AmeriCorps National Civilian Community Corps (NCCC)
Disaster Response Project Application Instructions

These instructions correspond to each question on the Service Project Application. Answer each question as fully as possible. During this step, AmeriCorps NCCC Regional staff will have the ability to provide you with technical guidance, should you solicit it. If you have any questions or need additional clarification about any item on the application, please contact them.

APPLICANT INFORMATION
1. Enter your organization’s name and contact information. Organizations may jointly apply for an AmeriCorps NCCC team under a single application. If you are applying with a partner agency or “Secondary Sponsor,” please include their information in the corresponding blanks. Please contact AmeriCorps NCCC staff should you have further questions about jointly applying for a team.

2. Enter your organization’s EIN and the EIN of the secondary sponsor (if applicable). Known as the Employer Identification Number (EIN) or the Federal Tax Identification Number, the EIN is a unique nine-digit number assigned by the Internal Revenue Service (IRS) to business entities operating in the United States for the purposes of identification. This number allows AmeriCorps to quickly and accurately identify all organizations that have received AmeriCorps resources for reporting and tracking purposes.

3. Select your organization type. Only organization types specified here are eligible to apply. If you have questions on what category your organization may fall into, please contact the representative at your AmeriCorps NCCC staff.

4. The Authorized Representative is the designated representative from your organization that is legally authorized and certified to submit the Service Project Application. This person is often referred to as the Project Sponsor and will be the primary person that AmeriCorps NCCC Regional staff communicates with regarding the allocation of AmeriCorps NCCC teams and organizational support. This person should also be the signatory on the Service Project Application, and, if approved, the Sponsor Agreement between AmeriCorps NCCC and your organization. The Authorized Representative is responsible for completing any closeout paperwork from an approved project after the team departs, including the Project Completion Report and the Sponsor Survey.

PROJECT INFORMATION
5. Please indicate the proposed start date and end date for the project.

AREAS AFFECTED BY THE PROJECT
6. Enter the geographic location(s) where the team will be serving. First, select the state or territory and then provide the corresponding city, county or equivalent. If there are multiple sites, please note both state and county of all locations. You may list up to four locations.

LOCATIONS OF SERVICE
7. The Location of Service site(s) is the physical location(s) a team will be performing work during their time with your organization. It is important to accurately document where the team will be performing their service. AmeriCorps NCCC uses this information to ensure the safety of teams and to report where teams are performing work across the country. Given the physical location(s) of service site(s) may be difficult to identify during disaster response, please provide the City or Town Hall address of the local area(s) being assisted if you are unsure of the service site(s).
Additionally, AmeriCorps NCCC requires a Site Supervisor to provide technical guidance, training, and instruction during the service project. The Site Supervisor should be someone who currently has the technical skills and abilities to perform the tasks at the project site and will train members on completing the project tasks.

Location of Service

A. Indicate the organization’s name.
B. Indicate if this is the primary site of the project (most of the project).
C. Check the box if the project site is accessible for persons requiring mobility, vision or hearing accommodation. Please describe in more detail accessibility in the Project Design Narrative (Question 24). Because teams are not assigned to the project when the application is submitted, accommodations may or may not be needed. If a member of the assigned AmeriCorps NCCC team has special accessibility requirements, AmeriCorps NCCC Regional staff will work with you to arrange accommodation if the project has been approved.
D. Provide the street address, city, state, and zip code where members will be serving, which may or may not be the location of the organization listed. During disaster response, if you are unsure of the specific service site(s) please provide the City or Town Hall address of the local area(s) being assisted.
E. Indicate the name of the supervisor that will be providing daily site supervision throughout the team’s work on the site.
F. List the organizational title for the Site Supervisor.
G. List the Site Supervisor’s phone number. A cell phone number is strongly encouraged.
H. List the Site Supervisor’s e-mail.

If applicable, for any additional sites, please follow the above instructions. Please include an attachment with the information required above for each additional site location.

LODGING SITES

8. If selected for service, the sponsoring organization is required to provide lodging for the team and, where applicable, is responsible for any fees associated with the lodging space. Accommodations should be responsive to the following requirements in the table below.

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Note: Some AmeriCorps NCCC regions may be able to provide lodging for projects on their campus facilities. When available, these projects must be within a reasonable driving distance of the regional campus. Please inquire with your AmeriCorps NCCC Regional staff to learn more about availability and driving distance requirements. If this lodging option applies to you, please select “NCCC Campus” in the Type of Lodging field.
Lodging Site

In this section, list the locations and contact information of all the anticipated lodging facilities that will be provided to the AmeriCorps NCCC team.

