Instructions

Grantors are requested to submit this form to Grants.gov when you submit the initial document at Federal Register with information you have at the time. You can submit this updated form once your requirements are ready. Grants.gov form development will begin once you provide complete requirements. Please submit this form for each new or modified form.

For New Form, please complete all applicable sections. For Modified Form, please complete sections by specifying requested changes. Please be as specific and accurate as possible. Errors and changes to requirements outlined can significantly delay the forms development process. Grants.gov encourages you to provide visual mock-ups of their requested new and modified forms. Multiple attachments may be submitted, including form illustrations that are hand-drawn.

1. Contact Information   Date Submitted:

1.1 *Requesting Agency/Sub-Agency:

1.2 *Point Of Contact:

1.3 *Phone Number: 1.3.1 Extension:

1.4 Email Address:

2. Form Request Details

2.1 *Request Type: ☐ New Form   ☐ Modification to an existing form   2.1.1 Proposed Version #:

2.2 *Brief Summary of Changes:

2.3 *Form Name:

2.4 *Has the form been approved by OMB?   ☐ Yes   ☐ No

If Yes: 2.4.1 OMB Control Number: 2.4.2 OMB Expiration Date:

If No: 2.4.3 Estimated OMB Clearance Date:

2.5 *Estimated date of Production usage for this updated form:

2.6 Federal Registration Citation Number   60 days: 30 days:

2.7 Pick form family/families to which this form belongs (select all that apply):

☐ SF-424   ☐ R&R   ☐ SF-424 Mandatory   ☐ SF-424 Short Organization   ☐ SF-424 Individual

Form Requirements

3. Form Mock-up and Burden Statement

    3.1 Form Mock-up

    3.2 Burden Statement

4. * Form Instructions (Please use the following template to create detailed form instructions, then attach using Add Attachments button: https://www.grants.gov/documents/19/217976/Federal_Agency_Form_Instructions_Template.docx)

5. Other Related Forms

6. Potential Use by Other Agencies/Sub Agencies

Form Requirements

7. Form Details

	a. Field Label Name	b. Min Length/ Value	c. Max Length/ Value	d. Required	e. Help Tip	f. Business Rules/ Comments
10	ex: Federal Award Identifier	0	25	☐	Enter the award number previously assigned by the Federal agency, if any.	Required if ApplicationType = Continuation, or Revision
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8. Additional Business Rules *(ex. 'Hide section 3, 4, and 5 when Applicant Type is Individual')*

9. General Information