

Project Proposal

Technical Contact

Name:

Complete Business Mailing Address:

Phone Number:

Fax Number:

Email Address:

Grant Administrative Contact

Name:

Complete Business Mailing Address:

Phone Number:

Fax Number:

Email Address:

Signature Authority

Name:

Title:

I. PURPOSE:

II. OBJECTIVES:

III. RESPONSIBILITIES OF THE PARTIES

A. The Recipient will:

B. NRCS will:

IV. EXPECTED ACCOMPLISHMENTS AND DELIVERABLES:

V. RESOURCES REQUIRED

A. Recipient:

VI. MILESTONES/TIMELINE