THE NEW YORK STATE PROGRAM FOR THE CONSERVATION AND PRESERVATION OF LIBRARY RESEARCH MATERIALS

The Discretionary Grant Application Process

The New York State Program for the Conservation and Preservation of Library Research Materials

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https://www.nysl.nysed.gov/libdev/cp/index.html

ELIGIBILITY

Eligible agencies include those that have been:

- Chartered by the Board of Regents of the State of New York; OR
- accepted by the Board of Regents for filing under not-for-profit sections (section 216) of the Education Law; OR
- registered with the office of Charities of the New York State Department of State; OR
- □ granted not-for-profit status under section 501(c)(3) of the United States Internal Revenue code.

NOT ELIGIBLE

- □The 11 designated comprehensive research libraries
- Institutions wholly or in part under the control of direction of any religious denomination, in which any denominational tenet of doctrine is taught, are constitutionally ineligible to receive State financial assistance.
- New York State agencies and collections which are part of State agencies, including New York State Historic Sites. However, State University of New York (SUNY) colleges are eligible to receive discretionary grant funds.

Eligible Expenditures

Expenditures may include:

- personnel costs
- service and consultant contracts
- supplies and equipment for project activities, or other activities

All expenditures of discretionary grant funds, whether for personnel, contracted services, supplies, equipment, or others, must be for preservation activities described under FUNDABLE ACTIVITIES

Ineligible Expenditures

Funds will not be awarded for activities or expenditures judged to be the ordinary responsibility of the institution. These activities include (among others):

- General operating expenses, indirect costs or overhead charges
- the acquisition of library research materials in any format, either to add to the collection or to replace deteriorated materials by purchase of reprints or microforms
- capital expenditures for building construction or modification
- providing standard library shelving
- physical processing
- basic disaster planning
- microform readers
- computer equipment
- basic security measures such as burglar alarms, locks, fire extinguishers, etc.
- salaries and/or benefits for existing personnel

Planning & Screening

Includes:

- Item level surveys
- DHPSNY.ORG

Does **NOT** Include:

Initial preservation planning

Environmental Controls & Storage

Includes:

- Upgrading mechanical HVAC
- Special shelving or storage furnishings

Does **NOT** include:

- Stop-gap measures
- Standard library shelving

Reformatting-Microforms

Includes:

- Preservation quality microfilm
- Preservation quality microfiche
- Color microforms

Does **NOT** include:

Microform readers or readers/printers

Reformatting- Non-microforms

Includes:

- Photographic negative duplication
- Copy prints of photographic images
- Sound recordings
- Photocopying (sometimes)

Does **NOT** include:

- Digitization
- Video tapes
- Cassette tapes
- Photocopying (usually)

Physical Treatment

Includes:

- Collection cleaning projects
- Protective enclosures
- Rebinding, minor repairs & mending
- Major conservation treatments

Does **NOT** include:

- Basic housekeeping
- Physical processing
- Learning-by-doing projects

Bibliographic Activities

Includes:

Limited to 10% of the grant award

 Only when closely connected to preservation work itself

Other Fundable Activities

Includes:

- Disaster recovery
- Research
- Specialized training
- Preservation Informational materials

Does **NOT** include:

- Preparing disaster plans
- Purchasing emergency supplies
- Exhibitions
- Publishing guides or catalogs

- To facilitate prompt contracting, not-for-profit applicants are required to register in the Statewide Financial System (SFS) and complete the Vendor Prequalification process for proposals to be evaluated.
 - Exemptions- government agencies, SUNYs/CUNYs, public libraries
- The prequalification process <u>must</u> be completed by the application deadline.
- Start early! The prequalification process can take several weeks.
- Even if you have prequalified in the past, certain documents need to be submitted yearly to maintain your status.

- Grants Management's website (https://grantsmanagement.ny.gov)
 has various resources available to assist you in the registration &
 prequalification process
- Live vendor support calls will be held weekly to discuss questions grantees have based on their use of SFS for grants management activities and to share any relevant reminders, tips, or known issues.
 - 10/2/24 11am-12pm
 - 10/9/24 11am-12pm
 - 10/16/24 11am-12pm

Help Desk- helpdesk@sfs.ny.gov

 518-457-7717
 855-233-8363

- Register in the Statewide Financial System
 - On the Grants Management Website, download a copy of the <u>Registration Form for SFS Vendors</u>. This form will need to be notarized. <u>Instructions</u>
 - If you do not have a SFS Vendor Id yet, be sure to also submit a <u>Substitute W-9</u> and one will be assigned.
 - Completed forms are sent to grantsreform@its.ny.gov

- Get Prequalified Resources
- Login to SFS.
- Complete the <u>prequalification application</u> and upload required documents
- Once a complete application and required documents are submitted a Prequalification Specialist will review and make a determination.
 Notifications will be sent via email. Make sure contact info is up to date.
- Prequalification questions may be sent to <u>prequal@nysed.gov</u>

APPLICATION

APPLICATION

Conservation/Preservation Discretionary Applications are now online

https://eservices.nysed.gov/LDGrants

You must have a NYSDS username and password to login!

https://eservices.nysed.gov/ldgrants/ldgext/diRegistration.do

Register for username and password

- Fill out your name, contact information, and institution information.
- Your account will have access to C/P
 Discretionary grants only for the institution you specify.
- Account information will be sent via email within 48 hours.

Register Early!!!!!

https://www.nysl.nysed.gov/libdev/cp/index.html

The New York State Program for the Conservation and Preservation of Library Research Materials

Announcement

The 2024-2025 Conservation Preservation Discretionary Grant application cycle is now open. The due date for applications is 5 PM Friday, January 12th, 2024.

The Conservation/Preservation Program provides State funding for libraries and other organizations engaged in efforts to preserve deteriorating library research materials. The program was established as part of the landmark 1984 library legislation and was expanded in 1986 and 1990. [SEE: Education Law, Section 273.7] It is administered by the New York State Library's Division of Library Development.

The purposes of the Conservation/Preservation program are to encourage the proper care and accessibility of research materials, to promote the use and development of guidelines and technical standards for conservation/preservation work, and to support the growth of local and cooperative activities within the context of emerging national preservation programs.

https://www.nysl.nysed.gov/libdev/cp/index.html

The New York State Program for the Conservation and Preservation of Library Research Materials Discretionary Grant Program application is no longer issued in paper. For the 2024-2025 grant cycle, all applications must be submitted through our web-based application program. Please go to the Online Grant System Account Registration Form (opens in a new window) to register to receive a user name and password to access the online grant application system. You will need a user name and password to submit an application.

Conservation/Preservation Discretionary Grant Guidelines and Application

Master Contract for Grants (2024-2025)

Webinar: New York State's C/P and DHP Grants

Requirements

Please Note: New York State has implemented a prequalification requirement for not-for-profit entities applying for grants. Proposals received from not-for-profit applicants that have not Registered and are not Prequalified in the Grants Gateway on the proposal due date of 5:00 PM on 1/12/24 cannot be evaluated. Such proposals will be disqualified from further consideration. Even if you have prequalified in the past please be sure you have completed the necessary steps to maintain a Prequalified Status.

Prequalification requirement information and instructions

All applicants are required to comply with NYSED's <u>Minority and Women-Owned Business Enterprises (M/WBE) participation goals</u> of for this grant. (Applications for grant funding that exceed \$25,000 for the full grant period.)