A. Indicate the organization name of the lodging provider.
B. Indicate the team’s anticipated arrival and departure date at the lodging site.
C. Select the lodging type from the list.
D. Select the lodging category from the list.
E. Indicate the street address, city, state and zip code of the lodging site.
F. Check the “Accessible for people with disabilities?” box if the lodging site can accommodate individuals with mobility, vision, or hearing limitations. Because teams are not assigned to the project when the Service Project Application is submitted, accommodations may or may not be required. If a member of the assigned AmeriCorps NCCC team has special accessibility requirements, AmeriCorps NCCC regional staff will work with you to arrange accommodation if the project has been approved. Please include additional information about reasonable accommodation in the dialog box below.
G. Check the “Beds Provided?” box if beds are provided at this site. Providing beds is not required; however, AmeriCorps NCCC requests this information in order to ensure teams are provided with the equipment they will need. Please include additional information in the dialog box below.
H. Select whether a full kitchen is available on site for the team to use. Please detail the use and appliances available in the dialog box below. A full kitchen includes a full-sized refrigerator, a stove and/or oven and a sink large enough to clean dishes. If a full-sized kitchen is not available on site, please provide the closest kitchen facility available or if there is a refrigerator of any size is available to the team in the dialog box below. As long as a full kitchen is available for the team’s consistent use, providing food and/or meals is encouraged, but is not required in order to receive a team. If any meals are provided, please note if dietary restrictions are accommodated, and on which days in the dialog box below.
I. If a full kitchen is not available, please indicate whether a microwave is available to the team. Please include additional information in the dialog box below.
J. Select whether showers are available on site. Detail the expectations on use of the shower (e.g. cost, scheduling, and location) in the dialog box below. If showers are not available on site, please detail an alternate accommodation in the dialog box below.
K. Select whether laundry is available on site. If applicable, please include additional information about fees in the dialog box below. If laundry is not available on site, please provide the closest laundry facility available to the team in the dialog box below.
L. Please provide the lodging contact name. This person will be the primary contact for anything related to the lodging site.
M. List the phone number and email for the lodging contact person. A cell phone number is strongly encouraged.
N. **Further Describe Team Lodging Accommodations – Additional Information**
   This section is required. In the dialog box, please provide information regarding indoor lodging, camping options, and the safety and security of the proposed lodging facility. If you checked ‘yes’ on any of the Lodging Site questions, please provide additional information here (e.g., number of beds provided, number of meals provided and when, if dietary restrictions are accommodated, etc.). If you did not check a box, please detail the alternative(s) available.
INDOOR LODGING
I. Provide a descriptive overview of the lodging.
II. Number and type of rooms along with any furniture available (if applicable).
III. Any appliances available to the team for use (e.g., stove, refrigerator, microwave, etc.).
IV. Additional lodging information and rules of use of the facility.

CAMPING
I. Teams performing camping projects must have access to a substantial structure or facility where they can spend the night, if necessary, in the event of excessive inclement weather or for emergency evacuation (e.g., excessive rain, hot or cold temperatures, tornadoes, hurricanes, bug/mosquito seasons, etc.).
II. Use of bathroom and shower facilities. Consider associated costs, scheduling, location, etc.
III. Cooking location and expectation for food preparation.
IV. Expectations for food storage (including dry and cold storage).
V. Overview on what items your organization can provide (e.g., electricity on site, screened tents, canvas tents, propane, ice, indoor kitchen facility, etc.).
VI. Details on weather conditions and considerations when camping during the proposed time of year.
VII. Detailed information about the indoor location for the team to retreat in case of inclement or emergency weather.
VIII. Additional information about the camping location and use of the facility.

LODGING SAFETY AND SECURITY
I. A description of how the team’s belongings will be secure during the project.
II. Any precautions members should take while traveling & living in the community.
III. Local emergency response procedures.
IV. Distance to the closest medical facilities.
V. The community in which the team will be housed. Please consider cultural sensitivity, rules and expectations on use of space and additional information you would like us to know about the use of space in your community.
VI. Any other information related to lodging safety and security.

If applicable, for additional lodging sites, please follow the above instructions and include an attachment with the information required above for each additional lodging site location.

NARRATIVES
If you find that your organization’s responses are too long for the fields provided, please provide an attachment noting the section and question number above your continued narrative. Multiple narrative responses may be included in the same attachment, provided everything is clearly labeled.

8. Project Design Narrative
Please describe the work plan that includes the specific service tasks and activities the team will perform. The project must engage each team member in service throughout the duration of the project, a minimum of 40 hours a week per member. Additionally, please describe the overall mission of your agency and how the mission is fulfilled by your various programs. Please describe unmet community need(s) you propose to address using AmeriCorps NCCC resources. Please provide a detailed overview of the disaster and its impacts to the community, the geographic area impacted, and the anticipated target audience to be served.
9. **Project Management Narrative**
Please describe how you will equip members to properly prepare and perform the tasks outlined.

A. **On-Site Orientation:** Please provide a comprehensive on-site orientation agenda. Please include in the agenda: an overview of your organization and the project, introductions of the team to the staff of the sponsoring organization(s), tour of the work site(s) and the community, safety and security and a lodging use overview.

