

'-An object named "Application for Federal Assistance SF-424" must be created.

-This object must have the following fields:

--"1. Type of Submission:" - This field will be a picklist with the options; Preapplication; Application; and Changed/Corrected Application. Only one option can be selected. This is a required field.

--"2. Type of Application:" - This field will be a picklist with the options; New; Continuation; and Revision. Only one option can be selected. This is a required field.

-----If "Revision" is selected, the applicant must also select all that apply from the options; A. Increase Award; B. Decrease Award; C. Increase Duration; D. Decrease Duration; and E. Other (specify). If E. Other (specify) is selected, the applicant must enter comments in a text box.

--"3. Date Received:" - This is a date field. It should autopopulate with the date the application is received by CNCS (submitted by the applicant).

--"4. Applicant Identifier:" - This field should auto-populate with the applicant ID.

--"5a. Federal Entity Identifier:" - This field should be a text box.

--"5b. Federal Award Identifier:" - This field should be a text box.

--"6. Date Received by State:" - This should be a date field. It should autopopulate with the date the application is received by the State Commission (submitted by the applicant). This field is only available to State Commissions.

--"7. State Application Identifier:" - This field should be a text box. It should only be available to State Commissions

Subheading - "8. Applicant Information:"

--"a. Legal Name:" - This is a text box. It is a required field.

--"b. Employer/Taxpayer Number (EIN/TIN):" - This field must accept a nine-digit entry. The number should be formatted ##-#####. This is a required field.

--"c. Organization DUNS:" - This field must accept a nine-digit or 13-digit entry. This is a required field.

Sub-subheading - "d. Address:"

--"Street 1:" - This is a text box. It is a required field.

--"Street 2:" - This is a text box. It is an optional field.

--"City:" - This is a text box. It is a required field.

--"County:" - This is a text box. It is an optional field.

--"State:" - This should be a picklist. It should use the standard list of US states.

--"Province:" - This is a text box. It is an optional field.

--"Country:" - This should be a picklist. It should use the standard list of countries.

--"Zip/Postal Code:" - This field must accept a five-digit entry and have a second field for the zip extension, a four-digit entry. The first field is a required field.

Sub-subheading - "e. Organizational Unit:"

--"Department Name:" - This is a text box. It is an optional field.

--"Division Name:" - This is a text box. It is an optional field.

Sub-subheading - "f. Name and Contact Information of Person to be COntacted on Matters Involving this Application:"

--"Prefix:" - This is a text box. It is an optional field.

--"First Name:" - This is a text box. It is a required field.

--"Middle Name:" - This is a text box. It is an optional field.

--"Last Name:" - This is a text box. It is a required field.

--"Suffix:" - This is a text box. It is an optional field.

--"Title:" - This is a text box. It is an optional field.

--"Organizational Affiliation:" - This is a text box. It is an optional field.

--"Telephone Number:" - This is a ten-digit entry. It is a required field.

--"Fax Number:" - This is a ten-digit entry. It is an optional field.

--"Email:" - This is a text box. The entry must be in email format.

Subheading - "9. Select Applicant Type:"

--"Type of Applicant 1:" - This is a picklist. This is a required field. The options are:

-----A. State Government

-----B. County Government

-----C. City or Township Government

-----D. Special District Government

- E. Regional Organization
- F. U.S. Territory or Possession
- G. Independent School
- H. Public/State Controlled Institution of Higher Education
- I. Indian/Native American Tribal Government (Federally Recognized)
- J. Indian/Native American Tribal Government (Other than Federally Recognized)
- K. Indian/Native American Tribally Designated Organization
- L. Public/Indian Housing Authority
- M. Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education)
- N. Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education)
- O. Private Institution of Higher Education
- P. Individual
- Q. For-Profit Organization (Other than Small Business)
- R. Small Business
- S. Hispanic-serving Institution
- T. Historically Black Colleges and Universities (HBCUs)
- U. Tribally Controlled Colleges and Universities (TCCUs)
- V. Alaska Native and Native Hawaiian Serving Institutions
- W. Non-domestic (non-US) Entity
- X. Other (specify)

--"Type of Applicant 2:" - This is a picklist. This is an optional field using the same picklist as Type of Applicant 1.

