

AmeriCorps Program Title Page and Partnership Forms Instructions

The **AmeriCorps Program Title Page** and **Partnership Forms** are available online through the CV website at <https://govapps.gov.ca.gov/cvrfa/>. You will need to create an account to access these forms for your application.

Creating an Account

Enter an email address—only one email address can be used per legal applicant. Next, choose a password (minimum of six characters) and re-enter it, then click "Create."

Please contact funding@cv.ca.gov if you have forgotten your password or need to make changes to your login information.

Continuing a Funded/Awarded Program

If you are continuing a previously funded program and have already entered your Title Page and Partnership Forms for the previous program year, you can copy that application to bring those forms over to the current year. This option will not be available if you have already created an un-finalized application for the current year. If you run into any issues, please contact funding@cv.ca.gov.

Creating a New Funded/Awarded Program

If you are a new program, you will need to create a new application.

Choose an Application Type

Select "Funded/Awarded Program" from the drop-down list.

Completing the AmeriCorps Program Title Page

Enter the following information and click "submit" at the bottom of the page. You can save your progress by clicking "save" at the bottom of the page.

AmeriCorps Program Information:

Provide the name of your proposed AmeriCorps program and the website for the program.

Legal Applicant Contact Information:

The legal applicant is the organization that takes formal responsibility and assumes liability for the AmeriCorps program. All correspondence regarding the application process funding decision, contracting, and corrective action, will be sent to the contact person listed for the legal applicant.

Primary Contact Information:

Provide the contact information for the primary contact for this program. The primary contact is the grantee's staff person most familiar with the oversight and administration of the AmeriCorps program's day-to-day operations. In most instances, this would be the AmeriCorps Program Director or the full-time staff person whose time is 100% dedicated to the grant. All correspondence regarding the application process will be sent to the primary contact as well as the legal applicant. All correspondence regarding training and technical assistance opportunities, changes to CV policies and grant requirements, and grantee performance feedback, issues, and challenges will be sent to the primary contact person. CV expects that the primary contact person will distribute information received from CV to other grantee staff, as appropriate.

Secondary Contact Information:

Provide the contact information for the secondary contact for this program. CV may contact the secondary contact person when the primary or the legal applicant contacts cannot be reached.

Fiscal Contact Information:

Provide the contact information for the fiscal contact for this program.

Press Contact Information:

Provide the contact information for the press contact for this program.

Member Recruitment Contact Information:

Provide the contact information for the person in charge of recruiting AmeriCorps members for this program.

Executive Summary:

Copy and paste your program's executive summary from the Program Narrative here.

Focus Area:

Check all Focus Areas that apply to your program.

Grant Type:

Select the appropriate box to indicate the type of grant for which you were funded. See RFA; Section I.G. for further description.

Organization Type:

Check all the boxes that apply to the legal applicant organization.

Partnership Type:

From the drop-down options, select the appropriate partnership type you've formed to support the planning, operation, and sustainability of your program.

- Select "Intermediary" if the legal applicant provides the mechanism for a number of community organizations, including faith-based, to access AmeriCorps. Intermediaries are the legal applicant and agree to provide the technical and financial support to assist community organizations that do not have the capacity to perform these functions. Intermediaries may place members at the sites of neighborhood, community or faith-based organizations and assume responsibility for monitoring the progress of the sites.
- Select "Affiliates" if members of your partnership are affiliates entities of the legal applicant organizations.
- Select "Consortium/Collaborative" if members of your partnership are independent organizations that interact on activities to support the planning, implementation, and sustainability of the AmeriCorps program.
- Select "Other" if none of the above options applies.

Please refer to your program's Budget Narrative to provide the requested information.

- Total Operating Cost: Provide the total costs of the program (CNCS share and Grantee Share combined).

