



**Community Preparedness Priority Grant  
Application Cover Sheet**

Name of Council		Fiscal Agent	
Contact Person		Contact Person	
Address		Address	
City/State/Zip		City/State/Zip	
Phone Number		Phone Number	
Contact Email		Contact Email	
FEIN #		FEIN #	

**Amount Requested:** \_\_\_\_\_

**Area/County(s) served by Citizen Corps Council:** \_\_\_\_\_

**Summary** (Please provide a 2-5 sentence summary of the activities proposed in this grant application. Indicate the three priorities to be addressed with this funding. This statement may be used in publications developed by WVCNCS.)

We hereby certify that to the best of our knowledge the information and data contained in this application are true and correct. The applicant and partners will comply with all requirements of the grant.

<b>Citizen Corps</b>	<b>Fiscal Agent</b>	<b>Emergency Manager</b>
Print name of Chair person	Print Contact Name	Print Name
Signature	Authorized Signature	Authorized Signature
Date	Date	Date



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**Applicant Organization/Project**

1) **Answer** the following questions related to your proposed project:

\_\_\_\_\_ Expected number of volunteers providing service to your community

\_\_\_\_\_ Expected number of citizens trained in personal preparedness

\_\_\_\_\_ Expected number of citizens trained in emergency response

\_\_\_\_\_ Expected number of partner organizations actively involved in project

2) **Answer** the following regarding training activities (skip if not applicable):

Type of training \_\_\_\_\_

Approximate dates (Attach a schedule/calendar if available) \_\_\_\_\_

Location \_\_\_\_\_

Audience (Who is invited?) \_\_\_\_\_

3) **Attach**

- a. Project Narrative
- b. Budget-- Be as specific as possible. Provide Authorized Equipment List (AEL) numbers for all equipment requests. AEL #'s can be found at: [://www.rkb.us/mel.cfm?expand=1&filter=filter&subtypeid=549&CCP=1](http://www.rkb.us/mel.cfm?expand=1&filter=filter&subtypeid=549&CCP=1).
- c. Milestones
- d. Partner Letters (provide copies of formal agreements if available)
- e. Council Bylaws/Council roster (at least one)
- f. Evidence of volunteer activities -- A sign-in sheet dated within the last 6 months or a project report including volunteer involvement in activities
- g. Written statement from WV DMAPS Regional Coordinator (an email is fine) that verifies your fiscal agent has met the eligibility criteria to receive Homeland Security Fiscal Year 2007 funding.