



Application Management

GM 302





Agenda



- Module 1 – Course Introduction
- Module 2 – Search for Funding Opportunities
- Module 3 – Create and Submit Applications
- Module 4 – Application Review and Approval
- Module 5 – Course Summary



Module 1

Course Introduction



Course Overview



- The purpose of this course is to explain the ezFedGrants application management process.
- This course is also designed to help users understand where to find help and training materials.





Introduction Instructor and Students



In the chat, please share your:

- Location
- Organization
- Role
- Expectations





Session Recorded



- Session is being recorded and will be available for attendees after the session within the Teams chat.
- Transcripts are also provided.

Thursday 2:45 PM Meeting ended: 3h 24m 38s

ezFedGrants Agency Training
Tuesday, October 15, 2024 12:00 PM - 2:00 PM

[View recap](#)

Content

Transcript Internal I_Access-Intro.pptx +2

3 recordings



Participation



- Participation is encouraged!
- Feel free to ask questions in the **Chat** or in the **Q&A** section of Teams.
- **Raise** your hand or **React** in Teams.



Chat



Q&A



People



Raise



React



Polls



How to Get Answers to Your Questions



Login.Gov

- Login.gov password/account issues, contact the eAuth helpdesk at www.eauth.usda.gov/helpdesk.
- For Login.gov, call (844) 875-6446. Operating hours are 24 hours a day, seven days a week.
- [Login.gov FAQs](#)

ezFedGrants

- Contact the ezFedGrants Help Desk: ezFedGrants-cfo@usda.gov.
- Training Schedule [eFG Training Schedule](#)
- Recipient job aids: [Job Aid Library](#)



Bookmark or favorite these links!

Module 2

Search for Funding Opportunities



Module 1 – Search for Funding Opportunities Objectives



After completing this module, you should be able to:

- Search for a funding opportunity in ezFedGrants.





Search for Funding Opportunities Access ezFedGrants



1. Access external portal **ezFedGrants** home screen.
2. Click **Launch Applications**.
3. Select **User Type**.

The screenshot shows the ezFedGrants home screen. On the left is a navigation menu with links: 'The Office of the Chief Financial Officer (OCFO)', 'About OCFO', 'Plans and Reports', 'Federal Financial Assistance Policy', 'Travel Express', 'ezFedGrants' (highlighted with a blue bar), 'About ezFedGrants', 'eFG Training Schedule', 'FAQ and General Information', and 'Using ezFedGrants - Job Aid Library'. The main content area has a header 'ezFedGrants (eFG) Grants and Agreements System' and a description: 'ezFedGrants is the USDA solution that will let you apply for and manage USDA grants and agreements online. It's USDA's OMB Circular A-123 system of record for processing Federal financial assistance transactions. It provides significant efficiencies to all users managing grant and agreement portfolios.' Below this is a link 'Learn More about ezFedGrants'. Further down is a section 'ezFedGrants Application' with the text 'Get started with a new grant application, check a pending status, and more by logging into ezFedGrants. ezFedGrants works best with Google Chrome.' At the bottom of this section is a blue button labeled 'Launch ezFedGrants' which is highlighted with a red rectangular border. At the very bottom, there is a partially visible link 'Updates to USDA eAuthentication Login'.

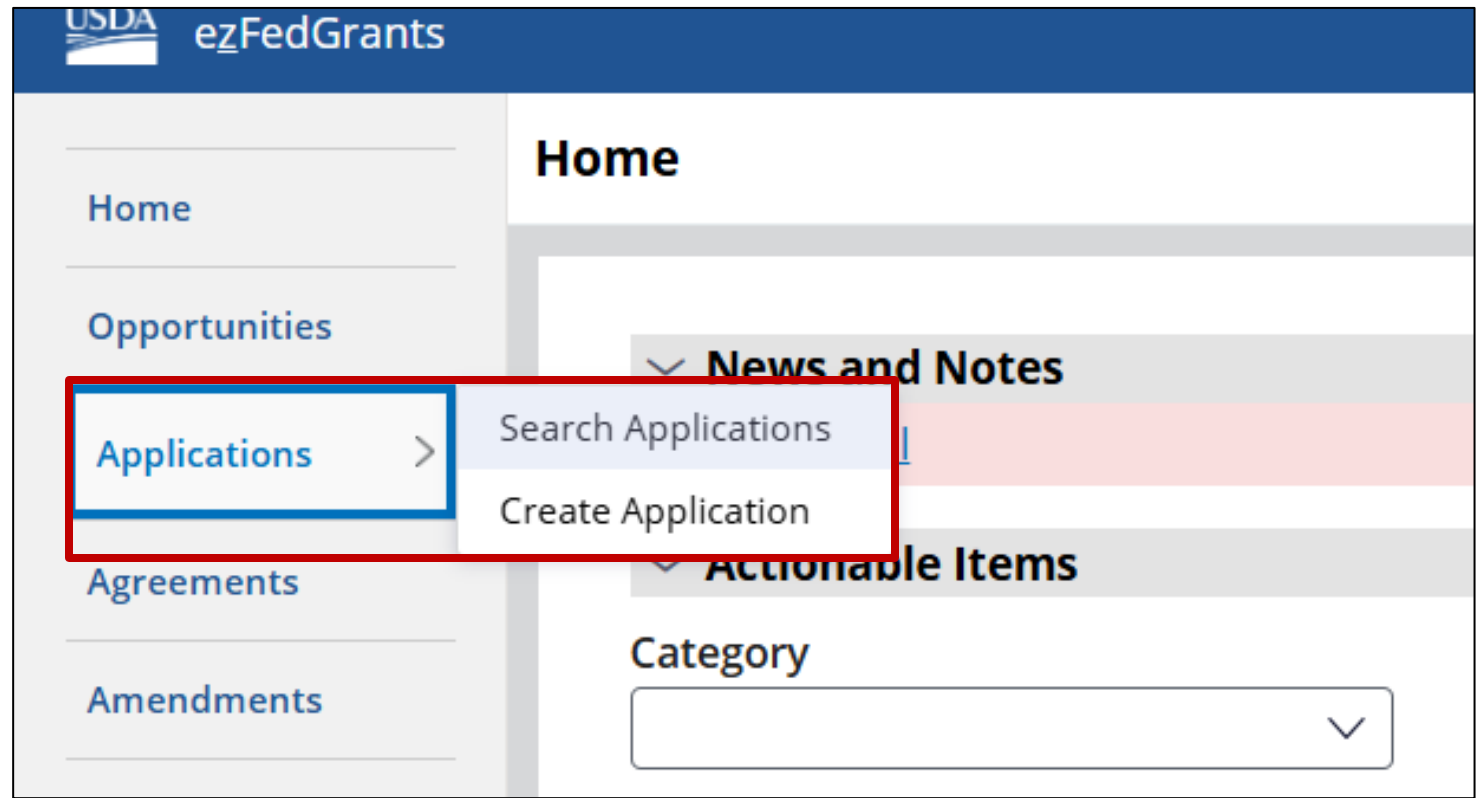
The screenshot shows the login screen. At the top is the title 'Login' with a help icon. Below it is the instruction 'Select your user type to continue'. There is a checkbox labeled 'Remember my user type'. Below this are three user type options, each with an icon and a right-pointing arrow: 'Customer' (Public citizens conducting business with USDA Agencies), 'USDA Employee/Contractor' (Federal employees and contractors working for USDA), and 'Other Federal Employee/Contractor' (Non-USDA federal agency employees and contractors).



