

NEW YORK STATE 2020 CENSUS OUTREACH HARD-TO-COUNT COMMUNITIES NOT-FOR-PROFIT PRE-QUALIFICATION

CONSOLIDATED FUNDING APPLICATION (CFA) WALKTHROUGH

1/23/2020

Using the Application

Registering

The Consolidated Funding Application is a web-based application accessible at <u>https://apps.cio.ny.gov/apps/cfa/</u>.

To apply for a grant, you must first register and identify the project for which funds are sought. The CFA allows applicants to be considered for multiple sources of funding for a project by filling out just one application.

CONSOLIDAT	TED FUNDING APPLICATION
HELP PRINT PAG	GE REGIONAL ECONOMIC DEVELOPMENT COUNCILS CFA PROJECT INFO
	NYS Consolidated Funding Application Registration
	Email Address Check
	Re-enter your email address for a verification check.
	Organization Name
	If you do not have a business name yet please enter your DBA "Doing Business As". Use only alpha-numeric characters.
	Project Name
	This will be the name associated with your project. Use only alpha-numeric characters.
	Please enter the sum of the following two numbers:
	1 + 8 =
	This helps to protect our system from spam.
	Register New Application

On the registration page, enter an e-mail address, organization name, and project name.

Prior to selecting "Register New Application," you must answer the security question at the bottom of the page. This is a security function that protects the grant system from spam.

The next screen verifies registration for the project and provides a project-specific token or password. **Print out this page and save it for your records**. You will need the token to revise or update your application.

CONS	SOLIDATED	FUND	NG APPLICATION		
HELP	PRINT PAGE	REGIONA		IT COUNCILS	CFA PROJECT INFO
NY	'S Consolida	ated Fund	ding Application Reg	istration	
Tha	nk you for registeri	ng.			
Ins	structions				
Imp	ortant - Before pro	ceeding read	the following carefully:		
	1. Save yo	our informat	ion		
	Please ma	ake note of th	e following information. You show	uld print this page a	and save it for your records now.
	Organiza	tion Name:	INTERNAL TEST		
	Project N	lame: INT	ERNAL TEST		
	Your logi	n token:			
	PLEASE I	DO NOT LOSI COUNT HAS	E THE TOKEN SHOWN ABOVE - BEEN ACTIVATED.	- YOU WILL NEED	IT TO ACCESS YOUR APPLICATION ONCE
	2. Check y	our email			
	An email in this em	has been sen ail message to	to you with information on how o activate your account and to b	to get started with egin the application	your application. You must follow the link contained n process.
	You may i	need to check	your SPAM folder for the activat	tion email message	2 .

If you have previously registered for a CFA, you may login with your existing e-mail address and token to start a new application(s).

To start a new application with existing credentials, select MY APPLICATIONS under the APPLICATION link located towards the top left corner of the screen, then select START NEW APPLICATION at the bottom of the screen. You can create a new applicant profile by registering a new e-mail address and you will receive a new token. If registering with a new e-mail address, you will receive an e-mail from cfa@ny.gov with information on how to continue the application process. Please be sure to check your spam filter if you registered and did not receive an email for activating your account. This e-mail will contain a link that you must follow to activate your account and begin the application.

Thank you for registering with the NYS Consolidated Funding Applic	ation.
New Applicant Information: Your Application Number is: 50341 Organization Name: INTERNAL TEST Project Name: INTERNAL TEST Email Address:	
IMPORTANT	
To continue the process you must activate your account.	
CLICK HERE TO ACTIVATE YOUR ACCOUNT	
If you've already activated your account <u>click here to log in and cont</u>	inue your application.
To log in you will need to enter in your email address (displayed when you first registered.) and the tok

After you select "CLICK HERE TO ACTIVATE YOUR ACCOUNT," a page will open that confirms project registration. Select "Proceed to Log In."

HELP	PRINT PAGE	REGIONAL ECONOMIC DEVELOPMENT COUNCILS	CFA PROJECT INFO
Ac	tivation Co	nfirmation	
	Your a	ccount is now active and you may log in.	
	Proceed to	Log In	

To sign in, an applicant must use the same email address they used when registering. Type the token provided at registration into the box. If you have more than one project, it is important to use the proper token number, so you don't start or revise the wrong application.

