

TITLE PAGE

MGFSP FY 2022

Print Full Name: _____

Amount Requested: \$_____

ENDORSEMENT AND ACKNOWLEDGEMENT SIGNATURE

By signing this document, I certify that I have fully read the instructions, pages, application guidelines, and agreements, and accept responsibility for understanding and upholding the terms and conditions of these documents. To the best of my knowledge and belief, the information I have provided in this application is true, complete, and accurate. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)

I understand that if this project is funded, I will be required to sign a contract agreement and other necessary documentation containing terms and conditions upon which funds will be released.

Signature

Date

I acknowledge that the Guam Department of Agriculture is not liable for any loss associated with the project(s) for which the award was granted. It is up to each recipient of the grant award to obtain appropriate liability insurance as they deem necessary.

Signature

Date

I acknowledge that if selected, I agree to following the terms of this proposal and all State Terms and Conditions.

Signature

Date

I verify that I am a resident of the Territory of Guam. I agree to complete the project to the best of my ability. If any interruption, delay, or inability to complete the project as described. I will notify the Guam Department of Agriculture. I have fully read and completed the application in its entirety.

Signature

Date

MICRO-GRANTS FOR FOOD SECURITY PROGRAM (MGFSP)

MGFSP INDIVIDUAL APPLICATION FORM FY22

PROJECT INFORMATION

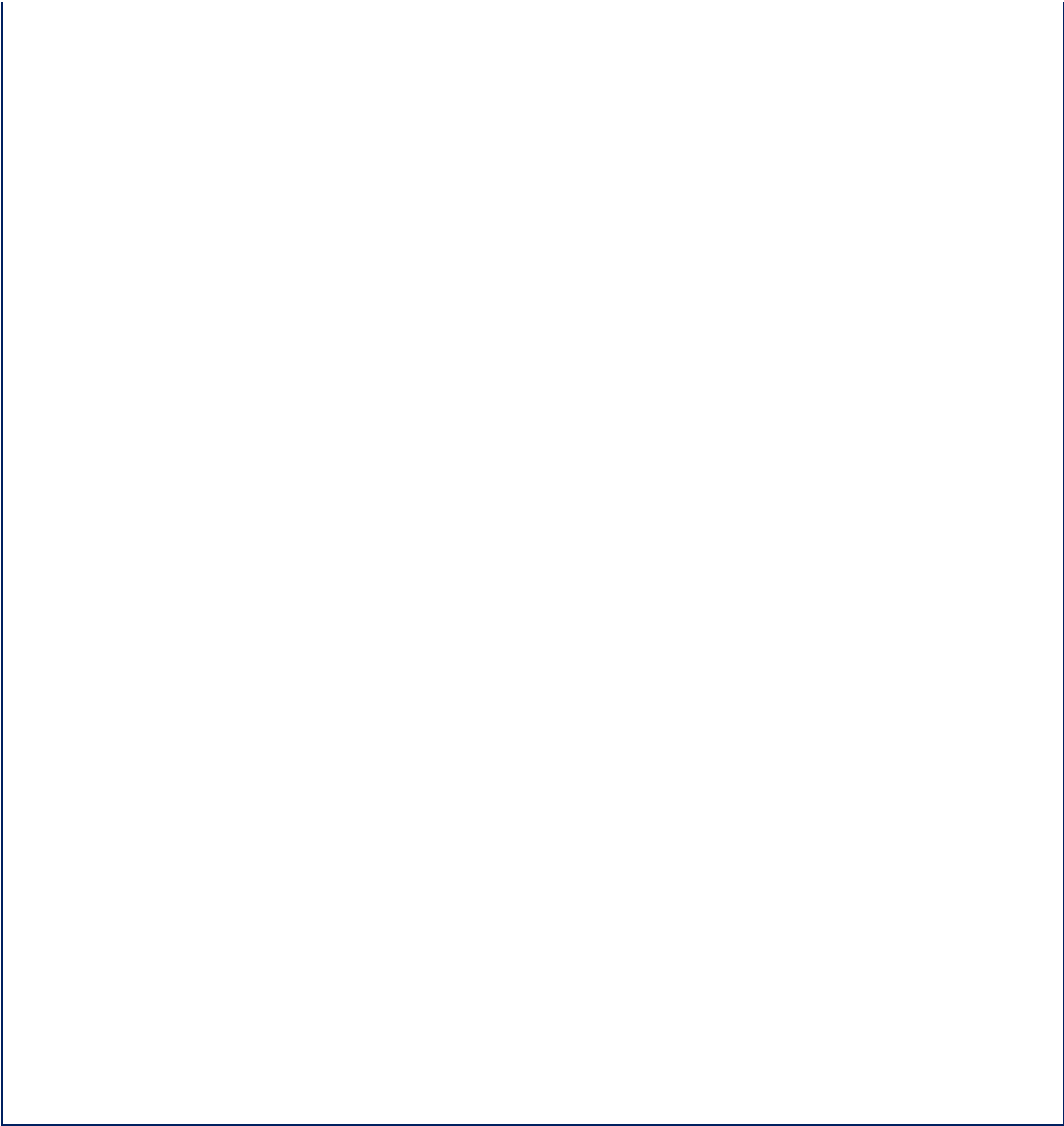
Project Title <i>(Provide a descriptive project title in 15 words or less.)</i>				
Duration of Project <i>(Leave Blank)</i>	Start Date:	Enter Date.	End Date:	Enter Date.
Total funds requested <i>(Must not exceed \$5,000)</i>	\$			

Applicant Name	
Project Address	
Phone	
Email	

If the eligible state has waived the matching requirement for an *individual* applicant, please check this box.

