pasting this into the template. However, please be aware that, when copying and pasting information from MS Word into the text boxes in the template, any formatting may not carry over.

Character Count:

The data entry fields included in this Application Template allow for the maximum number of characters noted for that section, including spaces. Once that limit has been reached, users will not be able to include any additional text.

Spell Check:

It is suggested that applicants use MS Word to ensure that the entered information is spelled correctly. To use Spell Check in MS Word (2007 or newer):

- Click on the [Review] menu
- Select [Spelling & Grammar] and all spelling issues will be displayed.

BUDGET NARRATIVE INSTRUCTIONS

All applications must have a detailed budget narrative explaining and justifying the federal and the non-federal expenditures by object class category as listed on SF-424A for Non-Construction Awards and the ACP Outreach Grant Program Application Template. For clarification and simplicity, it is best to discuss each expense by object class in the order that they appear on the SF-424A. Include detailed descriptions, breakdown of all cost justifications, and computation method (see instructions below). Additionally, provide any cost share or cost match funds in the same level of detail as the federal funds. **The budget narrative submitted with the application must match the dollar amounts on all required standard forms (e.g., SF-424, SF-424A).** Please explain each calculation and provide a narrative that supports each budget category (the SF-424 must equal total costs identified on the SF-424A form, which must match the budget narrative in this ACP Outreach Grant Program Application Template). **As a reminder, Equipment and Construction are not allowable under the ACP Outreach Grant Program.** Costs proposed to the FCC must be reasonable, allowable, allocable, and necessary to the supported activity. Please refer to FY 2023 ACP Outreach Grant Program NOFO and 2 CFR §200 for applicable administrative requirements and cost principles.

Cost Share or Match (Optional)

There is no cost share or match requirements as part of the FY 2023 ACP Outreach Grant Program. However, applicants that propose a cost match or cost share may have a priority consideration, in the event of a tie, when making funding determinations. If an applicant elects cost sharing or matching, the applicant must comply with 2 CFR 200.306.

Enter total of non-federal share (\$) in the Bonus – Priorities section, including the requested narrative.

“Cost Sharing and Matching” Narrative: Please provide description of the funding/resources whether cash or in-kind contributions, or other sources. Provide a detailed breakdown describing each line-item expense, showing matching contributions.

Personnel:

Include costs for only key personnel employed by your organization. Do not include the personnel costs of consultants, contractors and subrecipients under this category. Include salary and wages broken out by each position, name, hourly rate, number of hours, number of staff, annual salary, percentage (%) of time (Do Not Exceed 100%). Salaries for indirect or Facilities and Administrative (F&A) administrative and clerical staff are excluded. Then, enter total Personnel Costs (\$) in this line item.

“Personnel” Narrative: Please provide salary and computation methods for all staff that will be paid. Must comply 2 CFR §200.430; 45 CFR §75.430.

Fringe Benefits:

Provide each fringe benefits per employee. Do not combine the fringe benefit costs with direct salaries and wages in the personnel category. Include position name, total fringe rate (%) percentage, and fringe benefit base amount.

“Fringe Benefits” Narrative: Explain how the fringe benefit amount is calculated. Explain what is included in the benefit package. Please provide each fringe benefits per employee with the percentage and amount, provide computation method. Must comply with 2 CFR §200.431; 45 CFR §75.431.

Travel:

Enter funds required for travel costs to and from planned ACP outreach and/or in-person ACP application assistance events. Should be broken out per person, number of people traveling, purpose of travel, destination, and projected travel costs per person to include airline, mileage, gas, per diem rate for meals and lodging expenses, and other related travel incidentals for all travelers which are to be described in detail. Exclude travel costs for consultants/contractors/subrecipients and registration fees for organization staff.

“Travel” Narrative: Please list details, provide breakdown, computation method. Must comply with 2 CFR §200.474; 45 CFR §75.474.

Supplies:

Include only items that cost less than \$5,000 per unit. List by supply item, unit cost of each item, number needed, and amount.

“Supplies” Narrative: Please provide a breakdown of the supply costs and computation method. Must comply with 2 CFR § 200.2, 200.314, and 200.453; 45 CFR § 75.2, 75.321, and 75.453.

Contractual:

Include name of the Organization, Consultant, Contractor, Vendor, or Subrecipient (List type of Agreement). Include description of services, deliverables, and how selection was made. Provide breakdown of the amounts in contractual cost (broken out separately in sufficient detail). Need copy of all contracts. Provide separate budget and budget justification/narrative for each subaward. Need copy of the subaward formal written agreement that specifies the roles and responsibilities.

“Contractual” Narrative: Explain all types of contractual costs in detail. You must indicate the basis for each contract cost estimate and specify the products or services to be obtained through all contracts. Provide detailed breakdown and computation method.

Must comply with 2 CFR 200.2, 200.414, 200.430 - 200.431, 200.434, 200.436, and 200.439; 45 CFR §75.2, 75.414, 75.430-75.431, 75.434, 75.436, 75.439, 75.459.

Other – Management & Administration (M&A):

In accordance with the ACP Outreach Grant Program NOFO, Other – M&A expenditures must be capped at 5% of awarded funds.

Provide a breakdown of the other costs with cost computations. Enter the total of all other costs for the selected program not listed elsewhere in the budget. Such costs, where applicable and allowed under the ACP Outreach Grant Program NOFO. Include item, number of unit items, costs per unit.

“Other – M&A” Narrative: Should be broken down by quantity/number of units and cost per unit. Provide breakdown of other costs and computation method.

Indirect Costs:

“Indirect Costs” Narrative: Provide type of rate, rate percentage, and detailed breakdown of costs.

ACP OUTREACH GRANT PROGRAM APPLICATION TEMPLATE

I. APPLICANT INFORMATION

The Applicant Information section includes information that will be used to determine eligibility and the funding requested for outreach activities. Information provided in this section must match the SF-424 submitted in Grants.gov, where applicable.

I.A. Enter the applicant's name.

Instructions (Character Limit 100): Provide the applicant's name here. As a reminder, only eligible entities may apply.

I.B. Enter the applicant's SAM.gov Unique Entity Identifier (UEI) number.

Instructions (Character Limit 12): Provide the applicant's UEI number.

I.C. Select the applicant type.

Instructions: Select the applicant type (Options: State Government, Territory Government, Tribal Government, Local Government, Public Housing Agency, Tribally Designated Housing Entity, Social Service Provider, Educational Organization, Workforce Development Training Organization, Non-Profit Organization, Community-based Organization, Community Anchor Institution, Public Service Organization, Tribal Organization, Consortia of eligible entities, Other). If "Consortia of Eligible Entities" or "Other", please enter the eligible entity type.

I.D. State if the applicant will have a subrecipient(s) / pass-through entity. Note: If yes, the applicant must complete Section IV. Project Narrative – Subrecipient(s) / Pass-Through Entity and V. Project Management and Milestones – Subrecipient(s)/Pass-Through Entity.

Instructions (Drop-down Menu): Select the correct response from the drop-down menu (i.e., Yes/No).

1. [For Subrecipient/Pass-Through Entity Only] Provide Subrecipient(s)/pass-through entity(ies) name(s).

Instructions (Character Limit 100): Provide the subrecipient/pass-through entity's name here.

2. [For Subrecipient/Pass-Through Entity Only] Provide Subrecipient(s)/pass-through entity(ies) UEI number(s).

Instructions (Character Limit 100): Provide the subrecipient/pass-through entity's UEI number.

I.E. Identify the total amount of funding requested from each program, including the amount and percentage for management and administration (M&A) expenditures.