M/WBE Instructions

Complete Registration Form

New York State Library

Division of Library Development

Online Grant Sytem Account Registration Form

In order to apply for the Division of Libras Grant System, you <u>must</u> have a NYS Dire the form below to register for an account.	ectory Service account. If you		
If you already have a NYS Directory Ser- Login to Online Grant System	vice account, proceed to the	Online Grant System.	
	Register for a NYS Direct	ory Service account	
Fields marked with an (*) are required.			
*First Name			
*Last Name			
*Title			
An email will be sent to the Work Email li	sted below containing the acc	ount name/password for the Onlin	e Grant System.
*Work Email			
*Work Phone			
*Institution Name			
Library/Archive Name			
*Institution Address			

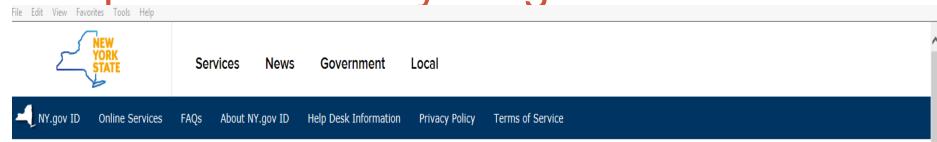
Complete Registration Form

	ļ
*Institution Address	
Address Line 2	
*City	
*State	
*Zip Code	
Enter the county, school district, and Federal ID of the	institution you represent. If unknown, enter N/A in the corresponding box.
County	
School District	
Federal ID Number	
Should this account have read edit or submit access to	online grant applications?
□Read □Edit Rea	\mathbf{d}
Culouit	
Reset Submit Edi	t
Sub	mit

If you have any questions regarding the C/P Discretionary grant program please contact the Conservation/Preservation Program Administrator Barbara Lilley at blilley@mail.nysed.gov or 518-486-4864.

Go to the Conservation/Preservation Program page | Go to Library Development home page

https://eservices.nysed.gov/LDGrants

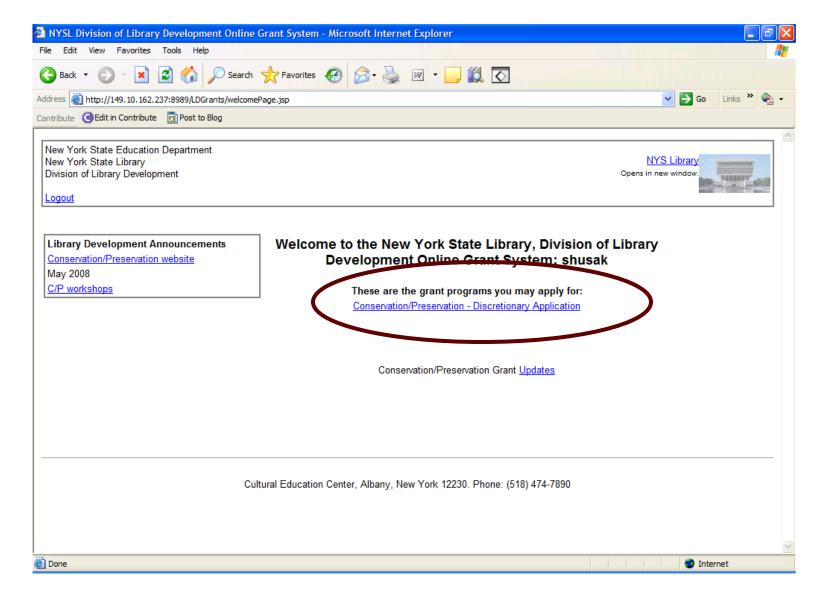


Login Page



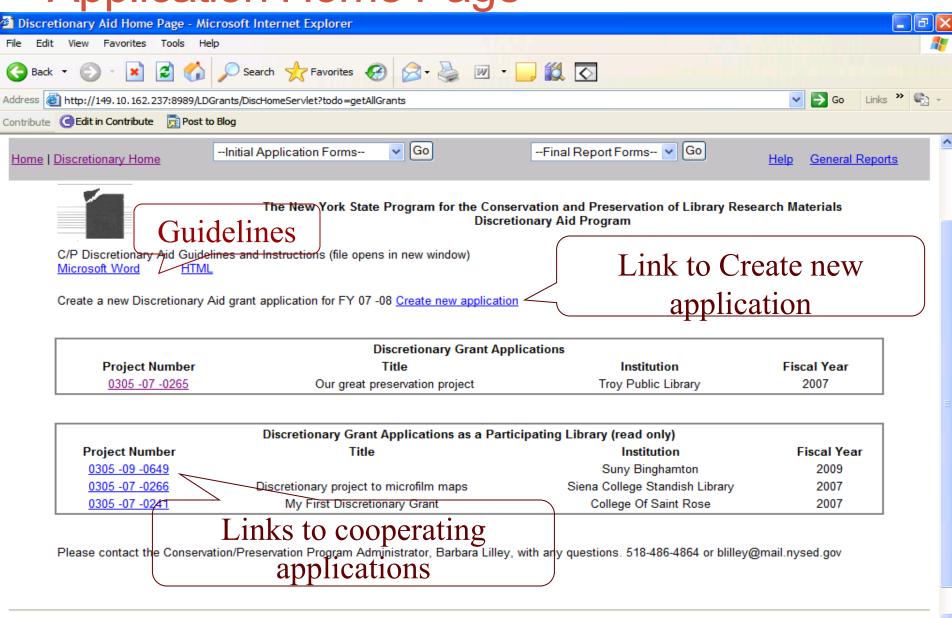
Agency Assistance & Contact Information

Choose a Grant Program



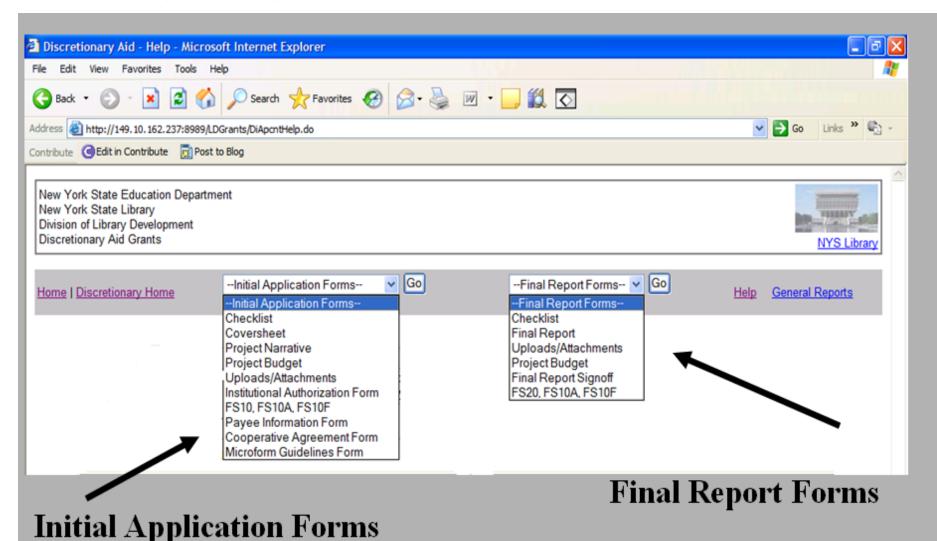
Application Home Page

Done



Internet

Navigating the Online Application



CHECKLIST

Initial Application Checklist

Home | Discretionary Home

--hitial Application Forms-
Go

Help

General Reports

Checklist

Warning: The due date (11/03/2017) for this application has expired. You may not submit a new application for this fiscal year.