- Total CNCS Request: Provide the total amount of funds that the program is requesting from CNCS. Transfer this total from Column 4 of the “Total Budget Cost” line on the AmeriCorps Budget Narrative.
- Cost Per MSY: Transfer this figure from the “CNCS Cost Per MSY” on the AmeriCorps Budget Narrative. This figure may not exceed the maximum limit set by CVs’ Cost Per MSY Policy.
- Total AmeriCorps MSYs: Provide the total number of MSYs (not the total number of members) that your program will use. You will have this figure after completing the Budget Form and Budget Narrative.
- Number of Members Slots: Provide the total number of AmeriCorps members that your program will use, as indicated on Section II of the Budget Narrative.

Making Changes to the Program Title Page

If you need to make any mid-year changes to program contact information, contact AmeriCorpsGrants@cv.ca.gov. We will then unlock to form for you to make changes.

Completing the Partnership Forms

As stated in the RFA, all applicants are required to develop a program partnership of at least three independent entities that include *one public and one private* partner (nonprofit or for-profit entity). CaliforniaVolunteers considers 501(c)(3) nonprofit organizations to be private entities. CaliforniaVolunteers prefers partners to have a significant role in planning, operating, and sustaining the program (e.g. match contribution, training resources, continuous improvement assessment, etc.). All primary partners and member placement sites must be identified on the *Partnership Forms* submitted on-line as part of the application.

The *Partnership Form* has two parts: 1) Partner Organization and 2) Member Placement Site Organization. A partner may be both a partner organization and a member placement site organization. You must enter information separately for each type of organization. For example, a member placement site organization that also serves as one of your three primary organizations will need to enter that organization in both forms.

Click “**New Partner**” to enter information for your partnering organizations (including the legal applicant organization). Each applicant is required to include at least one public and one private partner. Once you have started to enter a new partner, you will not be able to enter another partner or placement site until you complete the form.

Click “**New Member Placement Site**” to enter information for each organization shown on your program diagram as a member placement site. Once you have started to enter a new member placement site, you will not be able to enter another partner or placement site until you complete the form.

Adding a Partner

Enter the following information and click "submit" at the bottom of the page. You can save your progress by clicking "save" at the bottom of the page.

- Partner Organization Name
- Contact First Name
- Contact Middle Name
- Contact Last Name
- Contact Title

- What type of support this partner provides to the program (i.e. financial support, facilities, training, administration, supervision, and other support, etc.)
- If the partner will be contributing “Financial Support,” will it be cash or in-kind?
- Is the source of the Financial Support federal, state, or private funds?
- The amount of match contribution
- Is the partner a Private or Public organization?
- Site organization type

Adding a Placement Site

Enter the following information and click "submit" at the bottom of the page. You can save your progress by clicking "save" at the bottom of the page.

- Site Organization Name
- Contact First Name
- Contact Middle Name
- Contact Last Name
- Contact Title
- Site Address
- Site City
- Site State
- Site 9-digit Zip Code
- Site County
- The California Economic Region in which the site County falls:
 - Northern: Butte, Colusa, Glenn, Del Norte, Humboldt, Lassen, Modoc, Plumas, Sierra, Siskiyou, Shasta, Tehama, Trinity
 - Central Coastal: Alameda, Contra Costa, Marin, Mendocino, Monterey, Lake, Sonoma, Napa, San Benito, San Francisco, San Mateo, Santa Clara, Santa Cruz, Solano
 - Southern Coastal: Los Angeles, Orange, San Luis Obispo, Santa Barbara, Ventura
 - Central: Fresno, Kern, Kings, Madera, Mariposa, Merced, Tulare
 - Central Inland: Amador, Alpine, Calaveras, El Dorado, Nevada, Placer, Sacramento, San Joaquin, Stanislaus, Sutter, Tuolumne, Yolo, Yuba
 - Southern Inland: Imperial, Inyo, Mono, Riverside, San Bernardino, San Diego
- The Congressional District in which the member placement site falls (Use <http://congressional-district.insidegov.com/> to find Congressional District)
- The State Assembly District in which the member placement site falls (Use <http://findyourrep.legislature.ca.gov/> to find Assembly and Senate Districts)
- The State Senate District in which the member placement site falls (Use <http://findyourrep.legislature.ca.gov/> to find Assembly and Senate Districts)
- Number of member slots assigned to the placement site by member position type
- Site organization type