Instructions (Fill in Table): Complete the funding table below identifying how much funding is being requested from each program, including M&A expenditures. The applicant must be eligible for the program to receive funding. Funding requested is not guaranteed as each program is competitive. NOTE: There is a five percent maximum on M&A expenditures.

Program	Funding Request (Amount)	M&A (Amount)	M&A (Percentage)
National Competitive Outreach Program	\$	\$	%
Tribal Competitive Outreach Program	\$	\$	%
TOTAL:	\$	\$	%

I.F. Identify how the performance measures outlined in the ACP Outreach Grant Program NOFO will be achieved.

Instructions: Provide the response stating how the applicant will comply with measures listed in Section IV.B. of the ACP Outreach Grant Program NOFO in the Performance Measure table below.

Performance Measure	Intended Achievement
1. Number of outreach activities/events implemented	[Enter #]
Compliance Plan	
[Character Limit 1,500. Describe how the proposed project(s) will collect and achieve the performance measure]	
2. Number of individuals reached to increase awareness of the ACP	[Enter #]
Compliance Plan	
[Character Limit 1,500. Describe how the proposed project(s) will collect and achieve the performance measure]	
3. Number and type of in-person enrollment assistance events held	[Enter #]
Compliance Plan	
[Character Limit 1,500. Describe how the proposed project(s) will collect and achieve the performance measure]	

II. PROJECT NARRATIVE - APPLICANT

The Project Narrative section provides detailed information on the intended geographic area that will benefit from the project, the type of outreach activities that will be developed and implemented within the period of performance using methods that will provide a meaningful impact to the community. This section is intended for the primary applicant; subrecipient/pass-through entity information must be captured under Section IV. Project Narrative – Subrecipient(s) / Pass Through Entity, if applicable.

II.A. Enter Project Name.

Instructions (Character Limit 100): Provide the project name here.

II.B. State if this is a new outreach effort or a continuation of an existing outreach effort (i.e., the applicant has already received or expects to receive funding from other sources).

Instructions (Select from Drop-down Menu): Select from the drop-down menu if this is a new or continuation effort. If a continuation, answer II.B.1. If new, advance to II.C.

1. **[For Continuation Only]** If the applicant has already received, is receiving or expects to receive other support or funding for ACP outreach, explain why funding is needed from the ACP Outreach Grant Program.

Instructions (Character Limit 1,500): Provide the response here. State if the funding will be received during the period of performance

II.C. The ACP Outreach Grant Program NOFO includes an Ineligible Entities provision. Does the applicant fall under any of the ineligible entities criteria? If yes, provide an explanation of the relationship with the broadband service provider.

Instructions (Select from Drop-down Menu): Select “Yes” or “No” from the drop-down menu. Then, explain the relationship with the broadband service provider (Character Limit 750). Please note that per the ACP Outreach Grant Program NOFO, “The following entities may not receive awards, either as Grantees, Pass-through Entities, or Subrecipients under the ACP Outreach Grant Program: (i) Broadband providers (including municipal broadband providers), their affiliates, subsidiaries, contractors, agents, or representatives; and (ii) Broadband industry groups and trade associations that represent broadband providers.”

II.D. Identify the amount of funding requested from each source for this project.

Instructions (Fill in Table): Each project must identify a programmatic funding source. If a project will use multiple sources of funding, separate the amounts of funding from each source.

Funding Source	Funding Request (By Project)	M&A Request (By Project)	M&A (Percentage)
National Competitive Outreach Program	\$	\$	%
Tribal Competitive Outreach Program	\$	\$	%
TOTAL:	\$	\$	%

II.E. Describe your understanding of the ACP. State how this understanding influenced the need for this project, including the outreach or application assistance needs that will be addressed with ACP Outreach Grant funds.

Instructions (Character Limit 2,500): Provide the response here.

II.F. Provide an abstract of the proposed project and how the proposed project will increase awareness of and increase ACP enrollment for eligible households.

