**WORKSHEET**

**Project Concept UCF IRA Trees for Indigenous Nations [2024] - Montana**

**1. Organization Information**

1.1. Organization Name**\***

1.2. Has the organization received any DNRC Forestry grants or subawards previously? *Yes/No*

**2. Applicant Information**

2.1. Your name? **\***

2.2. Your Phone**\***

2.3. Your Email**\***

2.4. Provide a Secondary Contact for the project. Name? \*

2.5. Secondary Contact Phone\*

2.6. Secondary Contact Email\*

**3. Project Area**

3.1. Project Name**\***

3.2. Project Location(s)**\***

Please provide location details of the project. Projects can take place within Indigenous Nations and tribal communities in Montana.

**4. Project Description**

4.1. Project Description - Provide 4-5 paragraphs that summarize your project.Describe how your project will meet the needs of and benefit your community at large.

**5. Project Management**

5.1. List the Project Personnel - partners, personnel, and roles in the project. This can also include involvement with DNRC Forestry staff. *Applicants have a choice to use provided table or upload own document.*

5.2 Will your organization need external assistance to complete the proposed project? i.e. contracted assistance, grants administration, or project implementation? *Yes/No*

*If yes*, 5.2.1. Please describe the type of assistance you will seek and any identified providers.

**6. Project Work Plan and Schedule**

6.1. Outline the Project Work Plan **\*** - Provide a general schedule for planned activities, projects can go up to 3 years. *Applicants have a choice to use provided table or upload own document.*

**7. Budget**

Estimate of total project costs: consider contracted services, staff, supplies, and other expenses. Typical project ranging from $50,000 - $150,000.

7.1. Total Funds Requested. **\***

7.2 Project Budget by Category:

|  |  |
| --- | --- |
| ***Project Funding Summary:*** |  |
| Personnel | $0 |
| Operating Expenses | $0 |
| Contracted Services | $0 |
| Indirect Costs | $0 |
| Total Project Funding: | $0 |

**8. Supporting Documentation**

8.1. Optional - Supplemental Information - Upload any supporting documentation you would like included in the application. *Upload up to 10 files*.Top of Form

**9. Certification and Authority to Sign**

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\_\_Yes, I am authorized to sign this application on behalf of the organization I represent.

\_\_No, I do not personally have the authority to submit this application on behalf of the organization. I will upload an Authorization Statement signed by someone else.

If Yes to 9.1.

9.1.1. Federal Funding Certification Statement.

*By typing my name above as an electronic signature, I attest to having the authority to submit this application, and my organization has the institutional, managerial, and financial capacity to ensure proper planning, management, and completion of the project. And I certify to the best of my knowledge and belief that the information provided herein is true, complete, and accurate. I am aware that the provision of false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil, or administrative consequences including, but not limited to violations of U.S. Code Title 18, Sections 2, 1001, 1343 and Title 31, Sections 3729-3730 and 3801-3812.****\****

If No to 9.1

Authorized Statement must be downloaded, signed by appropriate person and uploaded. Statement contains certification language. [PDF available here](https://dnrc.mt.gov/_docs/forestry/GrantsDocs/SubmittableRepository/USE_AuthorizingStatementUCF.pdf).