HELP	PRINT PAGE	REGIONAL ECONOMIC DEVELOPMENT COUNCILS CFA PROJECT INFO
		Applicant Log In
		Email:
		Token: Forgot Token?
		Log in

If you have forgotten your token, please click the "Forgot Token?" link. A message will appear instructing you to submit your e-mail address and application number. Once you submit your e-mail address and application number, you will receive an email that contains a link to reset your token. If you require further assistance a phone number is included in the e-mail to call for help with your token. This number can only be used for assistance with a forgotten token.

Technical Requirements

The Welcome screen explains the technical requirements for using the CFA website, including the type of browser that can be used, the ability to create PDFs, and the ability to select and upload files.

WELCOME

Technical Requirements

Use of the CFA website requires the following:



Proceed to Next Page

Starting your application

The CFA allows potential applicants options for beginning an application. The "Program Wizard" option is the traditional CFA process, where applicants that may not be aware of all the resources can choose categories and project types that align with the scope of their project. Returning applicants may know exactly which programs they want to apply for and can use the "Program List" button to easily choose the programs they want.

CONSOLIDATED FUNDING APPLICATION	
APPLICATION HELP PRINT LOG OUT REGIONAL ECON	IOMIC DEVELOPMENT COUNCILS CFA PROJECT INFO
Program Wizard	Program List
Choose project categories and types to help you decide which programs are right for your project's application	Choose programs by selecting from a list of programs organized by State Agency
Proceed to Program Wizard	Proceed to Program List

Select By Program List

NFPs seeking prequalification should select the Program List option and then add "2020 Census Not For Profit Qualification"

CONSOLID	ATED FL	JNDIN	G APPL	ICATION			
APPLICATION	HELP P	RINT	LOG OUT	REGIONAL ECONOM	IC DEVELOPMENT	COUNCILS	CFA PROJECT INFO
Application N	umber 97289						Application
PROGRAMS	LOCATION	QUESTIC	ONNAIRE	FUNDING REVIEW			is NOT FINALIZED
\checkmark							
PROGRA	MS						
Your App You potentially Add more p	Your applica or cancel yo lication's qualify for the programs belo	ition mus ur applic Progra following p	at have at lease ation and station ams programs:	east one associated prestart a new one.	rogram! You may re	əstart prograr	n selection,
All Other	Program	S					
	2020 Censi This progr	us Not for am is und	Profit Qualif	fication ion	Open Enrollment	ADD	

Navigating through the Application

You have the ability to navigate forward and backward through the application using the navigator at the top of every screen. To go to a specific section of the application, you hover over a section. The topics associated with the section will appear. By selecting the blue box that corresponds to the topic of interest, you will be redirected to that section of the application. As you progress through the application, completed sections are indicated by a green check mark.

Application Numb	er 38281					Application
PROGRAMS	LOCATION	DOCUMENTS	QUESTIONNAIRE	JOBS	FUNDING	is NOT FINALIZED
REVIEW						

Threshold Questions

You must answer one or more Threshold Questions to determine if you meet the minimum qualifications for the programs you have selected.

Threshol	d
2020 Censu	s Not for Profit Qualification
Q_11371 🗢 😳	Does the applicant currently target services to households with hard-to-count populations? (Yes/No, Q_11371, P_509) Threshold Valid Answer: Yes
	◎ Yes
Q_11333 O	Has the applicant operated as an incorporated Not for Profit 501(c)(3) continuously for at least one year? (Yes/No, Q_11333, P_509) Threshold Valid Answer: Yes Yes No
Q_11336 🗢 😳	Has the applicant, any of its current principals, executives, and/or board members, been debarred from contracting with the State of New York or the federal government during the last five years? (Yes/No, Q_11336, P_509) Threshold Valid Answer: No

Not-For-Profit Information

Information about your organization will be asked later in the application, please select proceed to the next page.

			NG APPL	ICATION REGIONAL ECONOMIC DEVELOPMENT COUNCILS	CFA PROJECT INFO
Application N PROGRAMS	umber 972	289 DN QUES	STIONNAIRE	FUNDING	Application is NOT FINALIZED
NOT-FOR	R-PROF		RMATION		
Not-For-P	Profit inform	ation is not i	necessary due t	o your associated programs. Please Proceed to Next Page.	
				Proceed	to Next Page

Region

Select the region within which your project is located. If your project is located within multiple regions, please select the region in which the majority of the project will take place.