Instructions (Character Limit 1,500): Provide the response here. Abstracts will be publicly posted should you be selected as grant recipient.

II.G. Describe the intended impact of the proposed project on specific areas, households, or individuals to raise awareness and/or increase ACP enrollment.

Instructions (Fill in Table): Describe the intended impact of the proposed project on specific areas, households, or individuals to raise awareness and/or increase ACP enrollment.

Intended Impact Area: Geographic Areas

[Character Limit 1,500. Enter a description of the geographic areas (including qualifying Tribal lands as applicable) that will be targeted and served through the proposed outreach (including ACP application assistance)]

Intended Impact Area: Constituency Groups

[Character Limit 1,500. Enter the constituencies intended to be targeted and served, including members of an unserved or marginalized community]

Intended Impact Area: Households/Individuals

[Character Limit 1,500. Enter the estimated number of households or individuals to be targeted by the proposed project]

Intended Impact Area: Communities with Low ACP Participation Rates

[Character Limit 1,500. Select if the outreach will target communities that have low ACP participation rates]

II.H. Describe how the proposed project meets the Program Objectives.

Instructions: Describe how the proposed project addresses the ACP Outreach Grant Program Objectives listed in Section IV.B. of the ACP Outreach Grant Program NOFO.

1. Program Objective: Expand and support diverse and impactful outreach efforts nationwide.

[Character Limit 1,500. Enter how the proposed project will meet this objective]

2. Program Objective: Strengthen outreach partners nationwide by empowering them to mobilize people and organizations to help raise awareness about the ACP.

[Character Limit 1,500. Enter how the proposed project will meet this objective]

3. Program Objective: Increase ACP enrollment as a result of the ACP Outreach Grant Program funded activities.

[Character Limit 1,500. Enter how the proposed project will meet this objective]

II.I. Explain how the lessons learned from this proposed project will benefit other organizations/governments looking to achieve similar results in increasing awareness and enrollment for ACP-eligible households.

Instructions (Character Limit 1,500): Provide the response here.

III. PROJECT MANAGEMENT AND MILESTONES - APPLICANT

The Project Management and Milestones section outlines how the proposed project will be executed within the period of performance, including performance measures.

III.A. Identify each projected outcome, subsequent milestones that will be met, and estimated timeline within the period of performance.

Instructions (Fill in the Table): Describe the proposed project's projected outcomes, including key milestones that will be met and start/end dates. The applicant can enter up to 3 outcomes and up to 8 milestones, as necessary.

Projected Outcome	Milestone (By Outcome)	Projected Start Date	Projected End Date
[Sample Outcome #1]	[Milestone for #1]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #2]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #3]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #4]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #5]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #6]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #7]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #8]	MM/DD/YYYY	MM/DD/YYYY
[Sample Outcome #2]	[Milestone for #1]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #2]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #3]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #4]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #5]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #6]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #7]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #8]	MM/DD/YYYY	MM/DD/YYYY
[Sample Outcome #3]	[Milestone for #1]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #2]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #3]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #4]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #5]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #6]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #7]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #8]	MM/DD/YYYY	MM/DD/YYYY

III.B. Identify how the proposed project aligns to the allowable cost categories.

Instructions: Grant funded activities for the proposed project must align to the allowable cost categories. A project may have activities in more than one cost category. For more information on the allowable cost categories, please refer to the ACP Outreach Grant Program NOFO.

