

Institutional and Contact Information Section

1. Institution Name
2. First Name
3. Last Name
4. Address
5. Phone Number
6. Email
7. Extension Director First Name
8. Extension Director Last Name
9. Extension Director Email
10. Extension Director Phone
11. Please upload a letter of support from your Extension Director

Current Programming

1. Please describe the current scope of your work in the area of community and economic development.
2. What populations are you currently serving? (Check all that apply)
 - a. White
 - b. Black or African American
 - c. Native American
 - d. Native Hawaiian/Alaska Native
 - e. Asian or Pacific Islander
 - f. Hispanic
3. Does your work include a focus on veterans?

Community Information

1. Briefly describe the community in which you plan to work.
2. What goals do you hope to achieve through utilization of this process?
3. What is the population of the community with which you plan to work?
4. What is the racial-ethnic makeup of the community with which you plan to work?
5. What is the median income of the community with which you plan to work?

Evaluation

1. Please describe how you plan to evaluate this work.

Office of Sponsored Programs/Business Office Contact Information

1. Administrative Contact Information (Name, title address, email, phone)
2. Financial Contact Information (Name, title, address, email, phone)
3. Authorized Official Contact Information (Name, title, address, email, phone)
4. Legal Address
5. Administrative Address
6. Payment Address