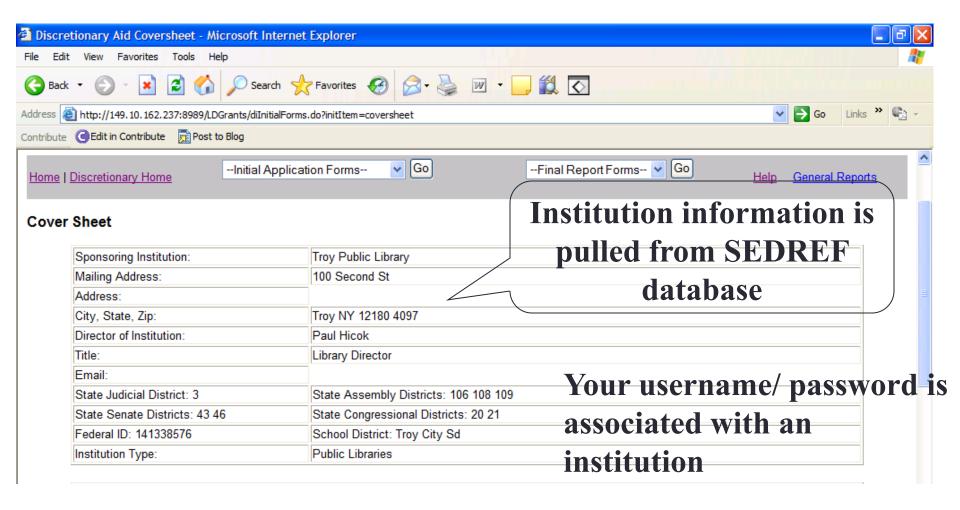
Application Checklist				
Project Number	0305 -19 -7357			
□ <u>Coversheet</u>				
☐ <u>Project Narrative</u>				
□ <u>Project Budget</u>				
☐ <u>Institutional Authorization Form</u>				
☐ <u>FS-10 Form</u> 3 original FS-10 Forms must be completed and mailed				
Attachments/Uploads				
Payee Information Form				
Cooperative Agreement Form (if applicable)				
Microform Guidelines Form (if applicable)				
NEW: (REQUIRED) Prequalification requirement for not-for-profit entities applying	for grants			
NEW: (REQUIRED) M/WBE Requirement - only for an application for grant funding	that exceeds \$25,000 for the full grant period.			
O Not Applicable				
Full Participation				
O Partial Participation, Partial Request for Waiver				
No Participation, Request for Complete Waiver				
Save Progress				
Submit				
Due Date for new applications: 11/03/2017				

Final Report Checklist

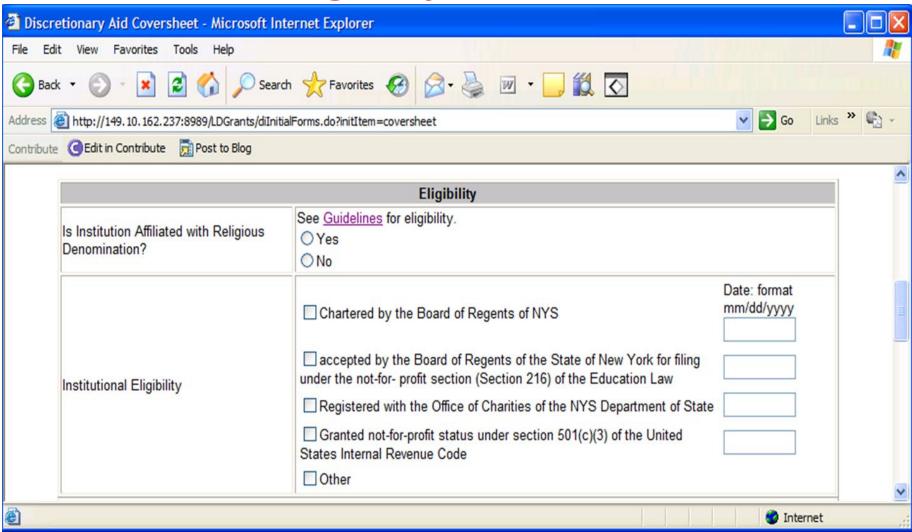
Final Report Checklist				
☐ Final Report Narrative				
☐ <u>Project Budget</u> (Expenses Submitted)				
☐ Final Report Sign-off				
☐ <u>FS-10-F Form</u> 3 original FS-10-F Forms must be completed and mailed				
Attachments/Uploads				
FS-10-A Form (Optional - 3 original FS-10-A Forms completed and mailed only if there is an amendment to the approved project budget)				
Save Progress				
Submit				
Due Date for final reports: 07/15/2019				
Links to print/save				
View Application Submission/Approvals View Reviewer Comment/Scores application				
Please use the following links to <i>print</i> or <i>save</i> your application to your desktop:				
Coversheet HTML Narratives HTML Budget HTML				
Coversheet PDF Narratives PDF Budget PDF				