Applications > Create Applications



1. Select **Applications**
2. Click **Create Application**.





Search Criteria



- 1. Enter search criteria into appropriate field(s).
- 2. Note the system allows for partial entry.
- 3. Click **Search** to perform the search.

Opportunities

Search Criteria

Funding Opportunity Number	CFDA Number	Funding Opportunity Title	Created by

Application Availability End Date

M/d/yyyy

-

M/d/yyyy

Search

Clear



Search Results



Funding Opportunity Number	Funding Opportunity Title	Created by	Application Availability End Date	CFDA Number
----------------------------	---------------------------	------------	-----------------------------------	-------------

- Search results appear.
- Click column headers arrows to filter or sort in ascending or descending order.
- The filtering option opens another window with a text box to search.

Opportunities

Search Criteria

Funding Opportunity Number

APHIS

CFDA Number

Funding Opportunity Title

Created by

Application Availability End Date

M/d/yyyy - M/d/yyyy

Search

Clear

Search Results

12 Results Found

Funding Opportunity Number

Funding Opportunity Title

Created by

Application Availability End Date

CFDA Number

[USDA-APHIS-10025-ACXXXXX-17-0013](#)

test

APHIS AG APHIS MO

10/26/2016

10.028

[Create Application](#)

[USDA-APHIS-10025-ACXXXXX-17-0013](#)

testapptile

APHIS AG APHIS MO

10/18/2017

10.028

[Create Application](#)

[USDA-APHIS-10960-0700-10-19-0004](#)

NO Peer on APHIS

APHIS AGMO

1/24/2020

10.960

[Create Application](#)



Module 1 – Search for Funding Opportunities Summary



You should now be able to:

- Search for ezFedGrants opportunities.



Module 3

Create and Submit Applications



Module 2 – Create and Submit Applications Objectives



After completing this module, you should be able to:

- Create an application.
- Submit an application.





Select Opportunity



1. Search for funding opportunity in the way described previously.
2. Click **Create Application** link.

Opportunities

Close

Search Criteria

Funding Opportunity Number

APHIS

CFDA Number

Funding Opportunity Title

Created by

Application Availability End Date

M/d/yyyy

-

M/d/yyyy

Search

Clear

Search Results

12 Results Found

Export

Funding Opportunity Number	Funding Opportunity Title	Created by	Application Availability End Date	CFDA Number	
USDA-APHIS-10025-ACXXXXXX-17-0013	test	APHIS AG APHIS MO	10/26/2016	10.028	Create Application
USDA-APHIS-10025-ACXXXXXX-17-0013	testapptile	APHIS AG APHIS MO	10/18/2017	10.028	Create Application
USDA-APHIS-10960-0700-10-19-0004	NO Peer on APHIS	APHIS AGMO	1/24/2020	10.960	
USDA-APHIS-10030-PPQCPHST-20-0004	Fletch ARP Test	APHIS AG APHIS MO	9/30/2019	10.030	

Create Application



App for Federal Assistance and Budget Print and Manually Enter



SF-424

View Burden Statement OMB Number: 4040-0004
Expiration Date: 12/31/2022

Application for Federal Assistance SF-424

* 1. Type of Submission: ☐ Preapplication ☐ Application ☐ Changed/Corrected Application

* 2. Type of Application: ☐ New ☐ Continuation ☐ Revision

* If Revision, select appropriate letter(s):
* Other (Specify):

* 3. Date Received: 4. Applicant Identifier:

5a. Federal Entity Identifier: 5b. Federal Award Identifier:

State Use Only:

6. Date Received by State: 7. State Application Identifier:

8. APPLICANT INFORMATION:

* a. Legal Name:

* b. Employer/Taxpayer Identification Number (EIN/TIN): * c. Organizational DUNS:

d. Address:

* Street1:
Street2:
* City:
County/Parish:
* State:
Province:
* Country: USA: UNITED STATES
* Zip / Postal Code:

e. Organizational Unit:

Department Name: Division Name:

f. Name and contact information of person to be contacted on matters involving this application:

Prefix: * First Name:
Middle Name:
* Last Name:
Suffix:

SF-424A

BUDGET INFORMATION - Non-Construction Programs OMB Approval No. 0348-0044

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		Total (g)
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	
1.		\$		\$		0.00
2.						0.00
3.						0.00
4.						0.00
5. Totals		\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1)	(2)	(3)	(4)	
a. Personnel	\$		\$		\$ 0.00
b. Fringe Benefits					0.00
c. Travel					0.00
d. Equipment					0.00
e. Supplies					0.00
f. Contractual					0.00
g. Construction					0.00
h. Other					0.00
i. Total Direct Charges (sum of 6a-6h)		0.00	0.00	0.00	0.00
j. Indirect Charges					0.00
k. TOTALS (sum of 6i and 6j)	\$	0.00	\$ 0.00	\$ 0.00	\$ 0.00

7. Program Income

	(1)	(2)	(3)	(4)	(5)
	\$		\$		\$ 0.00

Authorized for Local Reproduction

Standard Form 424A (Rev. 7-97)
Prescribed by OMB Circular A-102

Previous Edition Usable



Standard Form 424 (SF-424) and Navigation



- Application for Federal Assistance (SF-424) displays.
- Some fields from the opportunity prefill.
- Fields marked with red asterisk (*) are system required fields.
- **Transfer** application to another user within your organization to complete.
- Click tabs to move from screen to screen or click **Next**.

Create Application APP-10996

[Save](#) [Withdraw](#) [Close](#) [Transfer](#) [Next >>](#)

Comments

1. SF-424 2. SF-424A 3. Partners 4. Additional Details 5. Attachments

[Load Sample Data](#)

Application for Federal Assistance SF-424

Application Details

* 1. Type of Submission:

☐ Preapplication ☒ Application ☐ Changed/Corrected Application

* 2. Type of Application:

☒ New ☐ Continuation ☐ Revision

If Revision, select appropriate letter(s):

Select ...

3. Date Received: _____



State Boxes 6 and 7



State Use Only, Box 6 and 7:

- Does not typically apply to applicants.
- If applicable—for example, state governments—reach out to agency for process.
- If box 6 and 7 are applicable, upload this content as an attachment.

Application for Federal Assistance SF-424	
Application Details	
State Use Only	
6. Date Received by State: N/A	7. State Application Identifier: N/A



Applicant Information (Section B)



Applicant Information (Section 8), Boxes A-D

The following fields automatically populate based on the organizational affiliation or selection:

- Legal Name
- Employer Taxpayer Identification Number (EIN/TIN)
- UEI
- Address

Applicant Information			
8. Applicant Information			
a. Legal Name: RUTGERS THE STATE UNIVERSITY OF NEW JERSEY RESOURCE FOUNDATION DEPT OF AGRICULTURE		b. Employer/ Taxpayer Identification Number (EIN/TIN): N/A	c. UEI: CHANGEUE1000
d. Address			
Street 1: 34 RUTGERS PLAZA	Street 2: N/A	City: NEW BRUNSWICK	County/Parish: N/A
State: NJ	Province: N/A	Country: US	Zip/ Postal Code: 08901-8559



Applicant Information (Organizational Unit)



Box E. Organizational Unit

- Some projects are managed within a subsection (department or division) of an organization.
- Enter this information in **Department Name** and/or **Division Name**.
- Otherwise, leave these fields blank.

e. Organizational Unit	
Department Name:	Division Name:



Applicant Information Box F



- Complete the fields in **Applicant Information Box F**.
- This section is used to identify a person from the recipient organization.
- Awarding agency should contact this individual with application questions or concerns.

f. Name and contact information of person to be contacted on matters involving this application:			
Prefix:	* First Name:	Middle Name:	* Last Name:
	Ken		Ordona
Suffix:	Title:	Organizational Affiliation:	Phone:
			5093719168
Fax:	* Email:		
	Ken@USDA.gov		



Applicant Details (Section 9)



- Select one to three organization types using **Applicant Type**.
- For example, Indian Native American Tribal Government, Other than Federally Recognized.
- May have multiple designations.
- Refer to opportunity announcement or contact agency representative if unsure which designation(s) should be used.

9. Applicant Details	
Type of Applicant 1: Select Applicant Type:	Type of Applicant 2: Select Applicant Type:
Type of Applicant 3: Select Applicant Type:	
10. Federal Agency Information	
Federal Agency Name:	
Animal and Plant Health Inspection Service	
11. Catalog of Federal Domestic Assistance Information	
CFDA Number:	CFDA Title:
10.028	APHIS Main-1
12. Funding Opportunity Information	
Funding Opportunity Number:	Title:
USDA-APHIS-10025-AC000000-17-0013	test
13. Competition Identification Information	
Competition Identification Number:	Title:
N/A	N/A



Sections 10-13



These fields automatically populate from opportunity announcement:

- **Federal Agency Information (Section 10)**
- **Catalogue of Federal Domestic Assistance Information (Section 11)**
- **Funding Opportunity Information (Section 12)**
- **Competition Identification Information (Section 13)**

10. Federal Agency Information

Federal Agency Name:
Animal and Plant Health Inspection Service

11. Catalog of Federal Domestic Assistance Information

CFDA Number: 10.028	CFDA Title: APHIS Main-1
------------------------	-----------------------------

12. Funding Opportunity Information

Funding Opportunity Number: USDA-APHIS-10025-ACXXXXXX-17-0013	Title: test
--	----------------

13. Competition Identification Information

Competition Identification Number: N/A	Title: N/A
---	---------------



Areas Affected by Project (Section 14)



- Only applies to projects that impact areas outside of Place of Performance (POP).
- POP is located in **Additional Details** stage, later in procedure.
- If this applies to project, upload an attachment containing information relevant to **Section 14**.
- Attachments are covered later in this procedure.

14. Areas Affected by Project (Cities, Countries, States, etc.)

Areas Affected:

N/A

Please add any relevant attachments to the attachments screen.



Descriptive Title of Applicant's Project (Section 15)



- This is a required field that allows up to 200 characters.
- Be succinct but descriptive.
- Enter enough to clearly represent project intent.

* 15. Descriptive Title of Applicant's Project

Honey Bee Survey

184 characters until maximum length is reached

Attach supporting documents as specified in agency instructions

Please add any relevant attachments to the attachments screen.



Section 16 (Congressional Districts Information)



- These fields no longer require entry.
- Automatically determined based on information provided later in application.

16. Congressional Districts Information

a. District Of Applicant:

FL-001

b. District Of Program/Project:

FL-002

Attach an additional list of Program/Project Congressional Districts if needed

Please add any relevant attachments to the attachments screen.



Proposed Project Information (Section 17)



Enter project proposed **start and end dates**.

To enter a date, either:

- Click **Calendar** icon and select a date from calendar
- Or type a date using MM/DD/YYYY format

The end date must be a date in the future.

17. Proposed Project

* a. Start Date:

6/12/2019

Jun

2019

Sun	Mon	Tue	Wed	Thu	Fri	Sat
26	27	28	29	30	31	1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	1	2	3	4	5	6

Today

Close

* b. End Date:

6/12/2020

00.00

* b. Applicant:

\$5,000.00

00.00

* f. Program Income:

\$50,000.00



Estimated Funding Information (Section 18)



Provide estimated funding for each of the categories:

- Federal
- Applicant
- State
- Local
- Other
- Program Income

Box G (Total) automatically calculates based on entries in **Boxes A-F**.