Allowable Cost Category	Proposed Funds	Budget Narrative
Personnel	\$	Explain how personnel funding will be used. This section should include compensation for personnel whose time was spent exclusively conducting ACP outreach activities and/or in-person ACP application assistance either in a part-time or full-time capacity. List Position(s), Name (if known), Number of Staff, Percentage of Time, Hourly rates and number of hours, and amount.
Event Planning	\$	
Direct Mail	\$	
Consumer Research	\$	
Paid Media Campaigns	\$	
Digital Campaigns	\$	
ACP App. Assist	\$	
Outreach Materials	\$	
Other	\$	
Fringe Benefits	\$	Explain how Fringe Benefits expenses will be used. This section should include personnel time exclusively spent on ACP outreach and/or ACP application assistance. Guidance on calculating fringe benefits is available at 2 CFR 200.431. Provide each fringe benefits per employee with the percentage rate and amount.
Event Planning	\$	
Direct Mail	\$	
Consumer Research	\$	
Paid Media Campaigns	\$	
Digital Campaigns	\$	
ACP App. Assist	\$	
Outreach Materials	\$	
Other	\$	
Travel	\$	Explain how Travel expenses will be used. This section should include planned ACP outreach and/or in-person ACP application assistance events, to include mileage, gas, and related travel incidentals. Detail travel costs for all travelers along with location. List (breakout) proposed costs for airline, mileage, gas, per diem rate for meals and lodging, etc.
Event Planning	\$	
Direct Mail	\$	
Consumer Research	\$	
Paid Media Campaigns	\$	
Digital Campaigns	\$	
ACP App. Assist	\$	
Outreach Materials	\$	
Other	\$	
Supplies	\$	Explain how Supplies expenses will be used. This section should include information technology hardware or systems such as hotspots, tablets, computers, printers, etc. that will be used exclusively for ACP outreach and ACP application assistance. This cost is capped at \$5,000 of awarded funds. List by supply item. Show unit cost of each item, number needed, and amount.
Event Planning	\$	
Direct Mail	\$	
Consumer Research	\$	
Paid Media Campaigns	\$	
Digital Campaigns	\$	
ACP App. Assist	\$	
Outreach Materials	\$	
Other	\$	
Contractual	\$	Explain how Contractual expenses will be used. This section should include Name of Contractor, Vendor, or Subrecipient. Description of Services. Provide breakdown of the consultant costs, a copy of the contract, and description of how the selection was made for the consultant. Please also include subcontractor information.
Event Planning	\$	
Direct Mail	\$	
Consumer Research	\$	
Paid Media Campaigns	\$	
Digital Campaigns	\$	
ACP App. Assist	\$	
Outreach Materials	\$	
Other	\$	
Indirect Costs	\$	Explain how Indirect Costs will be used. This section should include the type of rate, rate percentage, and detailed breakdown of costs.
Other	\$	Explain how Other expenses will be used, including Management and Administrative (M&A). This section should include Costs incurred in support of grant administration that are not included in the organization's indirect cost pool (e.g., preparing and submitting programmatic and financial reports, establishing and/or maintaining inventory, responding to official information requests such as audits, monitoring pass-through recipients). This cost is capped at 5% of awarded funds.
M&A	\$	
TOTAL:	\$	

IV. PROJECT NARRATIVE – SUBRECIPIENT/PASS-THROUGH ENTITY

The Project Narrative section provides detailed information on the intended geographic area that will benefit from the project, the type of outreach activities that will be developed and implemented within the period of performance using methods that will provide a meaningful impact to the community. This section is intended for subrecipient/pass-through entity only, if applicable.

IV.A. Enter Project Name.

Instructions (Character Limit 100): Provide the project name here.

IV.B. State if this is a new outreach effort or a continuation of an existing outreach effort (i.e., if the subrecipient/pass-through entity has already received or expects to receive funding from other sources).

Instructions (Select from Drop-down Menu): Select from the drop-down menu if this is a new or continuation effort. If a continuation, answer IV.B.1. If new, advance to IV.C.

- [For Continuation Only] If the subrecipient/pass-through entity is receiving or expects to receive other support or funding for ACP outreach, explain the funding source and why additional funding is needed from the ACP Outreach Grant Program.**

Character Limit 1,500. Provide the response here. State if the funding will be received during the period of performance.

IV.C. The ACP Outreach Grant Program NOFO includes an Ineligible Entities provision. Does the subrecipient/pass-through entity fall under any of the ineligible entities criteria? If yes, provide an explanation of the relationship with the broadband service provider.