COVERSHEET

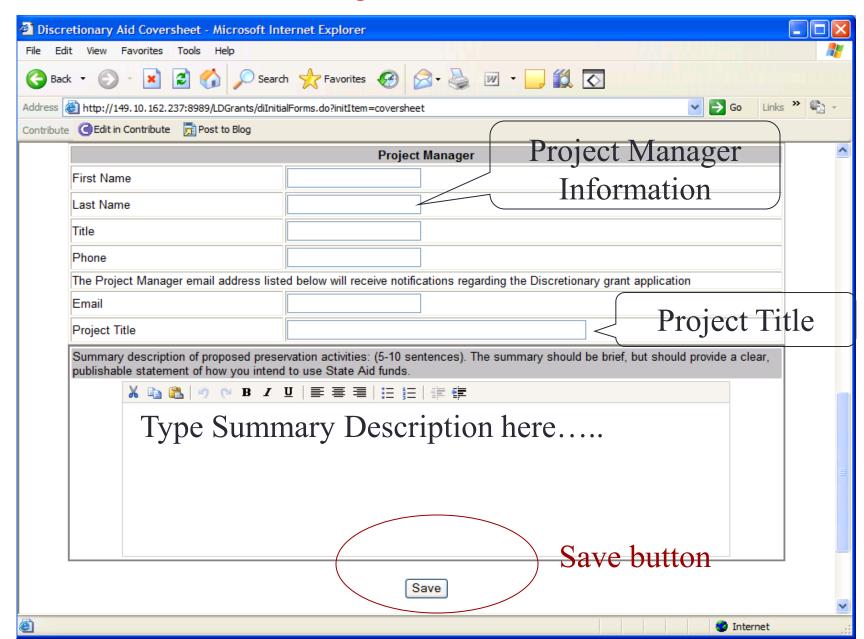
Coversheet



Coversheet- Religious Affiliation and Institutional Eligibility

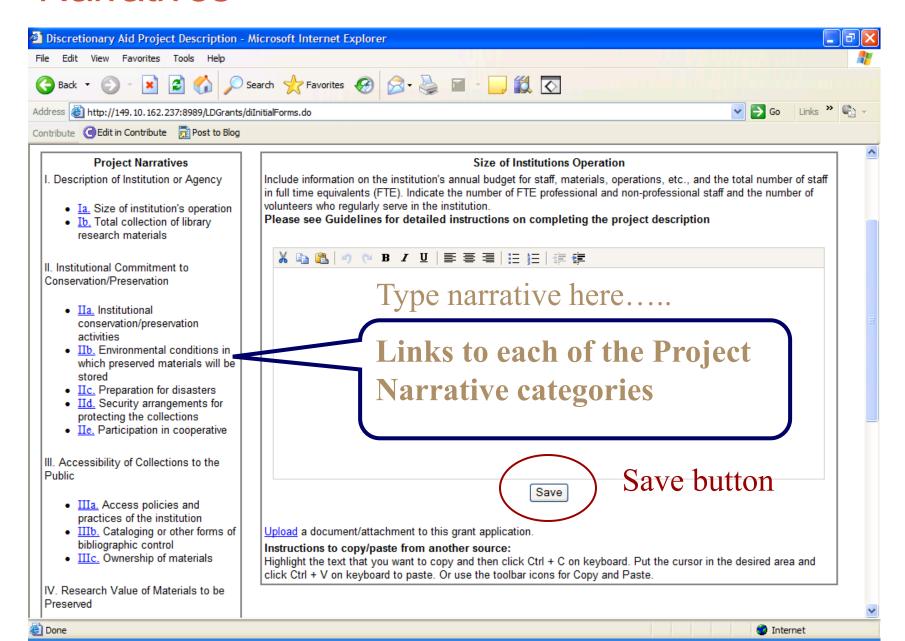


Coversheet-Project Information



NARRATIVES

Narratives



I. Description of Institution or Agency

A. Size of the institution's operation

Topics

□Annual budget

□ FTE staff

I. Description of Institution or Agency

B. The agency's total collection of library research materials

- □ Quantity of materials
- □ Types of materials
- □Collecting policy
- □Number of items acquired & amount expended in the last year
- □Other *relevant* background information

A. Institutional conservation/preservation activities

- □Current and long-range preservation plans
- □Surveys?
- □Institutional funding for preservation
- □Other sources of funding

B. Environmental conditions in which preserved materials will be stored

Topics

□Extent of existing controls

□Possibility or plans for improvement

c. Preparations for disaster

Topics

□Written disaster plan?

□Available resources

D. Security arrangements for protecting the collection

Topics

□Theft

□Mutilation

□Inappropriate use

E. Participation in cooperative or regional conservation/preservation activities

- □Cooperative projects
- ☐Shared cons/pres staff or facilities
- □Bibliographic databases
- □Participation in regional preservation activities

III. Accessibility of Collections to the Public

A. Access policies and practices of the institution

Topics

□Hours Open

□Number of patrons

□Items loaned or used on site

□Cooperative access programs

III. Accessibility of Collections to the Public

B. Cataloging or other forms of bibliographic control

- □Type of cataloging or arrangement
- □Use of regional or national databases
- ☐Use of other standard bibliographic resources

III. Accessibility of Collections to the Public

C. Ownership of materials

- □Owned by institution
- □Copy of deposit agreement

IV. Research Value of Materials To Be Preserved

A. Description of materials to be preserved with grant funds

- □Subject area or content
- □Format (books, mss, photos, maps, etc.)
- □Quantity of materials
- □Condition and specific preservation problems
- ☐Type of research for which materials are likely to be used

IV. Research Value of Materials To Be Preserved

B. Significance of materials for research

- □Relevance to the institution's collections
- □Demand for the materials by researchers
- □Short-term topical interest?
- □Long-term historic interest?
- □Scope of interest -- local, regional, national, or international
- □Informational value or artifactual value, or both?
- □Similar collections elsewhere?

V. Plan of Work

A. The timetable for the project

- □Beginning date
- ☐Hiring date and duration of work for new personnel
- □Schedules for existing staff
- □Contractual work schedules
- ☐Schedule for all other significant project activities

V. Plan of Work

B. Conservation/preservation activities to be carried out during the project

- □Work to be performed
- ☐Materials and techniques to be used
- □Vendor proposals and cost estimates

V. Plan of Work

C. Personnel and vendors involved in the project

- □Project manager
- □Personnel to be hired
- □Existing staff to be used
- □Consultants
- **□Vendors**
- □ Qualifications

VI. Institutional Contribution to the Project

A. Contributions of staff time

Topics

☐Time existing staff will spend directly on project activities

VI. Institutional Contribution to the Project

B. Financial contribution towards overall project costs

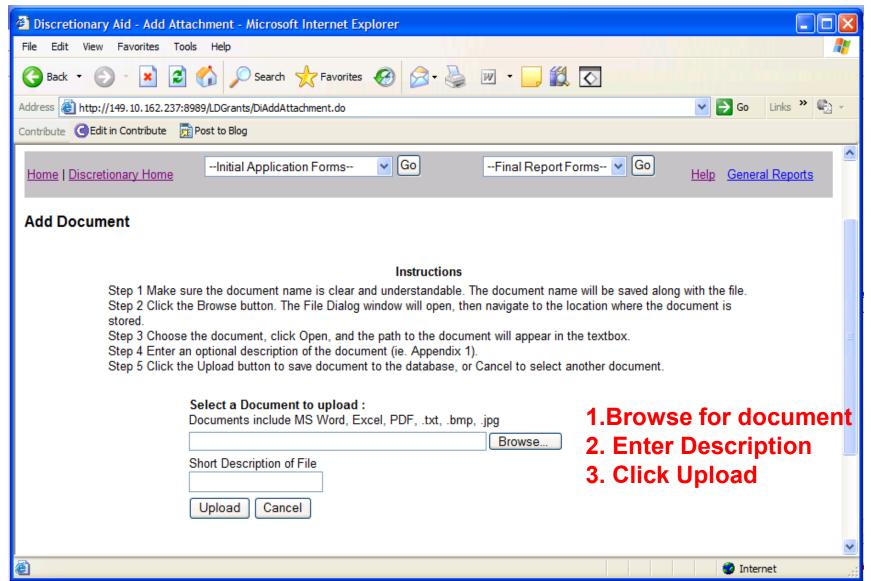
Topics

□Portion of total project budget to be provided by the institution

Documents/ Attachments

- Bids
- Resumes
- Institutional Authorization Form
- Final Report Signoff
- Microform Guidelines Form
- Cooperative Agreement Form
- MWBE Forms (over \$25,000)

