R3 GRANT RECOMMENDATION REPORT

Program Name: Implementing Agency Name. From Question 22 of the Uniform Application for State Grant Assistance.

Program Agency D	UNS: 9-digit DUNS number. (Include zeros at beginning if applicable, e.g.: 024035338). From Question 26 of the Uniform Application for State Grant Assistance.
Address:	Agency's address (Business address). From Question 1 of the Program Narrative.
Funding Region:	Funding Region. From Question 1 of the Program Narrative.
Amount Requested:	Amount agencies are requesting. From Question 1 of the Program Narrative.
Type of NOFO:	Assessment and Planning or Service Delivery. Identified at the top of each page of the Program Narrative.

<u>R3 Program Priorities:</u> Which R3 program priority/priorities will the agency address (Violence prevention, Youth development, Civil Legal Aid, Economic Development, Reentry). From Question 8 of the Program Narrative.

Goals, Objectives, and Performance Measures

Replace the table below with the corresponding table listed under "Goals, Objectives, and Performance Measures" in the Program Narrative.

Overall Goal of your Program:			
Process Objectives	Performance Measures		
Outcome Objectives	Performance Measures		

Budget Detail

Enter the line item totals from the Budget Summary tab and Personnel FTE from the Personnel tab of the Budget Template.

Total

Personnel Total FTE:	
Fringe	
Equipment	
Supplies	
Travel	
Contractual – If there are subawards, identify subgrantees and subaward	
amounts in subsequent rows of this section.	
Indirect / Other Costs	
Totals Federal / State and Match:	