18. Estimated Funding Information			
* a. Federal:	* b. Applicant:	* c. State:	* d. Local:
\$ 100,000.00	\$ 5,000.00	\$ 5,000.00	\$ 5,000.00
* e. Other:	* f. Program Income:		
\$ 5,000.00	\$ 50,000.00		
g. TOTAL:			
\$170,000.00			



Subject to Review by State Under Executive Order 12372?



Is Application Subject to Review by State Under Executive Order 12372 Process? (Section 19)

Select the option that applies.

If **Option A** selected, enter review completion date.

*

19. Is Application Subject to Review By State Under Executive Order 12372 Process?

☒

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

9/12/2019

☐

b) Program is subject to EO 12372 but has not been selected by the State for review

☐

c) Program is not covered by EO 12372



Is the Applicant Delinquent on Any Federal Debt? (Section 20)



No is selected by default.

If applicable to your organization:

- 1. Select **Yes**.
- 2. Provide explanation of delinquency attachment later in process.

*** 20. Is the Applicant Delinquent On Any Federal Debt? (If Yes, provide explanation in attachment)**

☐ Yes

☒ No

If "Yes", provide explanation and attach

Please add any relevant attachments to the attachments screen



SF-424 Complete



Once the SF-424 is completed, select **Next**.

Save

Withdraw

Close

Transfer

Next >>



Section A (Budget Summary)



1. In the first column, enter up to four project **Grant Program Functions or Activities**.
2. Enter total estimated amount of **Federal (Column E)** funds for each row.
3. Enter total estimated amount of **Non-Federal (Column F)** funds for each row.

Totals row automatically calculates based on column **e** and **f** entries.

Budget Information - Non-Construction Programs						
Section A - Budget Summary						
* Grant Program Function or Activity	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		Total (g)
		Federal (c)	Non-Federal (d)	* Federal (e)	* Non-Federal (f)	
Growing Vegetables	10.500	N/A	N/A	\$ 70,000.00	\$ 100,000.00	\$170,000.00
		N/A	N/A	\$	\$	\$0.00
		N/A	N/A	\$	\$	\$0.00
		N/A	N/A	\$	\$	\$0.00
Totals		---	---	\$70,000.00	\$100,000.00	\$170,000.00



Totals



- **Federal total (e)** must match federal total within section 18, estimated funding.
- **Overall total (g)** must match the total from section 18 of the SF-424, application for federal assistance.

Budget Information - Non-Construction Programs						
Section A - Budget Summary						
* Grant Program Function or Activity	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	* Federal (e)	* Non-Federal (f)	Total (g)
Growing Vegetables	10.500	N/A	N/A	\$ 70,000.00	\$ 100,000.00	\$170,000.00
		N/A	N/A	\$	\$	\$0.00
		N/A	N/A	\$	\$	\$0.00
		N/A	N/A	\$	\$	\$0.00
Totals		---	---	\$70,000.00	\$100,000.00	\$170,000.00



Estimated Amounts



- Across the top of the table, the activity/function categories from **Section A** display.
- Enter estimated amount for each applicable cost category row (**a-h**).
- Enter estimated amount for **Indirect Charges** row (**j**).
- If your organization has a NICRA, the indirect cost should generate automatically.

Section B - Budget Categories					
6. Object Class Categories	Grant Program Function or Activity				(5) Total
	(1) Growing vegetables	(2)	(3)	(4)	
a. Personnel	\$ 10,000.00	\$	\$	\$	\$10,000.00
b. Fringe Benefits	\$	\$	\$	\$	\$0.00
c. Travel	\$ 50.00	\$	\$	\$	\$50.00
d. Equipment	\$	\$	\$	\$	\$0.00
e. Supplies	\$	\$	\$	\$	\$0.00
f. Contractual	\$	\$	\$	\$	\$0.00
g. Construction	\$	\$	\$	\$	\$0.00
h. Other	\$	\$	\$	\$	\$0.00
i. Total Direct Charges (sum of 6a-6h)	\$10,050.00	\$0.00	\$0.00	\$0.00	\$10,050.00
j. Indirect Charges	\$	\$	\$	\$	\$0.00
k. Totals (sum of 6i and 6j)	\$10,050.00	\$0.00	\$0.00	\$0.00	\$10,050.00
7. Program Income	\$	\$	\$	\$	\$0.00



Section B Total Rows



The totals row (**i and k**) and column **5** automatically calculates based on entries in rows **a-h** and row **j**

Section B - Budget Categories					
6. Object Class Categories	Grant Program Function or Activity				(5) Total
	(1) Growing vegetables	(2)	(3)	(4)	
a. Personnel	\$ 10,000.00	\$	\$	\$	\$10,000.00
b. Fringe Benefits	\$	\$	\$	\$	\$0.00
c. Travel	\$ 50.00	\$	\$	\$	\$50.00
d. Equipment	\$	\$	\$	\$	\$0.00
e. Supplies	\$	\$	\$	\$	\$0.00
f. Contractual	\$	\$	\$	\$	\$0.00
g. Construction	\$	\$	\$	\$	\$0.00
h. Other	\$	\$	\$	\$	\$0.00
i. Total Direct Charges (sum of 6a-6h)	\$10,050.00	\$0.00	\$0.00	\$0.00	\$10,050.00
j. Indirect Charges	\$	\$	\$	\$	\$0.00
k. Totals (sum of 6i and 6j)	\$10,050.00	\$0.00	\$0.00	\$0.00	\$10,050.00
7. Program Income	\$	\$	\$	\$	\$0.00



Section B (Overall Total)



The overall total for **Section B** (**Column 5, Row K**) should match the overall total from the last row of **Column G** in **Section A**.