Instructions (Select from Drop-down Menu): Select “Yes” or “No” from the drop-down menu. Then, explain the relationship with the broadband service provider (Character Limit 750). Please note that per the ACP Outreach Grant Program NOFO, “The following entities may not receive awards, either as Grantees, Pass-through Entities, or Subrecipients under the ACP Outreach Grant Program: (i) Broadband providers (including municipal broadband providers), their affiliates, subsidiaries, contractors, agents, or representatives; and (ii) Broadband industry groups and trade associations that represent broadband providers.”

IV.D. Identify the amount of funding requested from each source for this project.

Instructions (Fill in Table): Each project must identify a programmatic funding source. If a project will use multiple sources of funding, separate the amounts of funding from each source.

Funding Source	Funding Request (By Project)	M&A Request (By Project)	M&A (Percentage)
National Competitive Outreach Program	\$	\$	%
Tribal Competitive Outreach Program	\$	\$	%
TOTAL:	\$	\$	%

IV.E. Describe your understanding of the Affordable Connectivity Program. State how this understanding influenced the need for this project, including the outreach or application assistance needs that will be addressed with ACP Outreach Grant funds.

Instructions (Character Limit 2,500): Provide the response here.

IV.F. Provide an abstract of the proposed project and how the proposed project will increase awareness of and increase ACP enrollment for eligible households.

Instructions (Character Limit 1,500): Provide the response here. Abstracts will be publicly posted should you be selected as a grant recipient.

IV.G. Describe the intended impact of the proposed project on specific areas, households, or individuals to raise awareness and/or increase ACP enrollment.

Instructions (Fill in Table): Describe the intended impact of the proposed project on specific areas, households, or individuals to raise awareness and/or increase ACP enrollment.

Intended Impact Area: Geographic Areas

[Character Limit 1,500. Enter a description of the geographic areas (including qualifying Tribal lands as applicable) that will be targeted and served through the proposed outreach (including ACP application assistance)]

Intended Impact Area: Constituency Groups

[Character Limit 1,500. Enter the constituencies intended to be targeted and served, including members of an unserved or marginalized community]

Intended Impact Area: Households/Individuals

[Character Limit 1,500. Enter the estimated number of households or individuals to be targeted by the proposed project]

Intended Impact Area: Communities with Low ACP Participation Rates

[Character Limit 1,500. Select if the outreach will target communities that have low ACP participation rates]

IV.H. Describe how the proposed project meets the Program Objectives.

Instructions: Describe how the proposed project addresses the ACP Outreach Grant Program Objectives listed in Section IV.B. of the ACP Outreach Grant Program NOFO.

1. Program Objective: Expand and support diverse and impactful outreach efforts nationwide.

[Character Limit 1,500. Enter how the proposed project will meet this objective]

2. Program Objective: Strengthen outreach partners nationwide by empowering them to mobilize people and organizations to help raise awareness about the ACP.

[Character Limit 1,500. Enter how the proposed project will meet this objective]

3. Program Objective: Increase ACP enrollment as a result of the ACP Outreach Grant Program funded activities.

[Character Limit 1,500. Enter how the proposed project will meet this objective]

IV.I. Explain how the lessons learned from this proposed project will benefit other organizations/governments looking to achieve similar results in increasing awareness and enrollment for ACP-eligible households.

Instructions (Character Limit 1,500): Provide the response here.

V. PROJECT MANAGEMENT AND MILESTONES – SUBRECIPIENT/PASS-THROUGH ENTITY

The Project Management and Milestones section outlines how the proposed project will be executed within the period of performance, including performance measures. This section is intended for subrecipient/pass-through entity only, if applicable.

V.A. Identify each projected outcome, subsequent milestones that will be met, and estimated timeline within the period of performance.

