



Project Funding Application			
Project Information			
Title of Project:			
Priority Area (choose only one):			
<input type="checkbox"/> Coastal Resilience	<input type="checkbox"/> Education & Engagement	<input type="checkbox"/> Human Benefits of Nature	
<input type="checkbox"/> Habitat Resources	<input type="checkbox"/> Wildlife & Fisheries	<input type="checkbox"/> Integrated Planning	
<input type="checkbox"/> Water Resources	<input type="checkbox"/> Data & Monitoring	<input type="checkbox"/> Marine Debris	
Project Location:			
County			
City, State, Zip Code			
Applicant Information (see eligibility requirements)			
Organization Name:			
Organization Mailing Address (for legal notices and/or grant payments):			
Street			
City, State, Zip Code			
Tax ID Number:		UEI:	
Authorized Signatory Name and Title:			
Phone:		Email:	
Duration (period of performance):			
Estimated number of months			
Budget			
Total Amount Requested	\$		
Project Team			
Project Lead (Primary Contact at Applicant Organization):			
Position/Title:			
Phone:		Email:	
A completed W-9 must be returned with this form. <input type="checkbox"/> W-9 attached			
Certification Statement			
<p><i>I certify that my organization has the institutional, managerial, and financial capability to ensure proper completion of the project described in the attached application; has established safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain; will initiate and complete the work within the applicable time frame after receipt of an executed grant agreement; and will comply with all applicable requirements of Federal laws, executive orders, regulations and policies governing this project.</i></p>			
Certification Statement Signature:			



Project Description – Page 1 of 4

Describe your project, including any collaborating organizations, and how the requested funds will be used. Include how your project relates to our priority areas (listed on previous page).



Project Description – Page 2 of 4

Describe your project, including any collaborating organizations, and how the requested funds will be used. Include how your project relates to our priority areas (listed on previous page).



Project Description – Page 3 of 4

Describe your project, including any collaborating organizations, and how the requested funds will be used. Include how your project relates to our priority areas (listed on previous page).



Project Description – Page 4 of 4

Describe your project, including any collaborating organizations, and how the requested funds will be used. Include how your project relates to our priority areas (listed on previous page).



Project Budget	
Describe how the requested funds will be spent. Use enough detail so that reviewers will understand how you plan to spend the funds and evaluate if costs are reasonable.	
Salary	\$
Fringe	\$
Travel	\$
Supplies	\$
Equipment	\$
Contractual	\$
Other Direct Costs	\$
Indirect*	\$
TOTAL	\$

**Indirect costs must be supported with IDC rate cost letter.*

Budget Justification	
Salary	
Fringe	
Travel	
Supplies	
Equipment	
Contractual	
Other Direct Costs	
Indirect*	

Please use additional pages as required.