



National Association of Chronic Disease Directors Grant Application Template Instructions

These instructions will be helpful to complete the Program Budget Template.

A. Staff Salary and Wages

Populate the non-highlighted cells. Input name of staff, job title, hourly rate, and FTE%. The project total hours, # of months, and amounts will be calculated when the hourly rate and FTE % has been determined.

If a person has not been determined, put "TBD" as the name, but must include position title.

In the "Justification" boxes, please put the responsibilities of each person. The responsibilities should include how the roles and responsibilities relate to the program objectives. Also include the period of performance Month and Year, e.g. October 2019 – September 2020. Please provide updated CV.

B. Fringe Benefits

Populate the non-highlighted cells. Input a percentage and use the drop down arrow to select the rate basis: n/a, historical, or current rate.

C. Consultant Fee (NACDD Consultant, not a contractor)

Populate the non-highlighted cells. Input the name of the consultant name, hourly rate, FTE, and budgeted fee, and justification.

The justification should include the nature of services to be rendered or completed. The justification must be relevant to the project and must include a period of performance, e.g. October 2019 – September 2020). If a person has not been identified, put "TBD-Consultant" as the name. Please provide an updated CVs when the budget is submitted.

D. Consultant Travel (NACDD Consultant, not a contractor)

Populate the non-highlighted cells. Input the name of the consultant, # of trips, # of people, # of nights/days, and rate. The rates in the table may be adjusted as appropriate. Car rental is not allowed when public transportation is the most economical way of travel to and from the designation.

The justification should include the purpose of the meeting, location, and date (Month and Year) even if it should change. The budget preparer (BP) may include a sentence that the date is subject to change. BP may also include a statement that an additional trip may be taken depending on the availability of funds. This will provide the consultant with some latitude during the year. Be sure to keep the purpose broad so that it can relate to any unforeseen trip to be taken during the grant year.

If the budget includes registration fee, please indicate the name of the conference, location, date, and how it relates to the program's objective. NACDD allows registration fees for consultants if the consultant is presenting or if CDC requests the consultant's attendance.

D. Staff Travel

Populate the non-highlighted cells. Input the staff name, position title, and justification.

The justification should include the purpose of the travel, location, and date (Month and Year) even if it should change. The budget preparer (BP) may include a sentence that the date is subject to change. BP may also include a statement that an additional trip may be taken depending on the availability of funds. This will provide some latitude during the year. Be sure to keep the purpose broad so that it can relate to any unforeseen trip to be taken during the grant year.

If the budget includes registration fee, please indicate the name of the conference, location, date, and how it relates to the program's objective. NACDD allows registration fees for staff only if the staff is presenting or if CDC requests the staff's attendance.

E. Equipment

Populate the non-highlighted cells. Input a clear description of the item, # of units needed, unit cost, and justification. BP may need to research to obtain a unit cost. Maintenance or rental fees for equipment should be shown in the "Other" category.

The justification must clearly indicate how the item helps achieve the program objectives. The BP must ensure that the equipment is an allowable cost of the grant.

F. SUPPLIES

Populate the non-highlighted cells. Input a clear description of the item, # of units needed, unit cost, and justification. BP may need to research to obtain a unit cost. Maintenance or rental fees for equipment should be shown in the "Other" category.

The justification must clearly indicate how the item helps achieve the program objectives.

G. OTHER

Member Travel

Populate the non-highlighted cells. Populate the non-highlighted cells. Input the # of trips, # of people, # of nights/days, and rates. The rates in the table may be adjusted as deem appropriate. Car rental is not allowed when public transportation is the most economical way of travel to and from the designation. If there is a car rental budget, please be sure the justification is reasonable and logical, e.g. visit is to a rural area which does not have public transportation.

The justification should include that the travel is for NACDD members, State Health Department employees. Also must state the purpose of the meeting, location, and date (Month and Year) even if it should change. BP may include a sentence that the date is subject to change and may also include a statement that an additional trip may be taken depending on the availability of funds. This will provide the lead consultant with some latitude during the year. Be sure to keep the purpose broad so that it can relate to any trip taken during the grant year, as well as meet the program objectives.

how it relates to the program objectives.

Partner Travel

Populate the non-highlighted cells. Populate the non-highlighted cells. Input the # of trips, # of people, # of nights/days, and rates. The rates in the table may be adjusted as deem appropriate. Car rental is not allowed when public transportation is the most economical way of travel to and from the designation. If the budget includes car rental, please be sure the justification is reasonable and logical, e.g. visit is to a rural area, which does not have public transportation.

The justification should include that the travel is partner organizations. Identify name if known. Also must state the purpose of the meeting, location, and date (Month and Year) even if it should change. BP may include a sentence that the date is subject to change and may also include a statement that an additional trip may be taken depending on the availability of funds. This will provide the some latitude during the year. Be sure to keep the purpose broad so that it can relate to any unforeseen trip taken during the grant year, as well as, achieve the program objectives.

If the budget includes registration fee, please indicate the name of the conference, location, date, and how it relates to the program objective.

Contractor/Subcontract Travel

Populate the non-highlighted cells. Populate the non-highlighted cells. Input the # of trips, # of people, # of nights/days, and rates. The rates in the table may be adjusted as deem appropriate. Car rental is not allowed when public transportation is the most economical way of travel to and from the designation. If the budget includes car rental, please be sure the justification is reasonable and logical, e.g. visit is to a rural area, which does not have public transportation.

