Grant Applicant Checklist

To:		Program:	***Title X***
Grant Name:		Competing	
Grant No:		Non-competing	

Before submitting your grant application, please review the following checklist.

Return: The SIGNED ORIGINAL and two complete copies of your application. **NO LATER THAN:** Date Varies. See RFA.	For assistance in preparation of this application, contact:
To: Dept. of Health and Human Services Office of Population Affairs Family Planning Services National Grants Management Office 1301 Young St., Suite 766 Dallas, TX 75202	Program Office: See GPPN 2001-03, Exhibit J Phone: Grants Office: Office of Grants Management for Family Planning Phone: 214-767-3401

APPLICATION SUBMISSION REQUIREMENTS

--- SIGNED ORIGINAL APPLICATION - PLUS TWO COMPLETE COPIES ---

NEW APPLICATIONS and COMPETING CONTINUATION APPLICATIONS		
	Application Item	***Source***
	SF-424	OPHS-1 (Revised 06/2001)
	HHS-690 *(New Federal grant applicants only)*	Assurance of Compliance with Title VI
	Checklist	OPHS-1, Pages 18 and 19
	Required Title X Assurances	GPPN 2001-03 - Exhibits A, B, and C
	Table of Contents	Materials submitted by Grant Applicant
	Progress Report *(Competing Continuation applications)*	Materials submitted by Grant Applicant
	Needs Assessment	Materials submitted by Grant Applicant
	Program Work Plan	Materials submitted by Grant Applicant
	Clinical Management	Materials submitted by Grant Applicant
	Community Education / Outreach	Materials submitted by Grant Applicant
	Evaluation and Quality Assurance Assessment	Materials submitted by Grant Applicant
	National Priority Project	Materials submitted by Grant Applicant
	Financial Management	Materials submitted by Grant Applicant
	Budget Information and SF-424A, Sections A-F	OPHS-1, Page 4
	Other materials	Optional materials submitted by Grant Applicant

NON-COMPETING CONTINUATION APPLICATIONS		
	Application Item	***Source***
	SF-424	OPHS-1 (Revised 06/2001)
	Checklist	OPHS-1, Pages 18 and 19
	Required Title X Assurances	GPPN 2001-03 - Exhibits A, B, and C
	Progress Report	Materials submitted by Grant Applicant
	Program Work Plan	Materials submitted by Grant Applicant
	Budget Information and SF-424A, Sections A-F	OPHS-1, Page 4
	Other materials	Optional materials submitted by Grant Applicant