Form Instructions: When copy and pasting into text fields please paste as "plain text".

Project Information *The Submission (FY) refers to the current Fiscal Year.

	Program	Mega-Region	Submission (FY)*	Additional Project ID (to be added by Mega-Region)	Report Type New Proposal (NP)
Project Number:					

Project Title:

Years of Funding Requested: _____   Final Year of Project: _____

Has this proposal been submitted to another FHP Special Project Program? **YES** ☐ **NO** ☐

If yes, please list the Program and FY the project was submitted: _____

Proposed Budget Summary (This table is auto-generated from Budget Information sections)

Year 1 EM Total	Year 2 EM Total	Year 3 EM Total	Total EM Funds	Total Funds (All)

Subject Description

Subject Common and Scientific Names: _____

Host Common and Scientific Names: _____

EM Priorities Addressed (check all that apply)

Environmental Change and Impacts – long-term effects on forests and forest pests from biotic and abiotic causes

Unusual weather events – deviations from normal patterns and related effects

FIA Integration – explore the use of FIA data to characterize forest vulnerabilities or analyze tree mortality

Tree mortality – deviations from expected levels

Invasive species – forest disturbances from insects, diseases and/or plants

Remote sensing technology – utilization of new tools and techniques to assess forest health conditions

Briefly describe the project being developed (250 characters):

Project Details

Background - Give a brief description of the Project including scientific framework and management implications (750 chars)

Methods - Give a brief description of methods including data availability (1500 chars)

Keywords (300 chars):

Products - Give a brief description of anticipated products. (750 chars)

Schedule of Activities - Listing of major events and timeline (750 chars)

Describe stakeholder involvement in this project - (e.g. How involved are managers and/or Forest Health Protection partners involved in this project?) (750 chars)

Justification

Please describe how this project addresses each of the following Evaluation Monitoring selection criteria:

a. Linkage to Forest Health Monitoring Program (How does this project build on previous FHM work or products?) (500 chars)

b. Significance/Impact of forest health issue (How does this project fit in to the Forest Health agenda?) (500 chars)

c. Scientific basis (How is this project supported by theory and practice?) (500 chars)

d. Priority issue (What is the importance for managers and the general public?) (500 chars)

e. Cost/economic efficiancy (Describe how the cost of the project is balanced by the returns.) (500 chars)

Year 1 Budget Information (For a summary of total project costs, see page 1)

Fiscal Year (FY):

Budget Type	Budget	Requested EM Funding	Non-Federal Match**	Leveraged Funds***	Match Source	Leveraged Source
ADMINISTRATION	Salary					
	Travel for Data Collection					
	Travel to Meetings*					
	Travel for Other					
PROCUREMENT	Contracting					
	Equipment					
	Supplies					
INDIRECT	Overhead					
	Other					
	SUBTOTAL					

Overhead Rate % (Describe in Notes):   Year 1 Total:

Year 1 Notes (1000 chars):

* Funds allocated for "Travel to Meetings" in year 1 will only be approved for proposals requesting a single year of funding.
** Non-Federal Matching (cost sharing) funds are raised from outside sources to increase the level of support provided by the Federal Government. This includes both cash and in-kind contributions.
*** Leveraged Funds are raised from outside sources to increase the level of support provided by the Federal Government (including cash and in-kind contributions) beyond the non-Federal matching requirements.

Year 2 Budget Information (For a summary of total project costs, see page 1)

Fiscal Year (FY): [   ]

Budget Type	Budget	Requested EM Funding	Non-Federal Match	Leveraged Funds	Match Source	Leveraged Source
ADMINISTRATION	Salary					
	Travel for Data Collection					
	Travel to Meetings					
	Travel for Other					
PROCUREMENT	Contracting					
	Equipment					
	Supplies					
INDIRECT	Overhead					
	Other					
	SUBTOTAL					

Overhead Rate %: [   ]   Year 2 Total: [   ]

Year 2 Notes (1000 chars):

[   ]

Year 3 Budget Information (For a summary of total project costs, see page 1)

Fiscal Year (FY): [   ]

Budget Type	Budget	Requested EM Funding	Non-Federal Match	Leveraged Funds	Match Source	Leveraged Source
ADMINISTRATION	Salary					
	Travel for Data Collection					
	Travel to Meetings					
	Travel for Other					
PROCUREMENT	Contracting					
	Equipment					
	Supplies					
INDIRECT	Overhead					
	Other					
	SUBTOTAL					

Overhead Rate %: [   ]   Year 3 Total: [   ]

Year 3 Notes (1000 chars):

[   ]

Project Contacts (a single Funding Coordinator must be selected)

FHP Sponsor

Name: _____   Title: _____

Institution: _____   Phone: _____

Email: _____   Time commitment: _____

Project Role: _____   Funding Coordinator:

Principal Investigators

Name: _____   Title: _____

Institution: _____   Phone: _____

Email: _____   Time commitment: _____

Project Role: _____   Funding Coordinator:

Name: _____   Title: _____

Institution: _____   Phone: _____

Email: _____   Time commitment: _____

Project Role: _____   Funding Coordinator:

Name: _____   Title: _____

Institution: _____   Phone: _____

Email: _____   Time commitment: _____

Project Role: _____   Funding Coordinator:

Cooperators

Name: _____   Title: _____

Institution: _____   Phone: _____

Email: _____   Time commitment: _____

Project Role: _____   Funding Coordinator:

Name: _____   Title: _____

Institution: _____   Phone: _____

Email: _____   Time commitment: _____

Project Role: _____   Funding Coordinator:

Name: _____   Title: _____

Institution: _____   Phone: _____

Email: _____   Time commitment: _____

Project Role: _____   Funding Coordinator:

Additional Information in Support of Proposal

List additional documents being sent in support of the project. (e.g., graphics, photos, spreadsheets, etc.) (750 chars):

Citations: (2000 chars)