The justification should identify the name if known, purpose of the meeting, location, and date (Month and Year) even if it should change. BP may include a sentence that the date is subject to change and may also include a statement that an additional trip may be taken depending on the availability of funds. This will provide some latitude during the year. Be sure to keep the purpose broad so that it can relate to any unforeseen trip to be taken during the grant year, as well as, meet the program objectives.

If the budget includes registration fee, please indicate the name of the conference, location, date, and how it relates to the program objective.

Facilitator Travel

Populate the non-highlighted cells. Populate the non-highlighted cells. Input the # of trips, # of people, # of nights/days, and rates. The rates in the table may be adjusted as deem appropriate. Car rental is not allowed when public transportation is the most economical way of travel to and from the designation. If the budget includes car rental, please be sure the justification is reasonable and logical, e.g. visit is to a rural area, which does not have public transportation.

The justification should identify the name if known, purpose of the meeting, location, and date (Month and Year) even if it should change. BP may include a sentence that the date is subject to change and may also include a statement that an additional trip may be taken depending on the availability of funds. This will provide some latitude during the year. Be sure to keep the purpose broad so that it can relate to any unforeseen trip to be taken during the grant year, as well as, meet the program objectives.

how it relates to the program objective.

Speaker Travel

Populate the non-highlighted cells. Input the # of trips, # of people, # of nights/days, and rates. The rates in the table may be adjusted as deemed appropriate. Car rental is not allowed when public transportation is the most economical way of travel to and from the designation. If the budget includes car rental, please be sure the justification is reasonable and logical, e.g. visit is to a rural area, which does not have public transportation.

The justification should identify the name if known, purpose of the meeting, location, and date (Month and Year) even if it should change. BP may include a sentence that the date is subject to change and may also include a statement that an additional trip may be taken depending on the availability of funds. This will provide some latitude during the year. Be sure to keep the purpose broad so that it can relate to any unforeseen trip to be taken during the grant year, as well as, meet the program objectives.

If the budget includes registration fee, please indicate the name of the conference, location, date, and how it relates to the program objective.

Copying, Graphic Design Publication, Shipping/Postage, Project Supplies, Webinar/Communication Usage Fees, Conference Tech Support, Meeting Space Rental, and Meeting Audio and Visual Equipment rental.

Populate the non-highlighted cells. Input count, rate, and justification. The budget preparer (BP) may need to research to obtain a unit cost. The justification must clearly indicate how the item helps achieve the program objectives. Note that Communication and Member Services department can now assist with graphic design and layout of documents.

Stipends

Populate the non-highlighted cells. Input the # of people, # of hours (preparation hours, execution hours, and follow-up hours), and justification. The justification must clearly explain what will be done and how the item helps achieve the program objectives.

H. Contracts/Grants

For all contracts and grants, there are 6 components of information which must be included in the budget.

- 1) *Name of vendor* : Identify the name of the vendor or contractor. If this has not been determined, please put "TBD-Contractor" or "TBD-State"
- 2) *Selection*: Identify if the selection is Sole Source or Competitive.
If sole source, BP must indicate why this vendor is the only entity or person able to complete the contracted service or scope of work.
- 3) *Period of Performance*: Please include a beginning and end date. A month and a year is appropriate dates to include if BP is unsure, e.g. October 2015 – September 2016. Ensure that the date agrees with the grant year.
- 4) *Scope of Work*: Describe the services to be completed and relate it to the achievement of the program objectives. The deliverables should be clearly identified.
- 5) *Method of Accountability*: Describe how the progress and performance of the contractor will be

monitored during and on close of the project. Identify who will be responsible for the contract.

Input the below information:

“Contract deliverables will be monitored by the Lead Consultant. The Chief Executive Officer and Director of Finance and Operations will provide operational and financial oversight monthly and the NACDD Evaluator staff will review the program evaluation/progress reports.”

- 6) *Itemized budget with justifications*: The budget must be as detailed and include justifications as the other budget line items mentioned above in the other sections A-G. Consider giving the vendor the NACDD budget template and these instructions. Ideally, the vendor should prepare the budget, instead of NACDD.

Calculation of indirect is different in the Contracts/Grants section. Indirect amount is calculated based on the “eligible direct cost” of each agreement. The eligible direct cost is the first \$25,000 of each agreement/grant. Note the examples below:

1st example - - 5 grants @ \$60,000 each; 5 grants x \$25,000. Thus, the eligible direct cost is \$125,000.

2nd example- - 1 agreement \$120,000; 1 x \$25,000. Thus, the eligible direct cost is \$25,000.

3rd example- - 1 agreement for \$20,000; 1 x \$20,000. Thus, the eligible direct cost is \$20,000.

A formula is included in the budget template to calculate the eligible direct cost of contracts and grants. This indirect calculation for contract does not apply to a NACDD contractor who provides NACDD with a budget and justification. The budget preparer should provide NACDD contractor with the “Contractor-budget template” because it slightly differs from this program budget template.

NOTE>> NACDD Finance team can adjust budgets so that it equals an exact amount. This will be done after completion of all budget sections.