Section B - Budget Categories					
6. Object Class Categories	Grant Program Function or Activity				
	(1) Growing vegetables	(2)	(3)	(4)	(5) Total
a. Personnel	\$ 10,000.00	\$	\$	\$	\$10,000.00
b. Fringe Benefits	\$	\$	\$	\$	\$0.00
c. Travel	\$ 50.00	\$	\$	\$	\$50.00
d. Equipment	\$	\$	\$	\$	\$0.00
e. Supplies	\$	\$	\$	\$	\$0.00
f. Contractual	\$	\$	\$	\$	\$0.00
g. Construction	\$	\$	\$	\$	\$0.00
h. Other	\$	\$	\$	\$	\$0.00
i. Total Direct Charges (sum of 6a-6h)	\$10,050.00	\$0.00	\$0.00	\$0.00	\$10,050.00
j. Indirect Charges	\$	\$	\$	\$	\$0.00
k. Totals (sum of 6i and 6j)	\$10,050.00	\$0.00	\$0.00	\$0.00	\$10,050.00
7. Program Income	\$	\$	\$	\$	\$0.00



Row 7 (Program Income) of Section B



- If the project is expected to generate any income, enter the estimated income from each activity/function in **Row 7 (Program Income) of Section B**.
- Include attachment with an explanation of the nature and source of expected income.

7. Program Income					\$0.00
-------------------	--	--	--	--	--------



Section C (Non-Federal Resources)



- In the first column, activity/function categories from **Section A** display.
- For each category, enter the estimated amount of non-Federal resources contributed to the proposed project from:
 - Organization (**Column B**)
 - State government (**Column C**)
 - Other sources (**Column D**)

Section C - Non-Federal Resources				
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) Totals
8. Growing vegetables				
9. N/A				
10. N/A				
11. N/A				
12. Total (sum of lines 8 - 11)				



Non-Federal Resources



- Include an attachment explaining any in-kind contributions.
- In kind meaning donated, outside of organization/agency funds.
- If organization is a state government or state government agency, only use **Column B**. Leave **Column C** blank.

Section C - Non-Federal Resources				
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) Totals
8. Growing vegetables				
9. N/A				
10. N/A				
11. N/A				
12. Total (sum of lines 8 - 11)				



Section D (Forecasted Cash Needs)



In **Row 13 (Federal)**, estimated total amount of cash awarding **agency** needs to provide to your organization for **each quarter of the first year** of the project.

In **Row 14 (Non-Federal)**, enter the estimated total amount of cash your organization require from **non-Federal** sources for **each quarter of the first year of the project**.

The totals (**Row 15 and Column 2**) **auto-calculate** based on your entries in **Row 13** and **Row 14**.

Section D - Forecasted Cash Needs					
	Total (1st Year)	Total (Quarter 1)	Total (Quarter 2)	Total (Quarter 3)	Total (Quarter 4)
13. Federal					
14. Non-Federal					
15. Total					



Section E (Budget Estimates)



Section E (Budget Estimates of Federal Funds Needed for Balance of the Project)

- In the first column, activity/function categories from **Section A** display.
- For each category, enter columns **B-E**, first through fourth.
- For example, **(b) First** represents fiscal year one and **(c) Second** represents fiscal year two.
- Enter federal fund amounts necessary for each funding period for the entire project.

Section E - Budget Estimates Of Federal Funds Needed For Balance Of The Project				
(a) Grant Program	(b) First	(c) Second	(d) Third	(e) Fourth
16. Growing vegetables				
17. N/A				
18. N/A				
19. N/A				
20. Total (sum of lines 16-19)				



Section F (Other Budget Information)



21. Direct Charges: Enter brief explanation of individual direct cost categories as requested by agency or for unusual direct cost categories.

22. Indirect Charges: Enter the type of indirect rate (final, fixed, predetermined, or provisional), estimated base amount the rate is applied to, and total indirect expense.

23. Remarks: Enter additional brief comments, if necessary.

Lengthy explanations or details should be included as an attachment.
Type “See attachment” in **Box 21, 22,** or 23, if necessary.

Section F - Other Budget Information

21. Direct Charges

22. Indirect Charges

23. Remarks



Save and Next



Click **Save** (top right of the screen) to save information entered at any time.

Click the **Next** button on the top right of the screen, once completed.

Save

Withdraw

Close

Transfer

Next >>



Partners Section



- Required **Primary Administrative Contact** and **Primary Program Contact** fields are marked with a red asterisk (*).
- Contacts listed in these fields must be active ezFedGrants users.
- To locate user, start typing name or click magnifying glass for a complete list.

✓ 1. SF-424 ✓ 2. SF-424A **3. Partners** 4. Additional Details 5. Attachments

Partners

Select a partner by typing their name into the appropriate field. As you type, a list of matching names will appear below the field (you may need to press the down arrow on your keyboard to display the list). Click the appropriate partner's name when it appears on the list of matches. Please note that all partners must be registered in ezFedGrants.

The Signatory Official is not a required partner. If one is not defined, then USDA will send notifications and work items to all Signatory Officials associated with your organization.

☐ Self Certify ⓘ If your organization allows self-certification and you would like to self-certify, please click on the checkbox labeled Self-Certify.

* Primary Administrative Contact	TEST GAO	Q	Clear
Secondary Administrative Contact		Q	Clear
* Primary Program Contact	Test ARS	Q	Clear
Secondary Program Contact		Q	Clear



Signatory Officials



- Using the same method detailed for adding Partner contacts, you have the option to complete **Primary** and **Secondary Signatory Official** fields. Neither field is mandatory to be selected during this step.
- A Signatory Official (SO) is required to review and sign an application before it is submitted to the relevant agency for consideration.
- If you leave this blank, any active SO in your organization can complete the sign and submit step.

☐ Self Certify ⓘ If your organization allows self-certification and you would like to self-certify, please click on the checkbox labeled Self-Certify.

* Primary Administrative Contact	TEST GAO	Clear
Secondary Administrative Contact		Clear
* Primary Program Contact	Test ARS	Clear
Secondary Program Contact		Clear
Primary Authorized Representative		Clear
Secondary Authorized Representative		Clear
Primary Signatory Official		Clear
Secondary Signatory Official		Clear



Proceed to Additional Information



Click the **Next** button to proceed to the **Additional Information** stage.

Save

Withdraw

Close

Transfer

Next >>



Reporting Details Section



Required fields are marked with a red asterisk.