--"Type of Applicant 3:" - This is a picklist. This is an optional field using the same picklist as Type of Applicant 1.

END OF SUBHEADING

--"10. Name of Federal Agency:" - This is a required field. It should pre-populate with "Corporation for National and Community Service."

Subheading - "11. Catalog of Federal Domestic Assistance Number/Title:"

--"CFDA Number:" - This is an optional field. This should pre-populate based on the NOFA selected.

--"CFDA Title:" - This is an optional field. This should pre-populate based on the NOFA selected.

Subheading - "12. Funding Opportunity Number/Title:"

--"Funding Opportunity Number:" - This is a required field. This should pre-populate based on the NOFA selected.

--"Funding Opportunity Title:" - This is a required field. This should pre-populate based on the NOFA selected.

Subheading - "13. Competition Identification Number/Title:"

--"Competition Identification Number:" - This is a text box. It is an optional field.

--"Funding Opportunity Title:" - This is a text box. It is an optional field.

END OF SUBHEADING

--"14. Areas Affected by Project (Cities, Countries, States, etc.):" - This should be a text box. It is an optional field.

--"15. Descriptive Title of Applicant's Project:" - This should be a text box. It is a required field.

Subheading - "16. Congressional Districts Of:"

--"16a. Applicant" - This is a text box. It is a required field.

--"16b. Program/Project:" - This is a text box. It is a required field.

Subheading - "17. Proposed Project:"

--"17a. Start Date:" - This is a required date field. The date cannot be prior to the current date.

--"17b. End Date:" - This is a required date field. The date must be after the date entered in field 17a.

Subheading - "18. Estimated Funding (\$):"

--"a. Federal:" - This is a required field. The entry should be numbers and a maximum of a 2 decimal places. This is a dollar value. The entry can be negative.

--"b. Applicant:" - This is a required field. The entry should be numbers and a maximum of a 2 decimal places. This is a dollar value. The entry can be negative.

--"c. State:" - This is a required field. The entry should be numbers and a maximum of a 2 decimal places. This is a dollar value. The entry can be negative.

--"d. Local:" - This is a required field. The entry should be numbers and a maximum of a 2 decimal places. This is a dollar value. The entry can be negative.

--"e. Other:" - This is a required field. The entry should be numbers and a maximum of a 2 decimal places. This is a dollar value. The entry can be negative.

--"f. Program Income:" - This is a required field. The entry should be numbers and a maximum of a 2 decimal places. This is a dollar value. The entry can be negative.

--"g. TOTAL:" - This field should be a dollar value. It should sum fields a-f with two decimal places. The entry can be negative.

END OF SUBHEADING

-- "19. Is Application Subject to Review by State Under Executive Order 12372 Process?" - This is a required picklist with the following options:

-----"a. This application was made available to the State under the Executive Order 12372 Process for review on"

-----If this option is selected, the applicant is required to enter a date in a secondary field.

-----"b. Program is subject to E.O. 12372 but has not been selected by the State for review."

-----"c. Program is not covered by E.O. 12372.

--"20. Is the Applicant Delinquent on any Federal Debt?" - This is a required field. It should be a picklist with the options; "Yes" or "No."

-----If yes is selected, the applicant is required to provide an explanation in a text box.

--"21. Certification" - This should be read only populated with, "By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions."

-----The applicant must be able to check a checkbox that says "I AGREE."

Subheading - "Authorized Representative"

--"Prefix:" - This is a text box. It is an optional field.

--"First Name:" - This is a text box. It is a required field.

--"Middle Name:" - This is a text box. It is an optional field.

--"Last Name:" - This is a text box. It is a required field.

--"Suffix:" - This is a text box. It is an optional field.

--"Title:" - This is a text box. It is an optional field.

--"Telephone Number:" - This is a ten-digit entry. It is a required field.

--"Fax Number:" - This is a ten-digit entry. It is an optional field.

--"Email:" - This is a text box. The entry must be in email format.

--"Signature of Authorized Representative:" - This is a signature field. The applicant should be able to sign electronically.

--"Date Signed:" - This should be a date field. It should auto-populate with the date of the electronic signature.