Questionnaire

The application will save your answers each time you tab or click out of a question box. The time the answer is saved is listed to the right of the answer box. The Consolidated Funding Application has been updated to allow the use of conditional questions. This allows for multiple questions (child question) to be shown or hidden based on an applicant's answer selection made on a prior question (parent question). A red circle is displayed next to the required questions and a grey circle next to optional questions. You will not be able to submit your application until all required questions have been answered.

Application Number 62997	Application
PROGRAMS LOCATION DOCUMENTS QUESTIONNAIRE	JOBS FUNDING REVIEW
QUESTIONNAIRE	
Instructions	
To proceed with your application, please answer the following questions.	Legend
If your answers are lengthy, we recommend you type your answers into a word processor and paste them into the application so you will always have a copy of your answers. (Note: By design, most of the formatting you create with your word processor will be lost when you paste answers into the application.) Your answers will be automatically saved whenever you tab to the next question or when you click outside the answer box in which you are working. You may also click the "Save" button at the bottom of the screen to save your responses.	 the question has been answered an answer is required but has not been provided an answer is not required and has not been provided the answer is "restricted": The answer will only be shared with the state agency/authority that is required to review this application. the question and its answers are shared among multiple programs on this application <i>Disclaimer</i>

General Project Information	
inaut	
cant	Answer
Legal Name	Q_546 😄 😳
Applicant First Name	Q_5416 😋 🧔
Applicant Last Name	Q_5417 🗢 🚯
Street Address	Q_551 😋 😳
City	Q_552 😋 😳
State	Q_553 🥥 🔕
Zip Code (use ZIP+4 if known)	Q_554 😄 😳
Felephone Number (include area code)	Q_651 😄 🚯
Email Address	Q_555 😄 💿

	Primary Contact	Additional Contact
Salutation	Q_5257 ○ ④ Select ▼	Q_5493 O O Select V
First Name	Q_547 🗢 💿	Q_1052 🔿 🥥
Last Name	Q_1049 😋 🧔	Q_970 🔿 🥥
Title	Q_1050 🖨 💿	Q_1051 © ©
Organization	Q_5490 😋 🧔	Q_5492 🔿 🧔
Street Address	Q_3688 🗢 💿	Q_3693 🔿 💿
City	Q_3689 🗢 😒	Q_3694 🔿 🥥
State	Q_3690 🗢 🔕	Q_3695 🔿 🧿
ZIP Code	Q_3691 🗢 💿	Q_3696 🔿 🧔
Teleph <mark>one Numbe</mark> r	Q_562 😄 🔕	Q_3697 🗢 🧔
Email Address	Q_3692 🔿 📀	Q_561 😋 🥹

Standard Question

2020 Census Not for Profit Qualification

Please be ad registration a	ivised, for those not currently pre-qualified in the Grants Gateway system, the State reserves the right to require and pre-qualification in the Grants Gateway System.
Q_11358 🗢 🔯	Is the applicant pre-qualified in the Grants Gateway? © Yes © No
Q_11335 O	Is the applicant registered and up to date with the New York State Comptroller's VendRep System? \odot Yes $~$ \odot No
Q_11334 O	Is the applicant registered and up to date with all filings with the New York State Office of the Attorney General's Charities Bureau?
Q_11354 O	Please provide the applicant Federal ID number:
Q_11337 O	Has a PARENT company or Subsidiary company, any of its current principals, executives, and/or board members, been debarred from contracting with the state of New York or the federal government during the last five years?
Q_11338 O	Is the applicant a member of and/or played an active role in local complete count committee, or other census related efforts, in the communities where it expects to work on this initiative?
Q_11339 O 💿	Has the applicant contracted with the State of New York within the past five years? $\hfill Yes$ $\hfill No$

