State Budget Agency – Federal Assistance Request Form Deliberative and Confidential

State Agency Information				
State Agency			Business Unit	
Agency POC	Em	ail	Phone	
Principle Investigator	Em	ail	Phone	

Federal Assistance Information				
Federal Funding Agency	CFDA			
Funding Opportunity Title				
Funding Opportunity Number	Link			
Federal Statutory Authority				

Grant Program is	New to Agency	Continuation of a previous grant	
Funding Type	Project Reimbursement	🗌 Formula	Apportionment
Funding Type	Advanced Payment	Pass-Through	

Deadlines		Project/Budget Period	
Application/Form/Report		Project Period	
Letter of Intent		Budget Period	
Governor's Signature		Year of Project	

Financial Information					
Funding Amount	Proposed Budget Period	%	Previous Budget Period	%	
Budget Period Estimate					
 Cash Match Operational Match In-Kind Match Third Party Match Total Match 					
Maintenance of Effort					
Project Period Estimate					

Staff Needed	Current FTE/Contractor	New FTE	New Contractor
Number of Staff		Staff Salary %	
Funding for Staff		Funding for Program	

Compliance			
Compliance Manager		Email	
Title		Phone	

MOU Please attach or link	
Previous Audit Findings 🗌 Please attach or link	
SEFA Report (Optional) File #, attach, or link	

Besides the Uniform Grant Guidance (UGG), are there any notable compliance requirements?

Program Information
Program & Project Synopsis
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Program Performance Measures

Policy and Planning			
How does this grant assist Governor Holcomb's 2019 Next Level Agenda?			
Next Level Agency Program Contributions			

What, if	What, if any, agencies are collaborating on this federal program?				
List state	e and federal programs administered by Indiana that are br	oadly, programma	atically similar.		
Agency	<u>Program</u>	Duplicate?	<u>Collaborates</u>		
			with this grant?		

Does your agency plan to continue this program after the	Yes	No
grant agreement ends?		
If yes, it will be funded with	State Funds	New federal grant
If yes, is this program sustainable without federal funding?	Yes	No
What is your agency's plan if it lost 10% of this funding?		

Economic Impact Analysis

Are there any federal laws/regulations or program activities that potentially conflict with any Indiana laws or policies?

Were there any findings or recommendations for this grant in the agency's previous Comprehensive Federal Assistance Review plan? If, so please attach, link, or explain below.

Cost/Benefit Analysis

Use this section to make the best case for Indiana to pursue or accept this federal assistance.

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Budget Agency Review of Federal Grant Requests

*This section is to be filled out by the State Budget Agency.

Agency:		Analyst:	
Recommendation:	Approve	Disapprove	Date:

Will any of the following factors have a negative fiscal impact, should we accept this federal award?

Increased federal award amount	Decreased federal award amount	
Increased state match req.	Continued operational match req.	
Increased MOE req.	More Sub-Recipients	
Previous reimbursement delays	Collateral costs	

What fiscal impact will these factors have, should we accept this federal grant opportunity?

If you recommended disapproval, explain why:

If you recommended approval, are there any other concerns with this federal award from the past or in the future?

SBA Federal Grant Approval Number	Date	