B. **Training Plan:** Provide a training plan outlining the training that members will receive during the project. This plan should include tool training, safety training, and project specific training. If a variety of tasks have been proposed in the work plan, the training plan should identify how/when members will be trained to perform the task. Also include how these trainings will be delivered (video, hands on, classroom, etc.).

10. **Safety and Security Narrative**
The safety and security of AmeriCorps NCCC members is of the upmost importance for the AmeriCorps NCCC program. The Site Supervisor should be present with the team daily and should possess the awareness, experience, and technical competence to address the project’s safety and technical issues. AmeriCorps NCCC staff are always available to provide consultation and answer questions around safety and security issues.

Please provide an overview of any safety considerations an AmeriCorps NCCC team may need to be aware of when serving on this project; include plans to mitigate any associated risks. Include the following:

A. If you answered ‘yes’ to any of the questions below, please explain the hazards or conditions. Selection of ‘yes’ does not preclude your organization from receiving an AmeriCorps NCCC team.
   I. Does this project include possible exposure of AmeriCorps NCCC members to asbestos, lead paint, hazardous waste, mold, or any other safety hazards?
   II. Will members be required to work with potentially hazardous chemicals such as solvents, acids, pesticides, herbicides, adhesives, etc.?
   III. Are there any health or environmental conditions that might preclude an AmeriCorps NCCC member from fully participating based on project location or project conditions?

B. If members will be utilizing tools, please describe safety concerns and how tool safety will be addressed during the project. Be sure to include this in your training plan.

C. Any environmental conditions that might be present at any work site (poison ivy, allergens, extreme weather conditions, etc.).

D. Any recommended or required immunizations.

E. Describe how medical emergencies would be handled during the project.

F. Any other safety considerations.

11. **Tools and Equipment Narrative**
In this section, please provide the following information:

A. Equipment and tools that your organization and community will provide for the AmeriCorps NCCC team to deliver on project goals.

B. Equipment, tools, and quantity requested from AmeriCorps NCCC to supplement what is available locally in order to meet project goals. AmeriCorps NCCC has limited access to tools and cannot guarantee the availability of requested items; applicants are encouraged to provide tools and equipment for the service project.

C. Access to internet/WIFI to the team for official team business and project-related purposes.
D. Appropriate personal protective equipment; respirators, gloves, goggles, etc. should always be available to the team as needed. AmeriCorps NCCC Regional staff and the project sponsor must ensure this availability.

SERVICE PROJECT APPLICATION SIGNATURE
Please review the document for completeness and the elimination of any errors. Then review the ‘Important Notices’ section at the end of the application. Sign and date the Service Project Application. The person who signs the document must be the applicant organization’s authorized representative who has the authority to commit resources to your organization. An electronic signature is accepted and encouraged.

SUBMISSION INSTRUCTIONS
Complete and submit the Service Project Application to the AmeriCorps Regional staff representative. A directory of AmeriCorps Regional staff contacts is located at the end of this document in Appendix A and on https://www.americorps.gov/ncccsponsor. AmeriCorps NCCC has regional deadlines for Service Project Application submissions, and are based on the dates for which you are requesting a team. Please include any required or supplemental attachments. It is preferred that the Service Project Application be submitted electronically by email. Once received, AmeriCorps NCCC Regional staff will notify you to discuss the next steps of the process.
Appendix A

AmeriCorps NCCC has four regional campuses located in Aurora, CO; Sacramento, CA; Vicksburg, MS; and Vinton, IA. These campuses are the hubs from which AmeriCorps NCCC operates and deploys members to service projects around the country. Each campus serves as a headquarters for its multi-state region and can lodge and feed its entire regional corps, which ranges in size from 150 to 500 members. The staff at the campuses support both the members and project sponsors as they engage in service activities.

Southwest Region
15001 East Oxford Ave.
Suite B
Aurora, CO 80014
Tel: (303) 844-7400
Fax: (303) 844-7410
E-mail: NCCCSouthwest@cns.gov
States Served: AR, AZ, CO, KS, MO, NM, OK, TX, WY

Pacific Region
3427 Laurel Street
Sacramento, CA 95652 Tel: (916) 640-0310
Fax: (916) 640-0308
E-mail: NCCCPacific@cns.gov
States Served: AK, CA, HI, ID, MT, NV, OR, UT, WA, Pacific Territories

North Central Region
1004 G Avenue
Vinton, IA 52349
Tel: (319) 472-9664
Fax: (319) 472-9666
E-mail: NCCCNorthCentral@cns.gov
States Served: IA, IL, IN, MI, ME, MN, ND, NE, NH, NY, OH, PA, SD, VT, WI

Southern Region
2715 Confederate Avenue
Vicksburg, MS 39180
Tel: (601) 630-4040
Fax: (601) 630-4071
E-mail: NCCCSouthern@cns.gov
States Served: AL, CT, DC, DE, FL, GA, KY, LA, MA, MD, MS, NC, NJ, RI, SC, TN, VA, WV, USVI, PR