Instructions (Fill in the Table): Describe the proposed project's projected outcomes, including key milestones that will be met and start/end dates. The subrecipient/pass-through entity can enter up to 3 outcomes and up to 8 milestones, as necessary.

Projected Outcome	Milestone (By Outcome)	Projected Start Date	Projected End Date
[Sample Outcome #1]	[Milestone for #1]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #2]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #3]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #4]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #5]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #6]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #7]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #8]	MM/DD/YYYY	MM/DD/YYYY
[Sample Outcome #2]	[Milestone for #1]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #2]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #3]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #4]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #5]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #6]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #7]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #8]	MM/DD/YYYY	MM/DD/YYYY
[Sample Outcome #3]	[Milestone for #1]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #2]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #3]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #4]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #5]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #6]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #7]	MM/DD/YYYY	MM/DD/YYYY
	[Milestone for #8]	MM/DD/YYYY	MM/DD/YYYY

V.B. Identify how the proposed project aligns to the allowable cost categories.

Instructions: Grant funded activities for the proposed project must align to the allowable cost categories. A project may have activities in more than one cost category. For more information on the allowable cost categories, please refer to the ACP Outreach Grant Program NOFO.

Allowable Cost Category	Proposed Funds	Budget Narrative
Personnel	\$	Explain how personnel funding will be used. This section should include compensation for personnel whose time was spent exclusively conducting ACP outreach activities and/or in-person ACP application assistance either in a part-time or full-time capacity. List Position(s), Name (if known), Number of Staff, Percentage of Time, Hourly rates and number of hours, and amount.
Event Planning	\$	
Direct Mail	\$	
Consumer Research	\$	
Paid Media Campaigns	\$	
Digital Campaigns	\$	
ACP App. Assist	\$	
Outreach Materials	\$	
Other	\$	
Fringe Benefits	\$	Explain how Fringe Benefits expenses will be used. This section should include personnel time exclusively spent on ACP outreach and/or ACP application assistance. Guidance on calculating fringe benefits is available at 2 CFR 200.431. Provide each fringe benefits per employee with the percentage rate and amount.
Event Planning	\$	
Direct Mail	\$	
Consumer Research	\$	
Paid Media Campaigns	\$	
Digital Campaigns	\$	
ACP App. Assist	\$	
Outreach Materials	\$	
Other	\$	
Travel	\$	Explain how Travel expenses will be used. This section should include planned ACP outreach and/or in-person ACP application assistance events, to include mileage, gas, and related travel incidentals. Detail travel costs for all travelers along with location. List (breakout) proposed costs for airline, mileage, gas, per diem rate for meals and lodging, etc.
Event Planning	\$	
Direct Mail	\$	
Consumer Research	\$	
Paid Media Campaigns	\$	
Digital Campaigns	\$	
ACP App. Assist	\$	
Outreach Materials	\$	
Other	\$	
Supplies	\$	Explain how Supplies expenses will be used. This section should include information technology hardware or systems such as hotspots, tablets, computers, printers, etc. that will be used exclusively for ACP outreach and ACP application assistance. This cost is capped at \$5,000 of awarded funds. List by supply item. Show unit cost of each item, number needed, and amount.
Event Planning	\$	
Direct Mail	\$	
Consumer Research	\$	
Paid Media Campaigns	\$	
Digital Campaigns	\$	
ACP App. Assist	\$	
Outreach Materials	\$	
Other	\$	
Contractual	\$	Explain how Contractual expenses will be used. This section should include Name of Contractor, Vendor, or Subrecipient. Description of Services. Provide breakdown of the consultant costs, a copy of the contract, and description of how the selection was made for the consultant. Please also include subcontractor information.
Event Planning	\$	
Direct Mail	\$	
Consumer Research	\$	
Paid Media Campaigns	\$	
Digital Campaigns	\$	
ACP App. Assist	\$	
Outreach Materials	\$	
Other	\$	
Indirect Costs	\$	Explain how Indirect Costs will be used. This section should include the type of rate, rate percentage, and detailed breakdown of costs.
Other	\$	Explain how Other expenses will be used, including Management and Administrative (M&A). This section should include Costs incurred in support of grant administration that are not included in the organization's indirect cost pool (e.g., preparing and submitting programmatic and financial reports, establishing and/or maintaining inventory, responding to official information requests such as audits, monitoring pass-through recipients). This cost is capped at 5% of awarded funds.
M&A	\$	
TOTAL:	\$	