Reporting Details:

- Recipient Type
- Minority Business Enterprise (MBE) Indicator
- Minority Serving Institution (MSI)

✓ 1. SF-424 ✓ 2. SF-424A ✓ 3. Partners **4. Additional Details** 5. Attachments

Additional Details

Setup Details

Project Title NRCS ST Pass 4/17	Higher-Level ID ---	Program ID 12-NR9104CALI	Instrument Type Contribution Agreement
------------------------------------	------------------------	-----------------------------	---

Reporting Details

* Recipient Type P = Individual	* Minority Business Enterprise (MBE) Indicator B	* Minority Serving Institution (MSI) Asian American/Pacific Islander Serving Instit
------------------------------------	---	--

DATA Act Details

The following place of performance data elements enable USDA to implement the Digital Accountability and Transparency Act of 2014 (DATA Act), which ensures that the public can access information on entities and organizations receiving Federal funds. The section below requests the primary location of performance under the proposed Federal award. USDA reports DATA Act data to www.usaspending.gov



Data Act Details Section



Select appropriate option for **2 CFR 25.110 DUNS/CCR Exempted Entity** and **Place of Performance Code** fields.

The congressional district information is determined based on the information in this section.

Complete as many of the remaining fields as necessary, depending on the specificity of the place of performance for proposed project.

DATA Act Details

The following place of performance data elements enable USDA to implement the Digital Accountability and Transparency Act of 2014 (DATA Act), which ensures that the public can access information on entities and organizations receiving Federal funds. The section below requests the primary location of performance under the proposed Federal award. USDA reports DATA Act data to www.usaspending.gov

* 2 CFR § 25.110, DUNS/CCR Exempted Entity?

Yes

* Place of Performance Code:

Multi-State

State Sub Entity:

City

Performance Address Information

Performance Country Name

United States

Performance State Name:

* Performance County Name:

Please enter a valid value...

* Performance City Name:

Please enter a valid value...

* Performance Street Address 1:

1000 3rd avenue

Performance Street Address 2:

* Performance Zip Code:

98103



Agency Specific Details



In the **Agency Specific Details** section, questions vary based on the agency.

Answer **Yes** or **No** to any of the questions.

For example, **SPOC** (single point of contact) **Review Relevant**.

- SPOC is an intergovernmental review, when a variety of government agencies work together to review.
- The review panel may consist of individuals from various agencies and/or organizations.

Complete any fields that are required.

Agency Specific Details

Does your proposal include:

* SPOC Review Relevant?

☐ Yes ☒ No

* International?

☐ Yes ☐ No





Proceed to Attachments



Once the **Additional Details** section is completed, click **Next** to proceed to **Attachments** stage.

Save

Withdraw

Close

Transfer

Next >>

Create Application APP-12985

✓ 1. SF-424

✓ 2. SF-424A

3. Partners

4. Additional Details

5. Attachments



Attachments (Final Stage of Application)



- Common attachments are listed. Required attachments have a red asterisk by them.
- The following slides are an example. Each Agency has different requirements for their attachments.
- Click **Attachments** to initiate document upload step.

Comments

✓ 1. SF-424 ✓ 2. SF-424A ✓ 3. Partners 4. Additional Details 5. Attachments

Attachments

List of Attached Files:

Title	File	Operator	Date/Time	Delete	File Size
pdf 4	BudgetNarrative.pdf	TEST GAO	5/9/2023 1:58 PM		3,187
Detailed Project Budget / Narrative	pdf_test.pdf	Sig Off	4/2/2024 5:54 PM		33

Total Attachment Size (KB) 3,220

[Click Here to Attach Files](#)

Attachments

Upload attachments by clicking on the Attach buttons below. Forms with a red asterisk are required for submission. Additional documents may be uploaded by clicking the 'Click Here to Attach Files' link above.

* Detailed Project Budget / Narrative

Attach

* Project Narrative/Scope of Work/Operating Plan

Attach

SF-424B, Assurances – Non-Construction Programs

Attach

SF-424C, Budget Information Construction Programs

Attach



Additional Files



Select **Click Here to Attach** to upload additional mandatory attachments.

> Comments

✓ 1. SF-424 ✓ 2. SF-424A ✓ 3. Partners 4. Additional Details **5. Attachments**

Attachments

List of Attached Files:

Title	File	Operator	Date/Time	Delete	File Size
pdf 4	BudgetNarrative.pdf	TEST GAO	5/9/2023 1:58 PM		3,187
Detailed Project Budget / Narrative	pdf_test.pdf	Sig Off	4/2/2024 5:54 PM		33

Total Attachment Size (KB) 3,220

[Click Here to Attach Files](#)

- All attachments must be in PDF format by saving or printing as an Adobe PDF file.
- Individual files must be less than 10MB.
- All attachments combined must be less than 20MB.
- Password protected, encrypted, digitally signed, and fillable form documents cannot be uploaded but can be converted to Adobe PDF.



Attachment Title and Upload



1. Enter **Other Attachment Title** field.
2. Click **Choose File** to locate the file on computer.
3. Select file and click **Open**.
4. Click **OK** to upload the file.

Add Attachment

Title:
Other

* Other Attachment Title:

Please enter a valid value

Upload PDF Document From Local Hard Disk: No file chosen

PDF documents only

Please do not attach digitally signed documents.

Please do not attach fillable form documents.

Please do not attach password-encrypted documents.

For invalid pdf, digital signature, password encrypted, fillable form error messages; create a copy of the document by printing to pdf, then attach the new document.

For Word and Excel files use 'Save as Adobe PDF'.



Complete and Submit



1. Ensure the following sections are complete:

- SF-424
- Designated minimum-required partners
- Uploaded all attachments
- SF-424A
- Addressed agency-and award-specific details

2. Click the **Send to Certifier** button to send the application to the recipient Signatory Official for review.

Note: The **Send to Certifier** button is only available when viewing the Attachments stage.

[Save](#)

[Withdraw](#)

[Close](#)

[Transfer](#)

[<< Previous](#)

[Send To Certifier](#)



Confirmation Message



- If submission is successful, a confirmation message appears at the top of the screen.
- Otherwise, one or more error message displays with what must be corrected prior to application submission.
- Once submitted, notifications and work items are sent to one or more Signatory Official(s).

Application (APP-5690)

Gen

Status:
Pending Signature

Application APP-5690 has been submitted for final approval and signature to your Organization's Signatory Official.

SF-424SF-424APartnersAdditional DetailsAttachments

Load Sample Data

Application for Federal Assistance SF-424

Application Details

1. Type of Submission: Application	2. Type of Application: New	If Revision, select appropriate letter(s): N/A	3. Date Received: N/A
4. Applicant Identifier: N/A	5a. Federal Entity Identifier: N/A	5b. Federal Award Identifier: N/A	



Export Application



1. Click **Print Application Package** to print a copy of the application after submitting application to Signatory Official(s).
2. Click checkboxes to select items to include in a combined PDF for your records.

Application (APP-21113) [Print Application Package](#) [Close](#)

Status:
Pending Signature

Application APP-21113 has been submitted for final approval and signature to your Organization's Signatory Official.

[SF-424](#) [SF-424A](#) [Partners](#) [Additional Details](#) [Attachments](#)

Application for Federal Assistance SF-424

Application Details

1. Type of Submission: Application	2. Type of Application: New	If Revised: N/A
---------------------------------------	--------------------------------	--------------------

Check all documents to be included as part of the Application PDF. Please note that the documents listed below have not yet been uploaded. The list below only displays documents attached in PDF format for selection.

☐ Select All	File Name
☒	Full Application (System Generated)
☒	Detailed Project Budget / Narrative
☒	Project Narrative/Scope of Work/Operating Plan
☒	Attachment 1
☒	Certification Regarding Lobbying

[Print Application Package](#)

Full application includes all sections of the application (SF-424, SF-424A).

Partners, Additional Details, Attachment List are also included.



Module 2 – Create and Submit Applications Summary



In this module, you have learned to:

- Create an application in ezFedGrants.



Module 4

Application Review and Approval



Module 3 – Application Review and Approval Objectives



After completing this module, you should be able to:

- Submit an application for review and approval to the USDA agency as a signatory official.





Select Application for Review



1. Access **ezFedGrants External Portal Home** screen.
2. Locate the application to review in the **Actionable Items** section.
3. Select **Case ID** link to open the application work item.

Home

[Test Message](#)

Actionable Items

Category

Application

Case ID	Transaction	FAIN	Status	Due
APP-21114	Application		Draft	
APP-21110	Application		Draft	
APP-19110	Application		Draft	
APP-18113	Application		Draft	
APP-18112	Application		Draft	



Review Application Tabs



On the **Application** screen, carefully review application contents by clicking the following tabs:

- SF-424
- SF-424A
- Partners
- Additional Details
- Attachments

Application (APP-5283)

Status:

Pending Signature

Please Select An Option ▾

SF-424

SF-424A

Partners

Additional Details

Attachments

Application for Federal Assistance SF-424



Review Application Decision Options



- Click the **Please Select An option** dropdown menu to select **Sign and Submit**, **Return**, or **Withdraw**.
 - **Sign and Submit**: Application ready to be submitted to awarding agency for consideration.
 - **Return**: Application needs to be corrected and returned to creator for modification before submission to the agency. The work item moves to creator's **Actionable Items** list.
 - **Withdraw**: Application should be discarded/voided, and no further action can be taken.
- If you selected the **Return** or **Withdraw** option, enter relevant comments in the **Comments** text box.

The screenshot displays a web interface for reviewing an application. At the top, there is a blue-bordered dropdown menu labeled "Please Select An Option" with a downward arrow. Below this menu, a list of options is visible: "Sign and Submit" (highlighted with a light blue background), "Return", and "Withdraw". In the background, the text "SF-424" is visible above a horizontal blue line, and the word "Application" is partially visible below it.



Review Application Legal Notice



If **Sign and Submit** is selected, a **Legal Notice** must be reviewed and accepted before the **Complete Signature** button can be selected.

Please Select An Option ▾

Sign and Submit

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.

Acceptance of the terms described below upon clicking "Legal Notice" is also required.

Legal Notice

Upon your acceptance, click the "Complete Signature" button below to finish the process.



Review Application Terms and Conditions



1. Click **I agree with the listed Terms and Conditions** checkbox.
2. Click **OK** to close the **Legal Notice** window.

Legal Notice

If you have read and agreed to the Legal Notice, please check the I Agree checkbox located at the bottom of the screen.

1. Electronic Signature Agreement. By selecting the "Complete Signature" button, you are signing this Agreement electronically. You agree your electronic signature is the legal equivalent of your manual signature on this Agreement. By selecting "Complete Signature" you consent to be legally bound by this Agreement's terms and conditions. You further agree that your use of a key pad, mouse or other device to select an item, button, icon or similar act/action, or to otherwise provide Foreign Agricultural Service (FAS) instructions via Grantor, or in accessing or making any transaction regarding any Grantor related transactions, including, but not limited to, application (such as the SF-424), agreement, request for payment (such as the SF-270), and amendment documents constitutes your signature (hereafter referred to as "E-Signature"), acceptance and agreement as if actually signed by you in writing. You also agree that no certification authority or other third party verification is necessary to validate your E-Signature and that the lack of such certification or third party verification will not in any way affect the enforceability of your E-Signature or any resulting contract between you and FAS. You also represent that you are authorized to enter into this Agreement for all persons who own or are authorized to access any of your accounts and that such persons will be bound by the terms of this Agreement. You further agree that each use of your E-Signature in obtaining a FAS service constitutes your agreement to be bound by the terms and conditions of the FAS Disclosures and Agreements as they exist on the date of your E-Signature.

2. Consent to Electronic Delivery. You specifically agree to receive and/or obtain any and all FAS related "Electronic Communications" (defined below) via Grantor. The term "Electronic Communications" includes, but is not limited to, any and all current and future notices and/or disclosures that various federal laws require that we provide to you, as well as such other documents, statements, data, records and any other communications regarding your relationship with FAS. You acknowledge that, for your records, you are able to use Grantor to retain Electronic Communications by printing and/or downloading and saving this Agreement and any other agreements and Electronic Communications, documents, or records that you agree to using your E-Signature, including, but not limited to, application documents (such as the SF-424), agreement, request for payments (such as the SF-270), and amendment documents. You accept Electronic Communications provided via Grantor as reasonable and proper notice, for the purpose of any and all laws, rules, and regulations, except where prohibited, and agree that such electronic form fully satisfies any requirement that such communications be provided to you in writing or in a form that you may keep.