Q_11340 O	Has the applicant contracted with the county (or cities of Buffalo, Rochester, Syracuse, or Yonkers) where it proposes to provide census services within the past five years?
	◎ Yes ◎ No
Q_11341 🗢 😳	Does the applicant provide direct service, either on a voluntary or funded basis, in the communities where they expect to work on this initiative?
	◎ Yes ◎ No
Q_11342 O	Does the applicant have the necessary cultural competency needed to have meaningful engagement with the community where it expects to work on this initiative?
	O Yes O No
Q_11343 🗢 🔅	Has the applicant previously provided census outreach services?
	O Yes O No
Q_11344 🗢 🔅	Does the applicant have employees or otherwise the ability to speak, read, and write in relevant languages?
	© Yes ◎ No
Q_11346 🗢 🧔	Does the applicant have significant experience with other community engagement/volunteer-driven efforts? (For example, anti-hunger drives, literacy and language assistance programs, environmental movements, charitable campaigns, etc.)
	© Yes ◎ No
Q_11347 🗢 🧔	Please check the name of each county the applicant currently provides services to:
	Albany Allegany Bronx Broome Cattaraugus Cayuga Chautauqua Ctrl-click to select multiple choices

Q_11348	What county or counties is the applicant willing and able to provide services in? Check all that apply.
-	Albany Allegany Bronx Broome Cattaraugus Cayuga Chautauqua ▼ Ctrl-click to select multiple choices
Q_11350	Check each hard-to-count population to which the applicant currently provides services (check all that apply):
	 Black Hispanic Asian Native American Foreign Born Children Under 5 Below Poverty Line Single Parent Renter-occupied Aged 65 or over Limited English-Speaking Household with dial-up/no internet Veterans Faith Based
	 None Other (please specify)
Q_11351 © Ø	None Other (please specify)
Q_11351 © Ø	None Other (please specify) If you selected "Other" to providing services to households with hard-to-count populations please explain: max characters: no max
Q_11351 Ə	None Other (please specify) If you selected "Other" to providing services to households with hard-to-count populations please explain: max characters: no max
Q_11351	Integer min value: 0 Integer min value: 0 Integer min value: 0
Q_11351 Q_11356 Q_11356 Q_11411 Q_11411 Q_11411	Planting and the specify of the specify of the specific specif
Q_11351 Q_11356 Q_11411 Q_11411 Q_11411	Plann-Date Other (please specify) If you selected "Other" to providing services to households with hard-to-count populations please explain:

Q_11357 🗢 👳	Please indicate the number of individuals the applicant expects to successfully get counted through this initiative:
Q 11412	Please provide an explanation on your approach to reaching the number of individuals expected to be counted in the
• •	previous question:
	max characters: no max

Certification

The application includes a certification section where you verify your information by entering your name in the box.

Certificat	ion	
Q_1038 O	By entering your name in the box below, you certify that you are authorized on behalf of the governing body to submit this application. You further certify that all of the information con and in all statements, data and supporting documents which have been made or furnished receiving assistance for the project described in this application, are true, correct and comp knowledge and belief. You acknowledge that offering a written instrument knowing that the contains a false statement or false information, with the intent to defraud the State or any p public authority or public benefit corporation of the State, with the knowledge or belief that recorded by the State or any political subdivision, public authority or public benefit corporation, public authority or public benefit corporation.	applicant and its tained in this Application for the purpose of olete to the best of your written instrument olitical subdivision, it will be filed with or tion of the State,
	characters: 400	max

Project Funding

NFPs do not need to provide information for the Project Funding Section. Please select "Save & Proceed with Application" button.

Application Number 97289	Application
PROGRAMS LOCATION QUESTIONNAIRE FUNDING REVIEW	is NOT FINALIZED
PROJECT FUNDING	
Instructions	
The following section will collect information regarding your project's cost and funding. Please follow the instructions associa section below.	ted with each
No funding or budget answers necessary due to your associated programs.	
Save & Proceed with App	olication

Review – Select Location

Certain location questions have been removed from this application intentionally. The next section will ask you to pinpoint a correct location. Please place a pin at the location of the home office to complete this section and then click on the button to accept the coordinates.