Uploading Documents



BUDGET

BUDGET





Column B



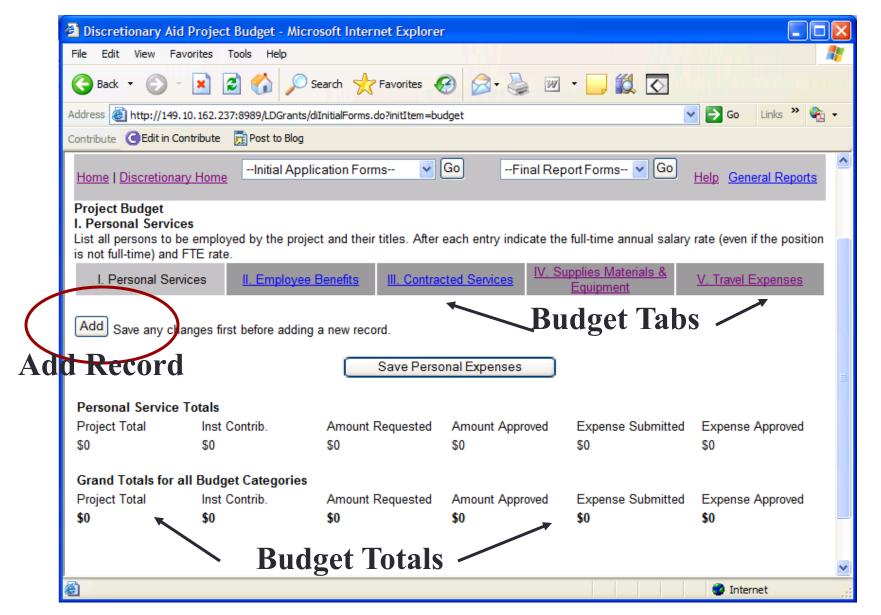
Institutional Contribution

Column C



Grant Request

Navigating the 5 Budget Tabs

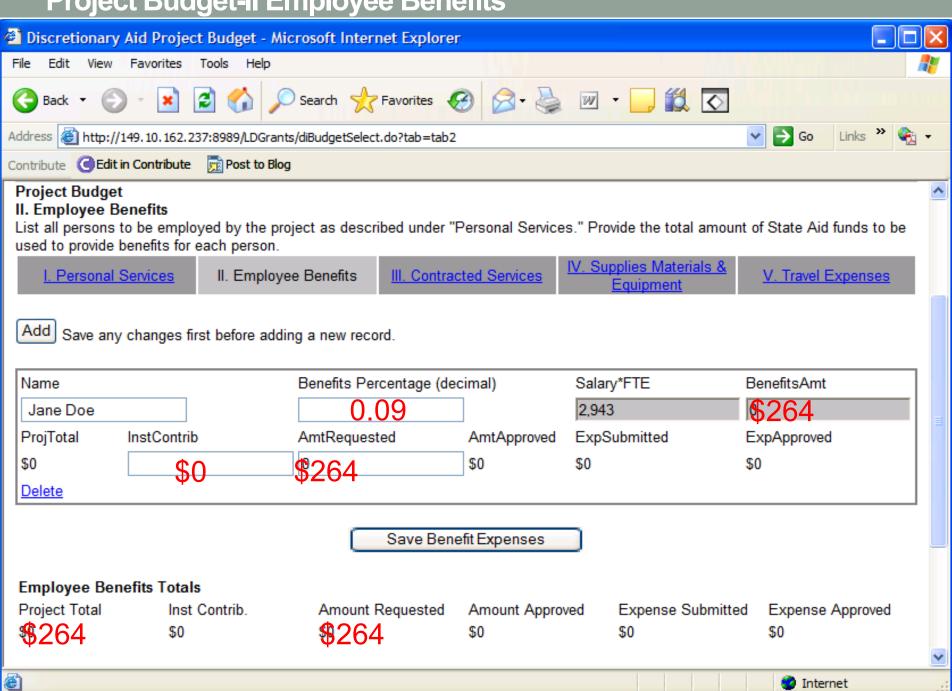


Project Budget- I Personal Services _ 0 Discretionary Aid Project Budget - Microsoft Internet Explorer Edit View Favorites Tools Help Search Favorites 🚱 🛜 - 💹 - 📆 🖸 Links » 🍖 🕶 → Go http://149.10.162.237:8989/LDGrants/diInitialForms.do?initItem=budget Contribute Contribute Post to Blog **Project Budget** I. Personal Services List all persons to be employed by the project and their titles. After each entry indicate the full-time annual salary rate (even if the position is not full-time) and FTE rate. IV. Supplies Materials & I. Personal Services II. Employee Benefits III. Contracted Services V. Travel Expenses Equipment Save any changes first before adding a new record. FTF/Hours Salary/Wage Salary*FTE or Wage*Hours Type Name Title ex 10 Jane Doe Director \$24.525 \$2.943 Professional > InstContrib ProjTotal AmtRequested AmtApproved ExpSubmitted ExpApproved \$0\$2,943 \$2,000 \$943 \$0 \$0 \$0 Delete FTE/Hours Salary/Wage Salary*FTE or Wage*Hours Type Name Title ex. 1.0 0 Professional > ProjTotal AmtRequested AmtApproved ExpSubmitted ExpApproved InstContrib \$0 0 \$0 \$0 \$0 <u>Delete</u> Save Personal Expenses Personal Service Totals Project Total Inst Contrib. Amount Requested Amount Approved Expense Submitted Expense Approved **\$**2.943 \$2,000 **\$\$943** \$0 \$0 \$0

