

Appendix 1 APPLICATION SUMMARY

AGENCY INFORMATION

1. Project Title

2. Applicant Agency

Telephone

Street Address

City

State

Zip

3. Project Director

Telephone

Street Address

City

State

Zip

4. Fiscal Agent

Telephone

Street Address

City

State

Zip

5. Employer Identification No.

6. Type of Agency (check one)

State Agency

Unit of Local Government (specify) _____ Private, Non-Profit Agency

Proprietary

Tribal Reservation

Other (specify)

7. If project will be subcontracted, fill in name and address of sub-contractor.

8. If activities are to be conducted at a site other than the Applicant Agency, indicate this in the following space. Performance Site(s):

9. NAME, TITLE AND TELEPHONE NUMBER OF OFFICIAL AUTHORIZED TO COMMIT APPLICANT ORGANIZATION TO THIS AGREEMENT

Typed Name of Official

Telephone Number

Title

Signature

Date