Select Location						
We are unable to find th and update the address	e latitude and longitude for . F you have entered.	Please use the map below	to pinpoint the correc	t location or return to t	he Locatio	n tab
Use the mouse scroll wh If you have already pin p "Click Here to Accept "	neel, or the + and - buttons, to pointed a location you may fin These Coordinates'' button t	o zoom in and out. A SINGL alize at the bottom of the p to update your new location	E mouse click will ch age or you may choo 1.	oose a pin point. se a new pin point an	d then click	the
Lake Huron	n Sound		Brockville			GRE
	Barrie Lake 9 Simcoe	Peterborough Belleville	Kingston	Adi	rend æk Park	M
Goderich	Vaughan o o o O Brampton o o Toronto	shawa Lake Ontario	13/2	ADIRONDACK MOU	NTAINS	
Kitche	ner Oakville Mississauga Hamilton St Catharines	Rochester		lines		
arnia Condon	Brantford Niagara	uffalo	Syracuse	NEW YORK Monawe		Green Nountai National Forest
Chatham	S D.				Albany	
Lake Erle			550	uene		

ou have selected the	following coordina	tes from the ma	ap below: Latitude: 47	2.646208 Longitude: -73	3.754816		
Click Here to	Accept The	se Coordin	ates				
ake Haron	al	Sec.			/	-	1
+ 0w	an Sound	Onlita		Brockville			GRE
	barrie	Lake F	Peterborough	Kingston	Ad	Park Park	М
			P. 7	6 Kala			VER
Goderich	Vaughan	Markham Oshav	wa	- / -	ADIRONDACK MO	UNTAINS	
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Kitsh	Oakvilleo Hamilto	Alississauga					
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Lake Er	le				Ausham		
-	Erie			Binghamton	Delation	11 - 6	
/				Esri, HERE, Garmin, I	FAO, NOAA, USGS, EF	PA. NPS	S

Review

Once you answer all the questions on your application, select the Save and Proceed button at the bottom of the screen. If you did not answer required questions, a red circle will display next to the questions section. You must go back and complete the required questions before you can finalize and submit your application.

Applica	ation Number 6299	7						Application
PRO	GRAMS LOCA	▲TION	DOCUMENTS	QUESTIONNAIRE	JOBS	₽ FUNDING	REVIEW	is NOT FINALIZED
REVI	EW						V	
Final	ization Check	list						
0	Programs			Complete! • NYSERDA Energy Efficien	cy Projects			
0	Not-For-Prof	it	(Complete!				
0	Location		(Complete!				
0	Documents		(Complete!				
•	Questionnair	е		There are 42 remaining completed.	required q	uestions that r	need to be	
0	Jobs		(Complete!				
0	Funding & B	udget	(Complete!				
Appli	ication Finaliz	ation						
	You have n	ot comp	bleted 1 area. Ple	ase use the links abo	ove to retu	rn to the inco	omplete area	L

PROG		RE FUNDING REVIEW	Application is NOT FINALIZED
REVI	EW	\checkmark	
inal	ization Checklist		
0	Programs	• 2020 Census Not for Profit Qualification	
0	Not-For-Profit	Complete!	
0	Location	Complete!	
0	Questionnaire	Complete!	
0	Funding & Budget	Complete!	
Pleas pplication ne N.Y. oformation	Se Acknowledge tions to the State, including their accord Public Officer Law. FOIL provides that tion that, if disclosed, would cause sub tion. All efforts should be made to provide Note: By clicking the button below you will	npanying documents, are subject to the Freedom of Information t certain records are exempt from disclosure, including those tha istantial injury to the competitive position of your organization, or ide such Information in the questions marked "restricted".	Law (FOIL) found in Article 6 of t contain (1) trade secrets, (2) (3) critical infrastructure
riease N		no longer be able to modify or amend your application.	

To finalize and submit your application, you need to click the dark blue button labeled "By Clicking here...." at the bottom of the screen. After you finalize and submit your application, it cannot be modified or amended. If you have any technical issues with your application, you may e-mail <u>CFA-Tech@ny.gov</u>. All program related questions should be referred to NFPqualification@Census2020grant.ny.gov

This application is finalized. You may review but not make any changes Image: Strain	PROGRAMS	LOCATION	QUESTIONNAIRE	FUNDING	REVIEW		is Finali
Thank you for using the Consolidated Funding Application. Your application has been submitted and will be evaluated for possible funding.					This application is finalized	You may review but r	not make any changes

After you submit your application, you will receive a thank you message as well as an e-mail message that acknowledges receipt of your application. You will still be able to login using your registered e-mail address and token to review your finalized application, print, or start a new application for a new project.