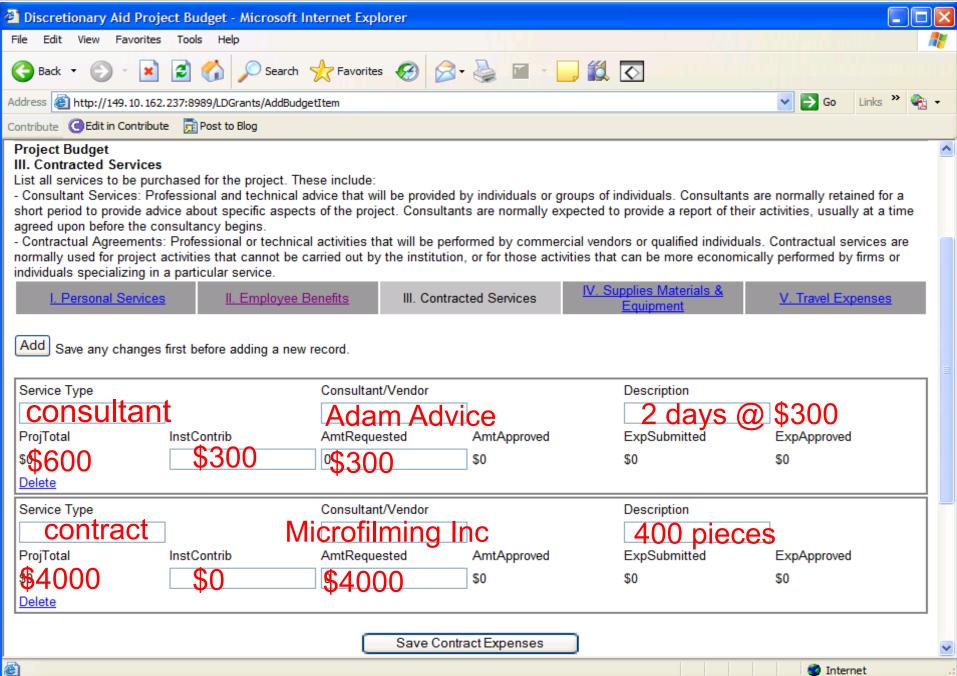
Internet

Done

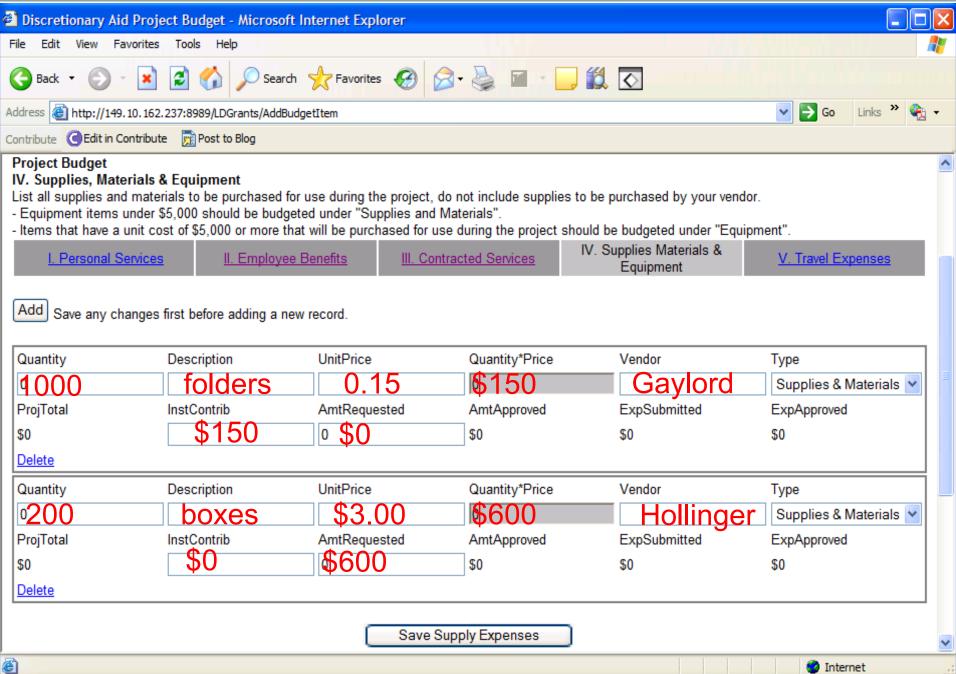
Project Budget-II Employee Benefits



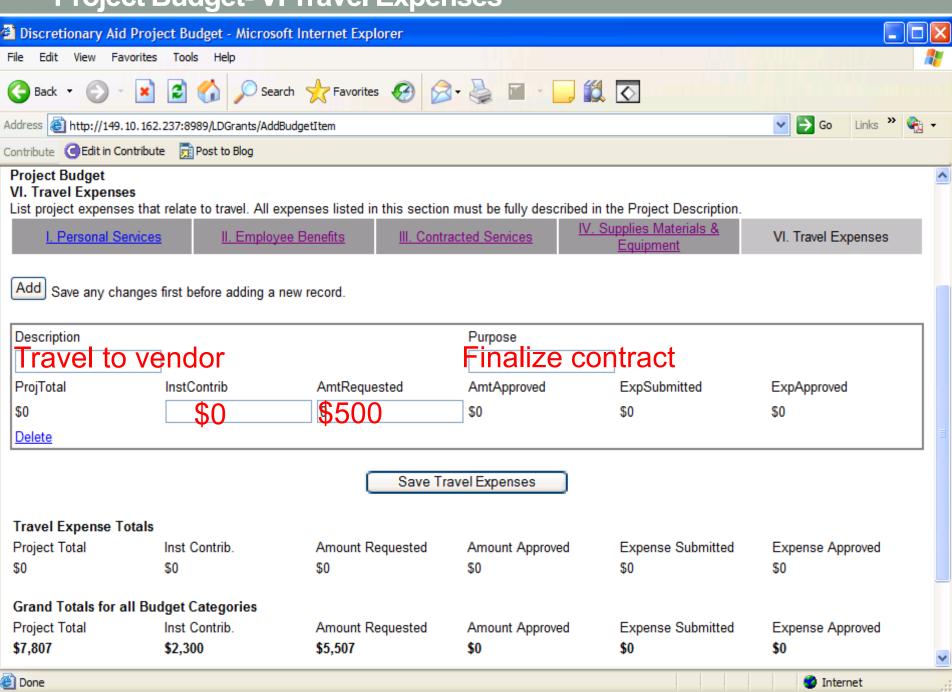
Project Budget-III Contracted Services



Project Budget-IV Supplies Materials & Equipment



Project Budget- VI Travel Expenses



Institutional Authorization Form

Institutional Authorization

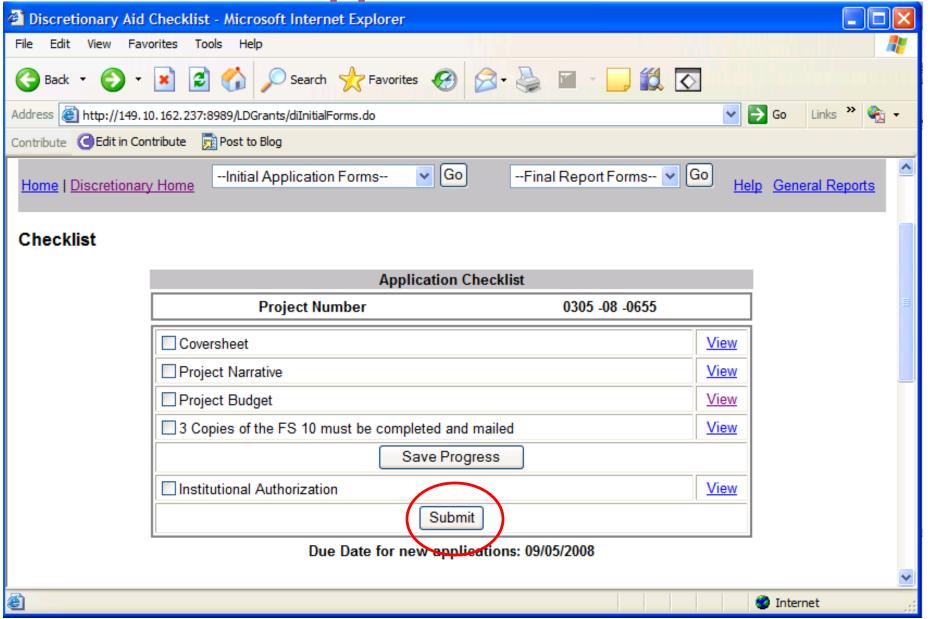
Conservation/Preservation Discretionary Grant Project				
hereby certify that I am the applicant's chief administrative officer and that the information contained in this application is, to the best of my knowledge, complete and accurate. I further certify on the best of my knowledge, that any ensuing program and activity will be conducted in accordance with all applicable Federal and State laws and regulations, application guidelines and instructions, Assurances, Certifications, the Master Grant Contract terms and conditions, and that the requested budget amounts are necessary for the implementation of this project. All materials whose preservation is supported by funds from the State are, or will be, made available for reference, on-site examination and/or loan. It is understood by the applicant that this application constitutes an offer and, if accepted by the NYS Education Department or renegotiated to acceptance, will form a binding agreement. It is also understood by the applicant that mmediate written notice will be provided to the grant program office if at any time the applicant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.				
Project Title:				
President of Applicant Institution				
signed	type name	date		
Director of Library/Archives	Print and Sign this Form			
signed	type name	date		

Instructions

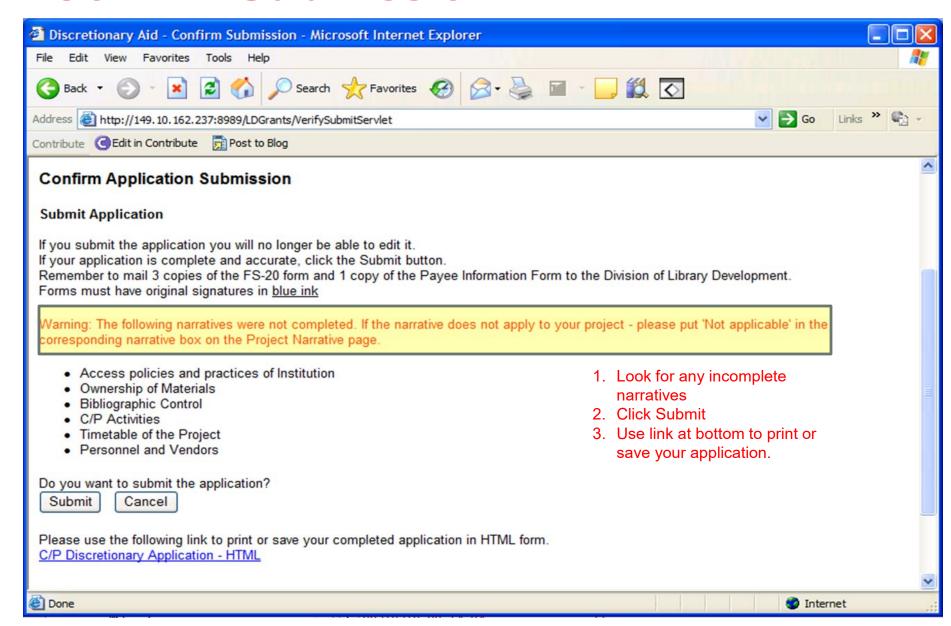
The Authorization Form must be printed and signed. Then scan the signed form and upload the form to your application as an attachment. Attach the form as a document/attachment to your grant application. Please put Institutional Authorization as the description for your attachment.

