Components of a Complete Application

A complete application consists of the following items in this order:
1. Application for Federal Assistance (Standard Form 424);
2. Budget Information—Non-construction Programs (Standard Form 424A);
3. Assurances—Non-construction Programs (Standard Form 424B);
4. Table of Contents;
5. Budget Justification for Section B Budget Categories;
6. Proof of Non-Profit Status, if appropriate;
7. Copy of the applicant’s Approved Indirect Cost Rate Agreement;
8. Project Narrative Statement;
9. Any appendices or attachments;
10. Certification Regarding Drug-Free Workplace;
11. Certification Regarding Debarment, Suspension, or other Responsibility Matters;
12. Certification and, if necessary, Disclosure Regarding Lobbying;
13. Supplement to Section II—Key Personnel
14. Application for Federal Assistance Checklist

Margaret A. Hamburg,
Assistant Secretary for Planning and Evaluation.

Disposition of Applications

1. Approval, Disapproval, or Deferral

On the basis of the review of the application, the Assistant Secretary will either: (a) Approve the application as a whole or in part; (b) disapprove the application; or defer action on the application for such reasons as lack of funds or a need for further review. However, nothing commits the Assistant Secretary to making an award or limits the ability to make multiple awards.

2. Notification of Disposition

The Assistant Secretary for Planning and Evaluation will notify the applicants of the disposition of their applications. If approved, a signed notification of the grant award will be sent to the business office name in the ASPE checklist.

Federal Domestic Assistance Catalog

The Catalog of Federal Domestic Assistance number is 93–239.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Federal Financial Participation in State Assistance Expenditures; Federal Matching Shares for Aid to Families With Dependent Children, Medicaid, and Aid to Aged, Blind, or Disabled Persons for October 1, 1997 Through October 1, 1998 and for October 1, 1998 Through September 30, 1999; Clarification and Correction

ACTION: Notice of clarification and correction.

SUMMARY: This Notice clarifies the status of Alaska and the District of Columbia shown in the Tables of Federal Medical Assistance percentages calculated for determining the amount of Federal matching in State welfare and medical expenditures for Fiscal Years 1998 and 1999 and corrects an error for the District of Columbia for 1999. For Medicaid and for the Child Health Insurance Program, the percentages given in the notices are correct. For other uses, including the remaining Title IV programs, the Alaskan percentage for 1998 should be 50.00% and for 1999 should be 52.26%. The District of Columbia percentage should be 50.00% for both years.

EFFECTIVE DATES: The corrected percentages will be effective for each of the 4 quarter-year periods in the period beginning October 1, 1997 and ending September 30, 1998 and for each of the 4 quarter-year periods in the period beginning October 1, 1998 and ending September 30, 1999.

Margaret A. Hamburg,
Assistant Secretary for Planning and Evaluation.