

Appendix B Application Narrative

View the Grant Proposal Manual for instructions and more information.

Cover Sheet

Organization Information									
Company/Organization Name									
DBA (if applicable)									
Business/Organization Type (select one)	Agricultural producer or processor			Local government agency					
	Non-profit			College or university					
	State government			Other					
Tax ID #									
DUNS #				DUNS # applied for?			Yes		No
Grant Project Contact									
Mailing Address									
Physical Address									
Phone				Cell					
Email									
Grant Management Contact									
Phone				Email					
Project Information									
Project Title (limited to <u>fifteen</u> words)									
Project Begin Date				Project End Date					
Funding Amount Requested									
Specific Specialty Crop Benefiting from Grant									
Area of Focus (select all that apply)	<i>Agricultural education and outreach</i>			<i>Food safety enhancement</i>					
	<i>Sustainable production practices</i>			<i>Good ag/handling/mfg practices</i>					
	<i>Crop research/conservation</i>			<i>Nutrition education</i>					
	<i>Marketing/trade enhancement</i>			<i>Plant pest and disease control</i>					
	<i>Other (list)</i>								
Will project benefit beginning farmers/ranchers?*		Yes		No	Will project benefit socially disadvantaged farmers/ranchers?		Yes		No
Is this a multi-state project?		Yes		No	List partnering state(s)				

***Beginning farmers or ranchers** - individuals or entities who have not operated a farm or ranch for more than 10 years and substantially participates in the operation.

****Socially disadvantaged farmers or ranchers** - means a farmer or rancher who is a member of a socially disadvantaged group. A “socially disadvantaged group” is a group whose members have been subject to discrimination on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or a part of an individual's income is derived from any public assistance program; areas defined as poverty according to US Census data.

Narrative

Abstract

Include a project summary of 250 words or less, suitable for dissemination to the public. It should include:

1. *The name of the applicant organization that if awarded a grant will establish an agreement or contractual relationship with the state department of agriculture to lead and execute the project,*
2. *A concise outline the project's outcome(s), and*
3. *A description of the general tasks to be completed during the project period to fulfill this goal.*

Project Purpose

1. **What is the specific issue, problem or need to be addressed by the project?** What is it that you are trying to solve or fix? Why is the project important and timely? Demonstrate that this is an issue of importance to specialty crop stakeholders and/or they have sought or encouraged your involvement in finding a solution. WVDA prioritizes applications that address problems brought forth by specialty crop stakeholders.

What are the objectives of the project? Provide general objectives, what you want to accomplish with this project, in the table provided below.

Objective Name	Objective Description	Objective Target
1)		
2)		
3)		Tab through to add lines

Outcomes

At least one approved measurable outcome must be provided. Refer to Appendix E (AMS 2016 Evaluation Plan).

Performance Indicators

Provide at least one but no more than two allowable indicators. Refer to Appendix E (AMS 2016 Evaluation Plan) and worded with numbers applicable to your project. Remember, you will report on your progress of these indicators in the reporting phase of your project, if approved.

Citations (Optional)

A list of citations may be added to the application but is strictly optional.

--

Eligibility

1. **By marking the box below**, I confirm that this project **solely** enhances the competitiveness of specialty crops in accordance with and defined by [7 U.S.C. 1621](#). Further information regarding the definition of a specialty crop can be found at www.ams.usda.gov/services/grants/scbgp.

Yes	
-----	--

2. **Does the project build on a previously funded SCBG project?**

If YES:

- Describe how the project differs from and builds on the previous project.

--

- Provide a summary (3 to 5 sentences) of the outcomes of the previous efforts.

--

- **What was previously learned from implementing this project, including potential improvements?**

--

- **How are the lessons learned and improvements being incorporated into the project to make the ongoing project more effective and successful at meeting goals and outcomes?**

--

- Describe the likelihood of the project becoming self-sustaining and not indefinitely dependent on grant funds.

--

3. **Did you submit this project to a federal or state grant program other than the SCBGP for funding and/or is a federal or state grant program other than the SCBGP funding the project currently?**

Yes		No	
-----	--	----	--

4. Has the project been submitted to or funded by another federal or state grant program?

If YES,

- Identify which federal and/or state grant program

- Describe how the SCBGP project differs from or supplements the other grant program(s) efforts.

Potential Impact

1. **Who are the beneficiaries of the project?** Be as specific as possible, describe the population affected and where they are located. Where possible, use statistics to describe the target population of the project.

2. **How many beneficiaries will be impacted?** The answer to this must be a number.

3. **How will the beneficiaries be impacted by the project?** Be specific. Examples of impact could be increased sales, increased awareness, increased yield, etc.

4. **Describe how you will share the results of the project with specialty crop growers and other interested specialty crop stakeholders.** Consider this a key aspect of the proposal.

Project Support

Describe the specialty crop stakeholders who support this project and why (other than the applicant and organizations involved in the project).

Project Funding

Provide the following information in this section:

1. Would this project be possible without SCBG grant funds? *(check one)*

	No, this project would not be possible without SCBG funds.
	Yes, this project would be possible without SCBG.

- If **NO**, you are indicating that there are no other funding sources, public or private, through which this project could be funded. No further explanation is necessary.
- If **YES**, you are indicating that there are other funding sources, public or private, through which this project could be funded. For this, please provide an explanation regarding the source of funding that would be used for this project if SCBG funds were not granted.

Explain:	
-----------------	--

2. Could the outcomes of this project be accomplished with a reduced budget? *(check all that apply)*

	No, this project would not be possible with a reduced budget.
	Yes, we would accept a reduced amount that, if granted, could still accomplish the outcomes of this project. OR
	Yes, we would accept a reduced amount, with corresponding reductions in outcomes.

- If **NO**, you are indicating that the project could not be accomplished with a reduced budget (i.e. the funding decision must be “all or nothing”).
- If **YES**, be very specific in indicating which aspects of the project could be cut and the corresponding change dollar amount reduction to the overall budget. Also, indicate whether the outcomes or work plan in your proposal would need to be adjusted.

Explain:	
-----------------	--