

Format for Title III Projects

ACTIVITY NARRATIVE

There should be a clear and direct relationship between the institution's **strategic** plan and the **activity** proposed for support with Title II funds.

ACTIVITY TITLES-Each activity must be titled using the most relevant title from the list of allowable activities authorized in program regulations under s608.10 of the HBCU program and s609.10 of the HBGI.

PROJECT OBJECTIVES- For each activity, applicants must describe the major objectives in outcome-oriented, measurable terms. Time frames may be used to define process-oriented objectives where appropriate. Objectives should be updated for each year in which funds are requested.

IMPLEMENTATION STRATEGY- Describe in a comprehensive manner who will do what, how and when it will be done to meet the objectives of each activity. The implementation strategy/time table form should be used for this purpose.

INDIVIDUAL ACTIVITY NARRATIVE

1. Name of Institution

2. Activity Title

3. Activity Number

4. Provide Narrative

ACTIVITY OBJECTIVES AND ANTICIPATED RESULTS

1. Name of Applicant Institution:

2. Activity Title:

3. Major Objectives in Measurable Terms:

4. Anticipated Results to Measure Success:

IMPLEMENTATION STRATEGY/TIMETABLE FORM

1. Name of Applicant Institution:		2. Activity Title:		
3. Specific tasks: to be completed	4. Primary Participants	5. Methodologies Involved:	6. Tangible Results	7. Timeframe From To

Title III BUDGET FORMS

INDIVIDUAL ACTIVITY BUDGET

GENERAL INSTRUCTIONS. Prepare a separate activity budget form for **each** activity and for project administration. The activity budget narrative should **immediately follow** the budget for each activity.

Name of Applicant Institution

Enter the name of the institution submitting the application.

Activity Title

Applicants should use the generic titles listed in S608.10 (HBCU program) and S609.10 (HBGI program) as titles for each activity. Enter the title of the activity as it appears in the narrative.

Activity Number

Indicate the activity number for each activity in the application.

Personnel

Enter the title of each position for which funds are requested. Indicate the percent of time that each person will commit to the project. Provide resumes for all key personnel as well as position or job descriptions for all persons paid with Title III funds. If the space allowed is not adequate, append as many additional activity budget sheets as necessary to list all personnel **before** completing items 2 through 9.

Fringe Benefits

Indicate the percentage rate at which benefits are calculated and the total cost for fringe benefits. List the categories of costs used to calculate fringe benefits. If fringe benefits are calculated differently for different personnel in the activity (e.g. faculty vs. administrative staff), provide a detailed explanation in the budget narrative. **DO NOT** include fees and expenses for consultants or for personnel who are not entitled to fringe benefits.

Travel

Grant funds may be used only for travel that is related to achieving the objectives of a specific activity during the budget period. Provide an itemized breakdown and enter the total costs of all travel, including destinations, per diem rates, and transportation costs in the budget narrative. **International travel is allowed as it is related to achieving the objectives of a specific activity, however please note approval is granted on a case by case basis.**

DO NOT include freight costs or travel expenses of consultants. Freight costs, consultant costs and travel should be listed in “other “ category.

Equipment

The amount per unit cost for equipment is \$5,000. Enter the costs for all nonexpendable personal property, both fixed and movable, necessary for achieving the objectives of the activity. Equipment means tangible nonexpendable personal property including exempt property changed directly to the award having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit. Itemized costs should be provided in the budget narrative.

Supplies

Enter the costs of all tangible personal property except that covered under “Equipment” Personal property means property of any kind except real property-land and buildings. Itemized costs should be provided in the budget narrative.

Contractual

Includes the estimated costs of contractual agreements with other organizations or businesses. If aggregate expenditures exceed \$5,000 you must explain the criteria to be used in selecting a contractor, the basis for arriving at the projected cost, and whether competitive bids will be sought or will some other procurement policies be used to provide for open and free competition.

Other

Include all direct costs not clearly covered by sub-items 1 through 8. Examples of such costs are communications, freight costs (if not included by vendor in the equipment purchase package), equipment rental, computer use charges, registration fees, and consultant costs. Use of consultants should be justified and the fees paid to consultants should be based upon fees paid to consultants in the areas for identical or similar services. Provide an itemized breakdown of costs on the budget narrative.

Total Direct Costs

The Total Direct Costs is the figure for the twelve-month budget period for each activity.

Individual Activity Budget

GRANT APPLICATION FOR THE TITLE III, PART B PROGRAMS			ACTIVITY NUMBER		ACTIVITY BUDGET FORM				FORM APPROVED OMB No. 1840-0113 Exp. Date: 02/28/07		
1. Name of Applicant Institution: Winston-Salem State University			2. Activity Title:								
Budget Categories by Year	First Year		Second Year		Third Year		Fourth Year		Fifth Year		Total Funds Requested
Object Class	% of Time	Funds Requested	% of Time	Funds Requested	% of Time	Funds Requested	% of Time	Funds Requested	% of Time	Funds Requested	
a. Personnel (Position Title)		\$		\$		\$		\$		\$	\$
SUB-TOTAL											
b. Fringe Benefits											
c. Travel											
d. Equipment											
e. Supplies											
f. Contractual											
g. Construction											
h. Other											
i. TOTAL DIRECT CHARGES											

INDIVIDUAL ACTIVITY BUDGET NARRATIVE FORM
Provide detailed narrative for each budget line item. Add pages as needed

Name of Applicant
Institution:

Activity Title:
