

Project Information

This section provides you with the ability to upload your Survey Monkey documents and provide PCCD with some clarifying information on your project.

1. Question #1 relates to attaching your Survey Monkey application to this section. At the bottom of the page you should select "Add Attachment" to upload this document.
2. If your agency has applied for funding for the same expenses listed in your Survey Monkey application, please discuss in Question #2. If not, please enter N/A in this box.
3. If you are requesting over \$25,000, please discuss the source of your non-state financial participation. Please refer to the Funding Announcement PDF for information regarding cash match.
4. Please provide an estimated number of individuals that utilize your facility each year.

System will time out at 03:14:05
Remaining time: 14:05

PROJECT INFORMATION

Section Point Value: 0
Completion Status:

Created By: Ms. Christina Cosgrove
Last Update By: Ms. Christina Cosgrove

Created Date: 3/25/2020 8:31:46 AM
Last Update Date: 3/25/2020 8:31:46 AM

1. Applicants must attach the PDF version of their SurveyMonkey application. Applicants will have received a copy of their originally submitted SurveyMonkey application from PCCD via an email received on March 16, 2020. If you do not have a copy of your originally submitted application, please contact RA-CD-NPSEC-GRANT@pa.gov.

You will need to attach your SurveyMonkey application to this section. At the bottom of this page is an "Add Attachment" button. Press that to attach your survey documents.

2. Discuss whether your organization has applied or received funding from another source for the same items listed within the budget submitted via SurveyMonkey.

If you have not applied for funding from any other source you do not need to answer this question.

3. If your awarded funding exceeds \$25,000, please discuss the source of your non-state financial participation (e.g. organizational funds, local grant, etc.).

If you are providing matching funds, please discuss where these funds are coming from. (e.g. federal funding, organization budget, etc.) If you requested \$25,000 or less, you do not need to fill out this section.

4. To ascertain the impact of these funds, please provide an estimated count of individuals who utilize your facility each year. Include any outside organizations that also utilize your facility in your total count.

We are trying to get a picture of how many people will be impacted by these funds. Please provide your best guess as to the estimated number of individuals who utilize your facility each year.

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5. Once you have completed this section, change the completion status (at the top left of the page) to complete and click "Save." This will take you back to the remaining sections.

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Actions	Attachment Name	Description	Date	History
<i>No records to display.</i>				

File Attachment Documents
<i>No records to display.</i>