PROJECT DESCRIPTION

In 250 words or less, please provide a brief description of the proposed project. Please include a concise outline of the project's objectives, outcomes, and a description of the general tasks to be completed during the project period to fulfill project goals. This summary will be available for public review.



EXPECTED MEASURABLE OUTCOMES

PROJECT TYPE

Main	Other	Select ONE main activity of your award; select "Other" for remaining activities.
<input type="checkbox"/>	<input type="checkbox"/>	<p>Gardening</p> <ul style="list-style-type: none"> • Purchasing gardening tools to grow and store food (soil, soil amendments, seeds, plants, animals, canning equipment, refrigeration, or other items) • Composting • Growing/Garden Towers, Greenhouses • Expanding an area under cultivation such as a high tunnel • Engaging in an activity that extends the growing season • Hydroponic and aeroponic farming • Gardening or agricultural education/training • Creating or expanding garden/crop food markets • Engaging in other activities relating to increasing food security • Other activity for gardening or to enhance gardening including fencing to protect crop, sheds, shipping costs for gardening supplies, and other
<input type="checkbox"/>	<input type="checkbox"/>	<p>Livestock and Herding</p> <ul style="list-style-type: none"> • Fencing for livestock, poultry, or reindeer • Purchase of poultry, livestock • Purchase of livestock supplies, feed, or related items to store or preserve harvest • Livestock or agricultural education/training • Creating or expanding livestock, poultry, egg food markets • Engaging in other activities relating to increasing food security • Other activity for livestock or to enhance livestock including shipping costs for feed, fencing to enclose livestock, chicken enclosures, and other
<input type="checkbox"/>	<input type="checkbox"/>	<p>Subsistence: hunting and fishing</p> <ul style="list-style-type: none"> • Fishing, fishing supplies, harvesting • Hunting, hunting supplies, harvesting • Hunting and Fishing education/training • Engaging in other activities relating to increasing food security • Creating or expanding food markets
<input type="checkbox"/>	<input type="checkbox"/>	<p>Apiary</p> <ul style="list-style-type: none"> • Creating or expanding food markets • Apiary education/training; shipping • Engaging in other activities relating to increasing food security
<input type="checkbox"/>	<input type="checkbox"/>	<p>Slaughter and processing facility</p> <ul style="list-style-type: none"> • Creating or expanding food markets • education/training; shipping

Main	Other	Select ONE main activity of your award; select "Other" for remaining activities.
		<ul style="list-style-type: none"> Engaging in other activities relating to increasing food security
<input type="checkbox"/>	<input type="checkbox"/>	Other: please type

EXPECTED RESULTS

Project	What did you produce/end results during this grant period?	Measurement: (pound, bunches, other)	Expected Results
Example: Garden	Fruit tree planted – no produce yet	Tree	50
	Eggplant	Pound	100
	Fencing	Square foot	400
	Grain	Bushel	50
	Product:	10 oz bag	100
Example: Livestock	Eggs	Dozen	100
	Milk	Gallon	200
	Chicken/Cattle raised	Animal	50
	Beef	Pound	5000
Gardening			
Livestock			
Fencing		____ (sq. ft.)	
Subsistence: Hunting/Fishing			
Apiary			
Slaughter and processing facility			
Other (specify)			

Number of Direct Beneficiaries: _____
(Number of direct beneficiaries/number of people in your household (under your roof) that will benefit from the project.)

Number of Indirect Beneficiaries: _____
(Number of indirect beneficiaries/people you will be sharing, selling, or donating food to outside your personal household.)

DATA COLLECTION TO REPORT ON OUTCOMES AND INDICATORS

Describe how you will measure and collect data on each of the selected results above.

SHOW THE TIMELINE FOR THE PROJECT

MONTH (Month 1,2,3,4...)	ACTION List activities to be completed during this time	PERSON Who will complete the action	BUDGET The portion of the budget used to complete the action	EXPECTED RESULTS What will be achieved as a result of the action

BUDGET NARRATIVE

The budget narrative must show the total cost for the project and describe how category costs listed in the budget are derived. Applicants should review the competition announcement for allowable and unallowable expenses. If the category costs are not applicable, type N/A.

Budget Summary

Expense Category	Federal Funds Requested	Cost Share or Match Request
Personnel		
Travel		
Equipment		
Supplies		
Contractual		
Other		
Direct Costs Total		

PERSONNEL

Name/Title	Level of Effort (# of hours per year)	Annual Salary Requested	Total Funds Requested
			\$
			\$
			\$
Personnel Subtotals:			\$

TRAVEL

Allowable travel costs may not exceed those established by the Federal Travel Regulation, issued by GSA, including the maximum per diem and subsistence rates prescribed in those regulations. This information is available at <http://www.gsa.gov>.

Trip Destination, Dates, and Justification	Type of Expense (airfare, car rental, hotel, meals, mileage, etc.)	Unit of Measure (days, nights, miles)	# of Units	Cost per Unit	Funds Requested
					\$

EQUIPMENT OF \$5,000 OR MORE

#	Item Description and Justification for Requesting Funds	Rental or Purchase	Acquire When?	Funds Requested
1				\$
Equipment Subtotals:				\$

SUPPLIES

Item Description and Justification for Requesting Funds	Per-Unit Cost	# of Units/Pieces Purchased	Acquire When?	Funds Requested