VI. BONUS – FUNDING PRIORITIES

The Funding Priorities section provides each applicant the opportunity to self-report whether and how it meets the below prioritization and evaluation factors for the ACP Outreach Grant Program NOFO. Responses will not guarantee the applicant will be prioritized or receive requested funding.

VI.A. Select each prioritization and evaluation factor met by the applicant and/or proposed project.

Instructions (Select All That Apply): Using the drop-down, select the correct response to all that apply to the applicant and/or proposed project. Use the “Explanation” section to provide an explanation.

Priority

1. Does the proposed project target underserved low-income households or individuals that are not currently on a low-income broadband plan or that do not have broadband service?

Explanation (Character Limit 500):

2. Does the proposed project target outreach in communities that have low ACP participation rates, to include those that plan to target especially hard to reach populations (including minorities, persons with disabilities, persons who live in rural or Tribal areas, and others who are or have been historically underserved, marginalized, or adversely affected by persistent poverty or inequality)?

Explanation (Character Limit 500):

3. Does the applicant propose a cost share or cost match? Note: Cost share or cost match is not a requirement of the ACP Outreach Grant Program and this information will be used as a tie breaker during the funding determination process.

Explanation (Character Limit 500):

4. Has the state or territory entered into or committed to enter into a Computer Matching Agreement with the Universal Service Administrative Company (USAC) for purposes of verifying the eligibility of low-income consumers for the Affordable Connectivity Program? (For state, District of Columbia, and U.S. territory government entities only; this does not apply to non-governmental entities.)

Explanation (Character Limit 500):

5. Does the applicant have experience with, and/or past success in, conducting outreach regarding government programs and resources, particularly providing resources and directing services (such as ACP application assistance) and education to people of color, persons with disabilities, persons who live in rural or Tribal areas, and others who are or have been historically underserved, marginalized, or adversely affected by persistent poverty or inequality?

Explanation (Character Limit 500):

6. Does the applicant have existing, trusted relationships with the communities the grant applicant expects to target (e.g., as “trusted messengers”), or the ability to readily establish those relationships, particularly relationships with people of color, persons with disabilities, persons who live in rural or Tribal areas, and others who are or have been historically underserved, marginalized, or adversely affected by persistent poverty or inequality?

Explanation (Character Limit 500):

7. Does the applicant have experience with or capability of providing multilingual outreach, to include American Sign Language? If so, state which languages.

Explanation (Character Limit 500):

VII. ACKNOWLEDGEMENTS

The Acknowledgements Section should be completed by the applicant to confirm program requirements will be adhered to should funding be awarded.

VII.A. Confirm that the applicant acknowledges each requirement.

Instructions (Drop-down Menu): Select the correct response from the drop-down menu (i.e., Yes/No)

Acknowledgements

1. I hereby certify that all of the information provided in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation, or omission of any facts in said documents can cause denial of a grant award or termination of a grant award.

2. I understand that submission of an application does not guarantee that the applicant will receive a grant award.

3. By submitting an application, I agree to comply with the requirements of FY 2023 Affordable Connectivity Outreach Grant Program Notice of Funding Opportunity as well as the terms and conditions of its award should my organization receive an award. I also agree to comply with the requirements set forth in the ACP Grant Program Second Report and Order (FCC 22-64), to include maintaining neutrality among service providers or groups of service providers when conducting grant-funded activities.