

IV. Application and Submission Information

How to Obtain Application Forms: To apply for this funding opportunity use application form PHS 5161-1. Forms are available on the CDC Web site, 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) staff at: 770-488-2700. Application forms can be mailed to you.

This program announcement is the definitive guide on application format, content, and deadlines. It supersedes information provided in the application instructions. If there are discrepancies between the application form instructions and the program announcement, adhere to the guidance in the program announcement.

To request a CD-ROM or hard copy of the application kit (which includes the request for application, required forms, Supplemental Information, CBA Guidelines, and other information), contact CDC's National Prevention Information Network (NPIN) at 1-800-282-7681; visit its Web site at <http://www.cdcpin.org>, or send requests by fax to 1-888-282-7681 (TTY users: 1-800-243-7012). This announcement and associated forms can also be found on the CDC home page, <http://www.cdc.gov>. Click on Funding Opportunities then Grants and Cooperative Agreements.

You are required to have a Dun and Bradstreet (DUNS) number to apply for a grant or cooperative agreement from the Federal government. The DUNS number is a nine-digit identification number, which uniquely identifies business entities. Obtaining a DUNS number is easy and there is no charge. To obtain a DUNS number, access <http://www.dunandbradstreet.com> or call 1-866-705-5711. For more information, see the CDC Web site at: <http://www.cdc.gov/od/pgo/funding/pubcommt.htm>.

If your application form does not have a DUNS number field, please write your DUNS number at the top of the first page of your application, and/or include your DUNS number in your application cover letter.

Pre-Application Technical Consultation

Technical consultation audio-conference calls for all focus areas will be held on December 16, 2003 at 2 p.m. Eastern Time. A repeat audio-conference call will be held on and

December 18, 2003 at 2 p.m. Eastern Time. Participants may call toll-free 888-655-9181. Please have the conference passcode ready: 54485.

Content and Form of Submission

Letter of Intent (LOI): CDC requires that you send a LOI if you intend to apply for this program. Your LOI will be used to gauge the level of interest in this program, and to allow CDC to plan the application review. Eligibility information is not required with the LOI. Your application should not accompany the LOI. Your LOI must be written in the following format:

- Maximum number of pages: One
- Font size: 12-point un-reduced
- Paper size: 8.5 x 11 inches
- Page margin size: One-inch
- Printed only on one side of page
- Double-spaced.
- Your LOI must contain the following information:
 - Program announcement title and number.
 - Applicant's name and address.
 - Focus area for which you intend to apply.
 - If applying for Focus Area 2, in which region(s) you intend to provide services.
 - CBA Consumers you intend to serve.

Application

You must submit a signed original and two copies of your application forms. You must include a project narrative with your application forms. Your narrative must be submitted in the following format:

Format

Your application must be submitted in the following format:

- All material must be typewritten; single-spaced.
- Maximum number of pages: 40 pages (excluding budget, appendices and attachments). If your narrative exceeds the page limit, only the first pages, which are within the page limit, will be reviewed.
- Font size: 12 point un-reduced.
- Paper size: 8.5 x 11 inches.
- Page margin size: One-inch.
- Printed only on one side of page.
- Program announcement title and number must appear in the application.
- The original and each copy of the application sent must be submitted unstapled and unbound. Held together only by rubber bands or metal clips; not bound in any other way.
- Number each page, including appendices and attachments, sequentially and provide a complete table of contents to the application and its appendices and attachments.

Please begin each separate section of the application on a new page.

- Headers and footers printed on one side only.
- Applicants may not apply for more than two focus areas.
- Applicants must submit a separate application for each focus area.
- Applicants must submit a signed original and two copies of your application forms.

Proof of Eligibility

Applicants must complete this section on Proof of Eligibility, including providing the following documents as appropriate. Failure to provide the required documentation will result in your application being disqualified and returned to you without further review.

a. Provide documentation that your organization has the specific charge from its executive board or governing body to operate nationally or regionally (*i.e.*, a multi-state/territory) within the United States and its Territories. Documentation should include a copy of the section of your organization's Articles of Incorporation, Bylaws, or Board Resolution.

b. Provide a copy of the current, valid Internal Revenue Service (IRS) determination letter of your organization's 501(c) 3 tax-exempt status.

c. Provide evidence that your organization has a three-year track record providing CBA in the focus area for which you intend to apply.

d. Provide evidence that your organization has a three-year track record providing CBA to consumers that serve the major racial/ethnic minority population(s) identified in your proposal; or providing direct HIV prevention services to a major racial/ethnic minority population identified in your proposal.

Abstract

Please provide a brief two-page summary of your proposed program activities, including the following information:

- a. A description of your CBA consumers.
- b. A description of the major racial/ethnic minority population that will be the focus for your CBA consumers.
- c. The focus area for which you intend to apply.
- d. A brief description of your strategy that includes: (1) A description of your CBA; (2) the conditions you are seeking to change; and (3) the outcomes you are seeking to achieve.
- e. If applying for Focus Area 2, indicate which region the program will serve and how it will be regionally structured.