

**Attachment A – Applicant Information**

**A. Applicant Agency**

Name:		
Address:		
City, ST Zip:		
Telephone:		Email:

**B. Type of Agency** Public Private Non-Profit Private Profit

**C. Official Authorized to Sign Application**

Name:		
Title:		
Address:		
City, ST Zip:		
Telephone:		Email:
Signature:		

**D. Project Director**

Name:		
Title:		
Address:		
City, ST Zip:		
Telephone:		Email:

**E. Financial Officer**

Name:		
Title:		
Address:		
City, ST Zip:		
Telephone:		Email:

**F. Type of Application** New Revision Continuation of Grant # \_\_\_\_\_

**G. Title of Project:**

**H. Geographic Area to be Served and Target Population**

Area:	
Population	

**I. Federal Identification Number (Fein):**

**J. DUNS Number:**

**K. Applicant's Fiscal Year:**

**L. Project Costs**

Grant Funds Requested:	\$
Local Funds/Cash Match	\$
In-Kind	\$
<b>Total Cost</b>	\$