

#### 4. Budget Information

In accordance with Form CDC 0.1246E ([www.cdc.gov/od/pgo/forms/01246.pdf](http://www.cdc.gov/od/pgo/forms/01246.pdf)), provide a line item budget and narrative justification for all requested costs that are consistent with the purpose, objectives, and proposed program activities. Within this budget, please provide the documentation requested for each cost category:

a. Line item breakdown and justification for all personnel, *i.e.*, name, position title, annual salary, percentage of time and effort, and amount requested.

b. Line item breakdown and justification for all contracts, including: (1) Name of contractor, (2) period of performance, (3) method of selection (*e.g.*, competitive or sole source), (4) description of activities, (5) target population and (6) itemized budget.

c. Requests for any new Direct Assistance Federal assignees, include:

- (1) Justification for request;
- (2) The number of assignees requested;
- (3) A description of the position and proposed duties;
- (4) The ability or inability to hire locally with financial assistance;
- (5) An organizational chart and the name of the intended supervisor;
- (6) The availability of career-enhancing training, education, and work experience opportunities for the assignee(s) and;
- (7) Assignee access to computer equipment for electronic communication with CDC.

#### G. Submission and Deadline

##### *Submission Date, Time, and Address*

Submit the signed original and two copies of CDC 0.1246. Forms are available at the following Internet address: <http://www.cdc.gov/od/pgo/forminfo.htm>.

If you do not have access to the Internet, or if you have difficulty accessing the forms on-line, you may contact the CDC Procurement and Grants Office Technical Information Management Section (PGO-TIM) at: 770-488-2700. Application forms can be mailed to you.

The application must be received by 4 p.m. Eastern time on October 6, 2003. Submit the application to:

Technical Information Management—PA 04012, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Rd, Room 3000, Atlanta, GA 30341-4146.

Applications may not be submitted electronically.

#### *CDC Acknowledgement of Application Receipt*

A postcard will be mailed by PGO-TIM, notifying you that CDC has received your application.

#### *Deadline*

Your applications will be considered as meeting the deadline if they are received before 4 p.m. Eastern Time on the deadline date. Applicants sending applications by the United States Postal Service or commercial delivery services must ensure that the carrier will be able to guarantee delivery of the application by the closing date and time. If an application is received after closing due to (1) carrier error (*i.e.*, when the carrier accepted the package with a guarantee for delivery by the closing date and time) or (2) significant weather delays or natural disasters, CDC will consider the application as having been received by the deadline upon receipt of proper documentation.

Applications that do not meet the above criteria may not be funded. Applicants will be notified of their failure to meet the submission requirements.

#### H. Evaluation Criteria

All applications will be reviewed for technical acceptability.

#### I. Other Requirements

##### *Technical Reporting Requirements*

1. Data reports of agency, financial, and HIV interventions including but not limited to HIV individual and group level; PCM; outreach; health communication/public information; counseling, testing, and referral; partner counseling and referral service; and perinatal (for eligible areas) activities are required 45 days after the end of each quarter or as specified in the most recent evaluation guidance. Project areas may request technical assistance to achieve this. Data should be submitted electronically directly to the Program Evaluation Research Branch. Following this action, please send an electronic notification of your data submission to the Grants Management Specialist listed in the "Where to Obtain Additional Information" section of this announcement.

2. This program requires progress reporting on a semi-annual basis. The first semi-annual progress report (Interim progress report) shall be due on the 15th of July each year through 2009. This report will serve as your non-competing continuation application and must contain the following elements:

a. Current Budget Period Financial Progress.

b. Base-line and target level for core and optional indicators.

c. New budget period proposed program activities.

d. Detailed Line-Item Budget and Justification.

e. Additional Requested Information.

3. The second semi-annual report, and a Financial Status Report (FSR) shall be due April 1st of each year. Specific guidance on what to include in this report will be provided at least three months before the due date. It should include the following:

a. Base-line and actual level of performance on core and optional indicators.

b. Current Budget Period Financial Progress.

c. Additional requested Information.

4. A final FSR and final progress report will be due on April 1, 2009.

5. Submit any newly developed public information resources and materials to the CDC National Prevention Information Network (formerly the AIDS Information Clearinghouse) so that they can be incorporated into the current database for access by other organizations and agencies.

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7. HIV Content Review Guidelines

a. Submit completed Assurance of Compliance with the Requirements for Contents of AIDS-Related Written Materials Form (CDC form—0.1113). This form lists the members of your program review panel. The form is enclosed with your application kit. You can also download this form from the CDC Web site: <http://www.cdc.gov/od/pgo/forminfo.htm>. Please include this completed form with your application. This form must be signed by the Project Director and authorized business official. In addition, you must certify that your program review panel represents a reasonable cross-section of the community in which the program is based.

b. You must also include documentation of approval by the relevant program review panel of any HIV educational materials that you or your grantees are currently using. Use the enclosed form, Report of Approval. If you have nothing to submit, you must complete the enclosed form "No Report Necessary." Either the "Report of Approval" or "No Report Necessary"