View PDF version of Institutional Authorization Form

Submit the Application



Confirm Submission



FS 10

FS-10 Coversheet

The University of the State of New York
THE STATE EDUCATION DEPARTMENT
(see instructions for mailing address)

FINAL EXPENDITURE FOR A FEDERAL OR STATE PROJECT FS-10-F Long Form (03/15)

Project Number: 0305 -17-1234

Local Agency Information			
	Conservation/Preserv	ation Discretionary Grants	
Funding Source:			
Fiscal Year	2016-2017		
Report Prepared I	Beatrice Bibliophile		
Agency Name:	Booktown Public Lik	orary	
	123 Main St		
Mailing Address City,State:	Booktown, NY 00011	_County: New York	
Telephone #	518-111-1234		
Email Address	bbiblio@booktownlibrary.org		

SALARIES FOR PROFESSIONAL STAFF: Code 15

Include only staff that are employees of the agency. Do not include consultants or per diem staff. Do not include central administrative staff that are considered to be indirect costs, e.g., business office staff. One full-time equivalent (FTE) equals one person working an entire week each week of the project. Express partial FTE's in decimals, e.g., a teacher working one day per week equals .2 FTE.

Specific Position Title	Full-Time Equivalent	Annualized Rate	Project Salary
		-	
		ubtotal - Code 15	

SALARIES FOR SUPPORT STAFF: Code 16

Include salaries for teacher aides, secretarial and clerical assistance, and for personnel in pupil transportation and building operation and maintenance. Do not include central administrative staff that are considered to be indirect costs, e.g., account clerks.

Specific Position Title	Full-Time Equivalent	Annualized Rate	Project Salary
C on servation Technician	•		\$ 5,000

PURCHASED SERVICES: Code 40

Include consultants (indicate per diem rate), rentals, tuition, and other contractual services. Copies of contracts may be requested by the State Education Department. Purchased Services from a BOCES, if other than applicant agency, should be budgeted under Purchased Services with BOCES, Code 49.

Description of	Provider of	C alculation	Proposed
I t e m	Services	of Cost	Expenditure
M icrofilm in g			\$ 4,000
Services, Inc.			
		Subtotal - Code 40	\$ 4,000

SUPPLIES AND MATERIALS: Code 45

Include computer software, library books and equipment items under \$5,000 per unit.

Description of Item	Quantity	Unit Cost	Proposed Expenditure
Archival document boxes	1	3.00	\$ 600
Photo negative envelopes	1	. 5 0	\$ 150
Neutral pH photo storage boxes	1	3.00	\$ 600
p H a s e b o x m a k e r	1	700	\$ 700

TRAVEL EXPENSES: Code 46

Include pupil transportation, conference costs and travel of staff between instructional sites. Specify agency approved mileage rate for travel by personal car or school-owned vehicle.

Position of Traveler	Destination and Purpose	Calculation of Cost	Proposed Expenditures
	•		-
	s	ubtotal - Code 46	

EMPLOYEE BENEFITS: Code 80

Rates used for project personnel m ust be the same as those used for other agency personnel.

B enefit		Proposed Expenditure
Social Security		
	New York State Teachers	
Retirement	New York State Employees	
	Other	
Health Insurance		
Worker's Compe	n sation	
Unem ployment In	surance	
Other (Identify)		
	Subtotal - Code 80	

C. (A) x (B) = Total Indirect Cost

FS-10 Page 5

Subtotal - Code 90

INDIRECT COST: Code 90

A. Direct Cost Base - Sum of all preceding subtotals (codes 15, 16, 40, 45, 46 and 80).	(A
B. Approved Restricted Indirect Cost Rate	(B

PURCHASED SERVICES WITH BOCES: Code 49

Description of Services	Name of BOCES	Calculation of Cost	Proposed Expenditure

MINOR REMODELING: Code 30

A llow able costs include salaries, associated employee benefits, purchased services, and supplies and materials related to alterations to existing sites.

Description of Work To be Performed	Calculation of Cost	Proposed Expenditure

EQUIPMENT: Code 20

All equipment to be purchased in support of this project with a unit cost of \$5,000 or more should be itemized in this category. Equipment items under 5,000 should be budgeted under Supplies and Materials, Code 45. Repairs of equipment should be budgeted under Purchased Services, Code 40.

Description of Item	Quantity	Unit Cost	Proposed Expenditure
	S	ubtotal – Code 20	

Helpful Reminders

- Check for the required number of copies to be submitted, including the number of original signature copies. The number of copies may vary from program to program. If unsure, contact the State Education Department office responsible for the program for which you are applying.
- An approved copy of the FS-10 will be returned to the contact person at the address completed on page 1. A window envelope will be used for the return mailing; please make sure that the contact information is accurate, legible, and confined to the address field.
- Be sure to check your math and carry all subtotals forward to the Summary on Page 8. Simple mathematical errors often require Grants Finance to contact both the local agency and other State Education Department offices, resulting in unnecessary delays in program approval. And remember, use whole dollars only.
- School districts and BOCES should use the restricted indirect cost rate that has been approved for the school year in which the grant will operate. Most other agencies are subject to a fixed maximum rate depending on the grant program and type of agency. Contact Grants Finance at (518) 474-4815 if you have any questions regarding indirect costs.
- The modified direct cost used in the calculation of indirect cost must exclude equipment, minor remodeling, the portion of each subcontract exceeding \$25,000 and any flow through funds.
- Only equipment items with a unit cost of \$5,000 or more should be included under Equipment, Code 20.
- Be sure to complete the Agency Code and Project # on Page 8 as well as the Project #, if pre-assigned. For Special Legislative projects and Grant Contracts, also enter the Contract #.
- For ease of data entry at the State Education Department, please make sure that Page 8 faces out. Submit forms to the State Education Department Program Office as indicated in the application instructions for the grant program for which you are applying. DO NOT submit this form to the Grants Finance Unit.

BUDGET SUMMARY

			•					
CATEGORIES	CODE	PROJECT COSTS	Agency Code 00000000000					
Professional Salaries	15	\$0.00	Project # 030			0305 -1	305 -17 -1234	
Support Staff Salaries	16	\$5,000.00	Contract #					
Purchased Services	40	\$4,000.00	Federal Employer ID#					
Supplies and Materials	45	\$2050.00	(New non-municipal agencies only)					
Travel Expenses	46	\$0.00	Agency Name Booktown P			wn Public Library		
Employee Benefits	80	\$0.00		For I)epartment U	Jse Only		
BOCES Services	49	\$0.00	Funding Dates: 07/01/2016				06/30/2017	
Minor Remodeling	30	\$0.00						
Equipment	20	\$0.00			From		То	
Grand Total		\$11,050.00	D					
			Program Approval:				·	
			Date:					
CHIEF ADMIN	NISTRATOR'S	CERTIFICATION	Fiscal Year	A	mount Budg	eted	First Payment	
(II)	_	of my knowledge and belief						
that the report is true, complete, and accurate, and the expenditures,		_						
disbursements, and cash receipts are for the purposes and objectives set								
forth in the terms and conditions of the Federal (or State) award. I am aware that any false, fictitious, or fraudulent information, or the								
omission of any material fact, may subject me to criminal, civil, or								
administrative penalties fo								
otherwise. (U.S. Code Titl)1 and Title 31, Sections						
3729-3730 and 3801-3812	2).							
			Voucher#	First I	Payment			
Date Sig	nature							
Name and Ti			Log	Appro	oved		MIR	
	tle of Chief Admi	nistrative Officer	208	PP			: {	
	tle of Chief Admi	nistrative Officer		PP				

Payee Information Form



THE STATE EDUCATION DEPARTMENT / THE UNIVERSITY OF THE STATE OF NEW YORK / ALBANY, NY 12234

(02/22)

PAYEE INFORMATION

In order to receive funds from the NYS Education Department, <u>ALL SECTIONS</u> of the <u>Payee Information/PI Form AND</u> of the <u>NYSED Substitute W-9 Form</u> (required only if your agency does not have/know its NYS Vendor Identification Number) will need to be completed and returned with <u>original signature(s)</u> to the Education Department program office to which your agency's grant application was sent.

