FY 2025 WSFM WWRA Grant Application

ONLY	FOR OFFIC
	State Submitting Project:
	State Priority Number:
	Dollar Amount Requested:
	Matching Share:
ONET	State Submitting Project: State Priority Number: Dollar Amount Requested:

This document is for proposal development only. Applications must be submitted by the appropriate state/island forestry entity and entered into the online submission system.

		Proposal Cooperator-NA
	Cooperator Organization:	
	Contact Person:	
1	Address:	
	City/State/Zip Code:	
	Phone (Work/Cell):	
	Email:	
		Applicant Information
	Applicant:	
	Contact Person:	
1	Address:	
	City/Zip Code:	
	Phone (Work/Cell):	
	Email:	
	Fax:	
	Federal Tax ID\UEI #:	

	Project Information		
	Name of Project:		
_	Community Name(s):		
_	County(ies):		
2	Congressional District:		
		GIS Coordinates (choose one) -NA	
	Reference Point Name:		
	Lat/Long:		
	Description:		
_			
_	Area Name:		
_	Boundary Lat/Longs:		
	Description:		

	Applicant Budget				
		Grant	Match		Total Project
		Funds Requested -			Cost
			Applicant	Non-Federal	
				Contributors	
	Personnel/Labor:				
3	Fringe Benefits:				
	Travel:				
	Equipment:				
	Supplies:				
	Contractual:				
	Other:				
	Indirect Costs:				
	TOTAL:				

	Budget Narrative (1700 characters including spaces)	
4		

	Project Area Description and Challenges (1700 characters including spaces)
5	
	Relation to Forest Action Plan and CWPP (2500 characters including spaces)
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6	Relation to Forest Action Plan and CWPP (2500 characters including spaces)
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	Proposed Activities (3800 characters including spaces)	
7		
	Project/Landscape Impacts (1700 characters including spaces)	
0		
8		

	Project Collaboration (1700 characters including spaces)	
9		
	Project Timeline (1700 characters including spaces)	
10		
	Project Sustainability (1700 characters including spaces)	
11		