

TRACS Grant Proposal & Project Statement Template



Note that this initial section may be most appropriately filled out by the Federal Aid Coordinator or TRACS point of entry. Consider that multiple project statements (see following sections V and VI) may be incorporated under the overall grant described in this section.

I. Grant Details:

1. Grant Proposal Title:			
2. SAP/PO (FBMS) # (if available):		3. Recipient Grant ID (optional):	
4. Grant Start Date:		5. Grant End Date:	
6. Recipient State:		7. Grant Program(s):	

8. Grant Proposal Public Description:

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II. Contact Information:

1. Federal Grant Specialist(s) - list full name, title/agency, region, email address and phone number:

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2. Grant Recipient Contact(s) - list full name, title/agency, region, email address and phone number:

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III. Single Audit Statement:

Attach the grant application (SF-424) and fill out the single audit statement below.

1. Organization Type (pick one):

- ☐ U.S. (Country-wide)
- ☐ State
- ☐ Local Government
- ☐ Federally-recognized Indian Tribe Government
- ☐ Non-Profit Organization

2. Single Audit Statement (pick one):

- ☐ Was required to submit a Single Audit report for the organization's most recently closed fiscal year and that report is available on the Federal Audit Clearinghouse Single Audit Database website. The report is filed under the EIN of: _____
- ☐ Was required to submit a Single Audit report for the organization's most recently closed fiscal year and that report is not available on the Federal Audit Clearinghouse Single Audit Database website.
- ☐ Was not required to submit a Single Audit report for the organization's most recently closed fiscal year.

3. Conflict of Interest Disclosure Statement (if applicable):

4. Indirect Cost Statement (Please select the appropriate statement):

We are:

- ☐ A U.S. State or local government entity receiving more than \$35 million in direct Federal funding each year with an indirect cost rate of _____. We submit our indirect cost rate proposals to our cognizant agency. A copy of our most recently approved rate agreement/certification is attached.
- ☐ A U.S. State or local government entity receiving less than \$35 million in direct Federal funding with an indirect cost rate of _____. We are required to prepare and retain for audit an indirect cost rate proposal and related documentation to support those costs.
- ☐ A _____ (organization type) [U.S. / States / local governments, please use one of the statements above or below] that has previously negotiated or currently has an approved indirect cost rate with our cognizant agency. Our indirect cost rate is _____. In the event an award is made, we will submit an indirect cost rate proposal to our cognizant agency within 90 calendar days after the award is made.

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- ☐ A _____ (organization type) [U.S. / States / local governments, please use one of the statements above or below] that has previously negotiated or currently has an approved indirect cost rate with our cognizant agency. Our indirect cost rate is _____. A copy of our current, approved rate agreement(s) is attached.
- ☐ A _____ (organization type) that has never submitted an indirect cost rate proposal to our cognizant agency. Our indirect cost rate is _____. In the event an award is made, we will submit an indirect cost rate proposal to our cognizant agency within 90 calendar days after the award is made.
- ☐ A _____ (organization type) that has never submitted an indirect cost rate proposal to our cognizant agency and has an indirect cost rate that is lower than 10%. Our indirect cost rate is _____. However, in the event an award is made, we will not be able to meet the requirement to submit an indirect cost rate proposal to our cognizant agency within 90 calendar days after award. We request as a condition of award to charge a flat indirect cost rate of _____ of _____ (direct cost basis) (See note in information). We understand that we must notify the Service in writing immediately if we establish an approved rate with our cognizant agency at any point during the award period.
- ☐ A _____ (organization type) that has never submitted an indirect cost rate proposal to our cognizant agency and has an indirect cost rate that is 10% or higher. Our indirect cost rate is _____. However, in the event an award is made, we will not be able to meet the requirement to submit an indirect cost rate proposal to our cognizant agency within 90 calendar days after award. We request as a condition of award to charge a flat de minimis indirect cost rate of 10% of modified total direct costs as defined in 2 CFR 200.68. We understand that we must notify the Service in writing immediately if we do establish an approved rate with our cognizant agency at any point during the award period. We understand that additional Federal funds may not be available to support an unexpected increase in indirect costs during the project period and such changes are subject to review, negotiation, and prior approval by the Service.
- ☐ A _____ (organization type) that will charge all costs directly.

IV. Project Statement Details:

Fill out the information below for each project statement (copy and paste as needed):

1. Project Statement Title:			
2. Project Statement Start Date:		3. Project Statement End Date:	

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4. Location information:

☐ Select the location for the project statement (pick one):

- ☐ Statewide
- ☐ Specific counties/congressional districts (please specify below)
- ☐ Specific facilities/areas (e.g. WMA, etc. – please specify below)
- ☐ Other (e.g. research location with coordinates, please specify below)

b. Additional Location Details (add attachments if needed):

5. Need Statement:

6. Purpose:

7. Timeline:

8. Results and Benefits Expected:

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9. Budget Narrative:

10. Equipment Narrative:

11. Useful Life:

12. Multipurpose:

- ☐ No (skip to question 13)
- ☐ Yes (explanation required below)

13. Relationship with other Grants:

- ☐ No (skip to question 13)
- ☐ Yes (explanation required below)

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14. Fill out questions 1-13 for each additional project statement (copy and paste as needed).

V. Project Statement Objectives:

Fill out the information below for each objective (copy and paste as needed) and attach to the appropriate project statement. See the Matrix and Fact Sheets on the [FA wiki link here](#) for a list of standard objectives and reporting requirements (unit of measurement, activity tags and species/habitat tags):

1. Select the Standard Objective Strategy for this objective (pick one):

- ☐ Coordination and Administration ([Fact Sheet Link](#))
- ☐ Direct Habitat and Species Management ([Fact Sheet Link](#))
- ☐ Environmental Review ([Fact Sheet Link](#))
- ☐ Facilities/Areas Construction, Renovation or Acquisition ([Fact Sheet Link](#))
- ☐ Facilities/Areas O&M ([Fact Sheet Link](#))
- ☐ Incentives ([Fact Sheet Link](#))
- ☐ Outreach and Communications ([Fact Sheet Link](#))
- ☐ Planning ([Fact Sheet Link](#))
- ☐ Real Property Acquisition ([Fact Sheet Link](#))
- ☐ Research, Survey, Data Collection and Analysis ([Fact Sheet Link](#))
- ☐ Species Stocking ([Fact Sheet Link](#))
- ☐ Stakeholder Involvement ([Fact Sheet Link](#))
- ☐ Technical Assistance ([Fact Sheet Link](#))
- ☐ Training and Education ([Fact Sheet Link](#))

2. Enter the Standard Objective description or statement (e.g. Stock 25,000 fish by 06-30-2020):

3. Does this objective relate to R3 activities (Recruitment, Retention and Reactivation)?

- ☐ Yes
- ☐ No

4. List activities (tags 1 & 2 as listed on [Matrix](#)):

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5. List Target Species and/or Habitat Types (if applicable):

6. Approach Details:

Fill out Section V and the associated questions for each additional objective (copy and paste section V again here, as many times as needed to capture each objective):