Please print or type all information

Section I: Institution Identifying Information Exact Legal Name of Agency	Contact Person/Name & E-mail Address
Federal Employer Identification Number (FEIN):	
NYS Vendor Identification Number:***	
Federal System for Award Management/SAM (Please must maintain a CURRENT registration) in order to be	se note that your agency MUST be registered in SAM (& awarded federal funds.)
(1) Unique Entity Identifier (UEI) registered in SAM (2) Expiration Date on SAM:	r:

*** If you do not know your agency's NYS Vendor Identification Number, follow the specific instructions under Section I(c).

Payee Information Form

*** If you do not know your agency's NYS Vendor Identification Number, follow the specific instructions under Section I(c).					
Section II: Agency	y Profile				
1. This agency is a (c	check one) Non-Prof	fit Organization	For Profit Organization		
2. This agency is a (c	check one) Sectaria	n Organization	Non-sectarian Organization		
3. Is this agency cha	rtered or incorporated by the N	New York State Boa	ard of Regents? (Check one) 🗌 Yes	No	
Section III: Certification III: I hereby certify that the		d is to the best of i	my knowledge both accurate and true.		
Chief Administrative	e Agency Official/Authorized D	esignee (Please I	Print)		
	Title				
Signature - Chief	Administrative Agency Officia	I/Authorized Desig	jnee Date	_	

M/WBE

- All applications for funding over \$25,000 are subject to M/WBE requirements. (https://www.nysl.nysed.gov/libdev/mwbe/index.html)
- Current M/WBE requirements are 30% of non-personal service budget. M/WBE
 <u>Certified Directory</u>
 (https://ny.newnycontracts.com/FrontEnd/searchcertifieddirectory.asp)
- Compliance can be achieved in 1 of 3 ways
 - Full Participation
 - Request a Partial Waiver
 - Request a Full Waiver
 - (Good faith efforts to find applicable M/WBE vendors or suppliers must be documented when requesting either a partial or full waiver)
- Complete and upload forms to the online application

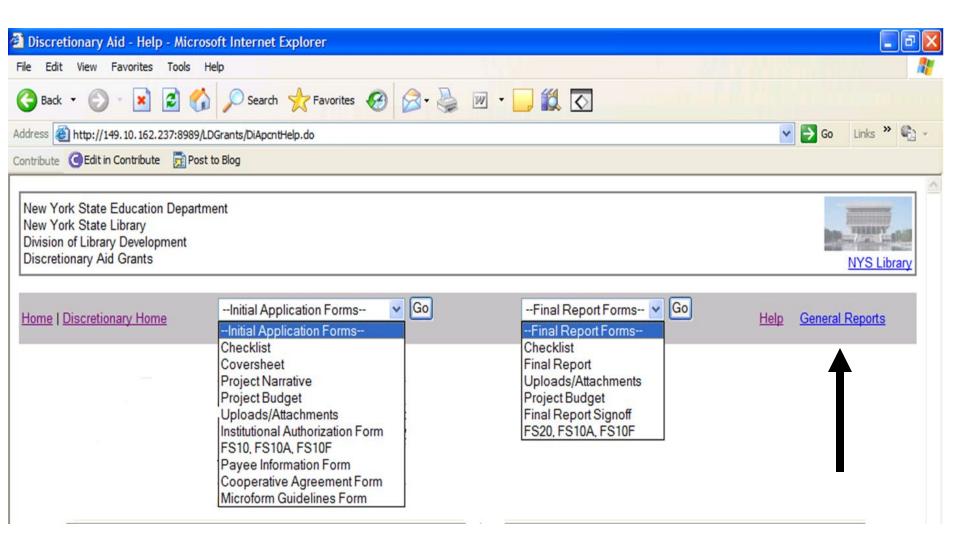
M/WBE

Required Documents

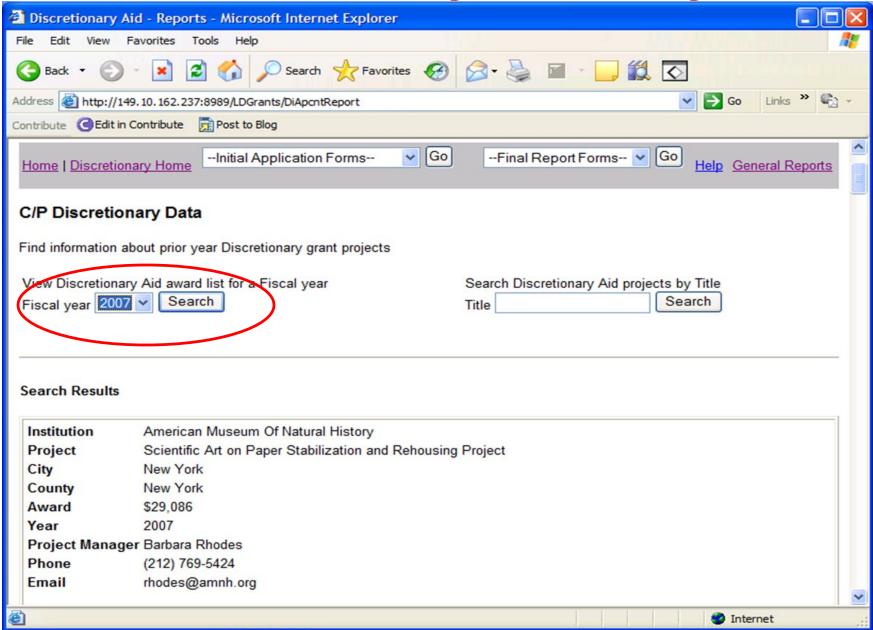
Required Documents

Documentation	Full Participation	Request Partial Waiver	Request Total Waiver
M/WBE Goal Calculation Worksheet (Word, [21k])			
M/WBE <u>Cover Letter</u> (Word, ☑ [20k])			
M/WBE 100: <u>Utilization Plan</u> (Word, W [19k])			N/A
M/WBE 102: <u>Notice of Intent to Participate</u> (Word, ■ [19k])			N/A
M/WBE 105: Contractor's Good Faith Efforts (Word, ■ [19k])	N/A		
Evidence of Good Faith Efforts (please refer to the M/WBE 105 form to distinguish what constitutes as "evidence of good faith efforts") M/WBE 105A Contractor Unavailable Certification (Word, [20k])	N/A		
M/WBE 101: Request for Waiver Form and Instructions (Word, ■ [19k])	N/A		
EE0 100 <u>Staffing Plan and Instructions</u> (Word, [31k])			

General Reports



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Search by Keyword in Title

