

sponsored conferences or meetings each year. Also, for the first year of this project period, budget funds for meetings/activities related to the development of a new model for HIV prevention program planning and implementation.

(b) Describe any other planned travel or attendance at conferences or meetings not previously addressed.

## (2) Summarize Unmet Needs

### *In your application:*

Summarize any HIV prevention needs that will remain unmet even if the total application is funded. Provide an estimate of funds required to meet these needs.

## (3) Management and Staffing Plan

All recipients must have the staff and infrastructure to implement the components of a comprehensive HIV prevention program for their jurisdiction. Recipients must maintain appropriate staffing to fulfill their responsibility to support programs and services provided directly by the health department/ministry of health or through community-based organizations or efforts; provide evaluation, and quality assurance; and support a community-driven process for HIV prevention program planning and implementation that will guide the disbursement and monitoring of funds.

### *In your application:*

Describe your management and staffing plans to conduct or support the essential components of your comprehensive HIV prevention program. Please include an organizational chart that reflects the current management structure and a description of the roles, responsibilities, and relationships of all staff in the program, regardless of funding source. Identify the positions supported through this cooperative agreement and those funded through other sources, as well as any unfunded staffing needs.

## j. Budget Information

In accordance with Form CDC 0.1246, <http://www.cdc.gov/od/pgo/forminfo.htm> (<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 documentation for each cost category.

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

(2) Line item breakdown and justification for all contracts, including: (a) Name of contractor, (b) period of performance, (c) method of selection (*i.e.*, competitive or sole source), (d) description of activities, (e) target population and (f) itemized budget.

(3) Requests for any new Direct Assistance Federal assignees include:

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

(4) Use of Funds/Funding Priorities: Funds may not be used to supplant other funds available for HIV prevention. Funds may not be used to provide direct patient medical care, *e.g.*, ongoing medical management and provision of medications.

(5) Carryover Funds: Carryover funds are available only from the previous 12-month budget period. Carryover funds are not available after the end of the five-year project period.

## IV.3. Submission Dates and Times

*Application Deadline Date:* February 2, 2004.

### *Explanation of Deadlines:*

Applications must be received in the CDC Procurement and Grants Office by 4 p.m. Eastern Time on the deadline date. If you send your application by the United States Postal Service or commercial delivery service, you must ensure that the carrier will be able to guarantee delivery of the application by the closing date and time. If CDC receives your application after closing due to: (1) Carrier error, 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, you will be given the opportunity to submit documentation of the carrier's guarantee. If the documentation verifies a carrier problem, CDC will consider the application as having been received by the deadline.

This program announcement is the definitive guide on application format, content, and deadlines. It supersedes information provided in the application instructions. If your application does not meet the deadline above, it will not be eligible for review, and will be

discarded. You will be notified that you did not meet the submission requirements.

CDC will not notify you upon receipt of your application. If you have a question about the receipt of your application, first contact your courier. If you still have a question, contact the PGO-TIM staff at: 770-488-2700. Before calling, please wait two to three days after the application deadline. This will allow time for applications to be processed and logged.

## IV.4. Intergovernmental Review of Applications

Your application is subject to Intergovernmental Review of Federal Programs, as governed by Executive Order (EO) 12372. This order sets up a system for state and local governmental review of proposed federal assistance applications. You should contact your state single point of contact (SPOC) as early as possible to alert the SPOC to prospect applications, and to receive instructions on your state's process. Click on the following link to get the current SPOC list: <http://www.whitehouse.gov/omb/grants/spoc.html>

## IV.5. Funding Restrictions

Funds may not be used to supplant other funds available for HIV prevention. Funds may not be used to provide direct patient medical care, *e.g.*, ongoing medical management and provision of medications.

Funds may be used to underwrite the cost of STD treatment, as it relates to HIV prevention, only on a case-by-case basis, and only after approval by CDC.

HIV funds may be used for hepatitis testing, but not immunizations against hepatitis A or B.

Awards will not allow reimbursement of pre-award costs.

## IV.6. Other Submission Requirements

*Application Submission Address:* Submit the original and two copies of your application by mail or express delivery service to: Technical Information management—PA# 04069, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341.

Applications may not be submitted electronically at this time.

## V. Application Review Information

*V.1. Criteria:* You are required to provide measures of effectiveness that will demonstrate the accomplishment of the various identified objectives of the cooperative agreement. Measures of effectiveness must relate to the performance goals stated in the