3. Paper version of Electronic Communications. You may request a paper version of an Electronic Communication. To request a paper copy of an Electronic Communication contact us at www.GrantorHelpDesk@fas.usda.gov.

4. Revocation of electronic delivery. You have the right to withdraw your consent to receive/obtain communications via Grantor at any time. You acknowledge that FAS reserves the right to restrict or terminate your access to Grantor if you withdraw your consent to receive Electronic Communications. If you wish to withdraw your consent, contact us at www.GrantorHelpDesk@fas.usda.gov.

5. USDA Level 2 e-Authentication enrollment. Your current enrollment in USDA level 2 e-Authentication is required in order for you to obtain Grantor services. FAS may notify you through email when an Electronic Communication pertaining to Grantor is available. FAS may also use Grantor and email services for Electronic Communications. It is your responsibility to use Grantor and your email service provided email account regularly to check for Electronic Communications and to check for updates to this Agreement.

6. Hardware, software and operating system. You are responsible for installation, maintenance, and operation of your computer, browser and software. FAS is not responsible for errors or failures from any malfunction of your computer, browser or software. FAS is also not responsible for computer viruses or related problems associated with use of an online system. The following are the minimum hardware, software and operating system requirements necessary to use Grantor and receive Electronic Communications:

Processor - IBM compatible Pentium PC running Windows 2000
Memory - 4MB RAM
Disc Space - 50 MB's Free Space
Monitor - 800 x 600 resolution
Browser- Microsoft Internet Explorer 6.0 or higher
Internet access - 28.8 modem or better

7. Controlling Agreement. If this E Signature is for an Amendment to an Agreement, then the resulting Amendment supplements and/or modifies the original Agreement and any previous amendments, as applicable by the terms and conditions of the amendment. To the extent that this Amendment contains conflicting provisions, the provisions in this Amendment will control. All other obligations of the parties remain subject to the terms and conditions of the original Agreement and any previous Amendments.

To obtain electronic services and communications, indicate your consent to the terms and conditions of this Agreement by clicking on the "Complete Signature" button.

☐ I agree with the listed Terms and Conditions

OK

Cancel



Review Application Digital Signature



Click **Complete Signature** to finalize decision.

[Legal Notice](#)

Upon your acceptance, click the "Complete Signature" button below to finish the process.

[Complete Signature](#)



View Applications Under Review



Approval timelines are based on the agency and schedule established within the opportunity.

- 1. Access the **Home** screen to review pending applications within the ezFedGrants External Portal.
- 2. Expand **Applications under Review** section to display applications awaiting action by Signatory Official or Agency.

Home

Opportunities

Applications >

Agreements

Amendments

Claims >

Reports

Work Item Reassignment

Work and User Reports

Manage Permissions

Contact USDA

Home

CLM-12158	Claim
APP-21001	Application
APP-21000	Application
APP-20998	Application
APP-20997	Application
RPT-3167	Financial Report
APP-20993	Application
APP-20992	Application
RPT-3448	Financial Report

> My Agreements

> Notifications

> Applications under Review

> Amendments under Review

> Claims under Review

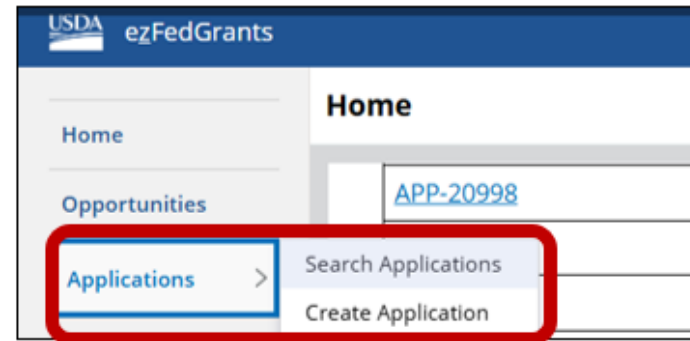


Search Application Status



Alternatively, to display the status of applications awaiting action by Signatory Official or Agency:

1. Click **Applications** tile (on the navigation panel)
2. Click **Search Applications**
3. Enter **Search Criteria**
4. Click **Search**.
5. The status displays in the search results



Search Applications

Search Criteria

Application ID: Grants.gov Tracking ID: Desc. Title Of Applicant's Project: Funding Opportunity Title:

Last Updated: Funding Opportunity Number: Created by: Status:

Search Result

26 Results Found

Application ID	Funding Opportunity Title	Funding Opportunity Number	Status	Last Updated	Created by
APP-5428	Fletch APHIS Test	USDA-APHIS-10030-PPQCPHST-20-0003	Approved	8/14/19	Test ARS
APP-5409	Fletch APHIS GG New Package Test	USDA-APHIS-10030-PPQCPHST-20-0002	Approved	8/13/19	APHIS AG APHIS MO
APP-5379	NO Peer on APHIS	USDA-APHIS-10960-0700-10-190004	Pending Signature	8/14/19	Test ARS



Application Statuses



Draft: Application incomplete and creator can edit application.

Pending Signature: Application is awaiting Signatory Official (SO) review.

Returned by Signatory Official: Signatory Official (SO) returned application for changes. The application creator can edit application.

Submitted: The application is awaiting Agency review. If application changes are needed after submission to the agency, contact the agency to request that the application be returned.

Returned by Awarding Agency: The Agency returns the application to the creator for changes.



NOTE: Returned applications must go through the same steps, including review and signature from the SO and re-submission to the agency.





Module 3 – Application Review and Approval Summary



You should now be able to:

- Review and submit an application for approval.



Module 5

Course Summary



Course Summary



You should now be able to:

- Search for funding opportunities.
- Create and submit applications.
- Review and submit an application for approval.





Getting Help



Login.Gov

- Login.gov password/account issues, contact the eAuth helpdesk at www.eauth.usda.gov/helpdesk.
- For Login.gov, call (844) 875-6446. Operating hours are 24 hours a day, seven days a week.
- [Login.gov FAQs](#)

ezFedGrants

- Contact the ezFedGrants Help Desk: ezFedGrants-cfo@usda.gov.
- Training Schedule [eFG Training Schedule](#)
- Recipient job aids: [Job Aid Library](#)



Bookmark or favorite these links!



Course Questions and Poll

