The Program Project Profile should include the project details and necessary information to fulfill the goals and objectives of the project. The acceptable font size for the narrative is 11 or 12 pitch with all margins at 1 inch. The following information must be included in the project profile. Please delete questions and guidance items from the Finished Project profile (including this paragraph). Submit only your information and answers to these questions under each heading.

#### PROJECT TITLE

Provide a descriptive project title in 6 words or less in the space below.

### **DURATION OF PROJECT**

Start Date: Start Date End Date: End Date

#### PROJECT PARTNER AND SUMMARY

Include a project summary of 250 words or less suitable for dissemination to the public. A Project Summary provides a very brief (one sentence, if possible) description of your project. A Project Summary includes:

- 1. The name of the applicant organization that if awarded a grant will establish an agreement or contractual relationship with the State department of agriculture to lead and execute the project,
- 2. A concise outline the project's outcome(s), and
- 3. A description of the general tasks to be completed during the project period to fulfill this goal.

#### **FOR EXAMPLE:**

The ABC University will mitigate the spread of citrus greening (Huanglongbing) by developing scientifically-based practical measures to implement in a quarantine area and disseminating results to stakeholders through grower meetings and field days.

#### PROJECT PURPOSE

PROVIDE THE SPECIFIC ISSUE, PROBLEM OR NEED THAT THE PROJECT WILL ADDRESS

#### PROVIDE A LISTING OF THE OBJECTIVES THAT THIS PROJECT HOPES TO ACHIEVE

Add more objectives by copying and pasting the existing listing or delete objectives that aren't necessary.

**Objective 1** 

**Objective 2** 

Objective 3

**Objective 4** 

Add other objectives as necessary

PROJECT BENEFICIARIES				
Estimate the number of project beneficiaries: Enter the Number of Beneficiaries				
Does this project directly benefit socially disadvantaged farmers as defined in the RFA or the 2017 NC-SCBGF Grant Manual? Yes $\Box$ No $\Box$				
Does this project directly benefit beginning farmers as defined in the RFA or the 2017 NC-SCBGP Grant Manual Yes $\Box$ No $\Box$				
STATEMENT OF SOLELY ENHANCING SPECIALTY CROPS				
By checking the box to the right, I confirm that this project <b>solely</b> enhances the competitiveness of specialty crops in accordance with and defined by <u>7 U.S.C. 1621</u> . Further information regarding the definition of a specialty crop can be found at <a href="https://www.ams.usda.gov/services/grants/scbgp">www.ams.usda.gov/services/grants/scbgp</a> .				
CONTINUATION PROJECT INFORMATION				
If your project is continuing the efforts of a previously funded SCBGP project, address the following:				
DESCRIBE HOW THIS PROJECT WILL DIFFER FROM AND BUILD ON THE PREVIOUS EFFORTS				
PROVIDE A SUMMARY (3 TO 5 SENTENCES) OF THE OUTCOMES OF THE PREVIOUS EFFORTS				
PROVIDE LESSONS LEARNED ON POTENTIAL PROJECT IMPROVEMENTS				
What was previously learned from implementing this project, including potential improvements?				
How are the lessons learned and improvements being incorporated into the project to make the ongoing project more effective and successful at meeting goals and outcomes?				
DESCRIBE THE LIKELIHOOD OF THE PROJECT BECOMING SELF-SUSTAINING AND NOT INDEFINITELY DEPENDENT ON GRANT FUNDS				

#### OTHER SUPPORT FROM FEDERAL OR STATE GRANT PROGRAMS

	_			ct to a Federal or State grai r than the SCBGP funding t	
	Ye	es 🗆	No		
	•	EIVING OR WI NT PROGRAM	LL POTENTIALLY	RECEIVE FUNDS FR	OM ANOTHER
Identify the Fe	deral or State g	grant program(s)			
Describe how	the SCBGP proje	ect differs from o	r supplements the o	other grant program(s) e	fforts.
EXTERNAL I	PROJECT SUF	PPORT			
Describe the speci project).	alty crop stakehold	ders who support thi	s project and why (othe	r than the applicant and organ	nizations involved in the
EXPECTED N	MEASURABLI	E OUTCOMES			
SELECT THE	APPROPRIA	TE OUTCOME(	S) AND INDICAT	OR(S)/SUB-INDICAT	OR(S)
	-	-	in the <u>SCBGP Performa</u> ance of the SCBGP on a	nce Measures, which were app national level.	proved by the Office of
OUTCOME M	EASURE(S)				
Select the outcom	e measure(s) that o	are applicable for th	is project from the listin	g below.	
	tcome 1: Enhan rketing projects	-	eness of specialty cro	ps through increased sales	(required for
TH	IS IS MANDATO	RY FOR ALL MAR	KETING AND PROMO	OTION PROJECTS.	
3. 4. 5. 6. 7. 8. 9.	Specialty crop of Specialty crop of Specialty crop of Website promote use/development as direct mail, it agritourism; Export market Retail promotion Farmers market Marketing and section:	only tradeshows; otion and development of billboards, a brochures; development; ons including poin et promotions; and promotion campa	I national campaigns; ment; radio, television, mag nt-of-purchase items, I nigns with an education	azine and email ads, marke labels, packaging etc.; on component directed to	consumers.
	Sales increased promotion acti		\$ and by	_ percent, as result of marl	keting and/or

Outco	<b>Outcome 2</b> : Enhance the competitiveness of specialty crops through increased consumption <i>Indicators:</i>					
Indica						
1.	Of thetotal number of children and youth reached, a. The number that gained knowledge about eating more specialty crops b. The number that reported an intention to eat more specialty crops c. The number that reported eating more specialty crops					
□ 2.	Of thetotal number of adults reached, a. The number that gained knowledge about eating more specialty crops b. The number that reported an intention to eat more specialty crops c. The number that reported eating more specialty crops					
□ 3.	Number of new and improved technologies and processes to enhance the nutritional value and consumer acceptance of specialty crops (excluding patents)					
□ 4.	Number of new specialty crops and/or specialty crop products introduced to consumers					
Outco	me 3: Enhance the competitiveness of specialty crops through increased access					
Indica	tors:					
□ 1.	Of thetotal number of consumers or wholesale buyers reached, a. The number that gained knowledge on how to access/produce/prepare/preserve specialty crops b. The number that reported an intention to access/produce/prepare/preserve specialty crops c. The number that reported supplementing their diets with specialty crops that they produced/preserved/obtained/prepared					
□ 2.	Of thetotal number of individuals (culinary professionals, institutional kitchens, specialty crop entrepreneurs such as kitchen incubators/shared-use kitchens, etc.) reached, a. The number that gained knowledge on how to access/produce/prepare/preserve specialty crops b. The number that reported an intention to access/produce/prepare/preserve specialty crops c. The number that reported supplementing their diets with specialty crops that they produced/prepared/preserved/obtained					
□ 3.	Number of existing delivery systems/access points of those reached that expanded and/or improved offerings of specialty crops afarmers markets bproduce at corner stores cschool food programs and other food options (vending machines, school events, etc.) dgrocery stores ewholesale markets ffood hubs that process, aggregate, distribute, or store specialty crops ghome improvement centers with lawn and garden centers hlawn and garden centers iother systems/access points, not noted itotal (if not reported above)					

	□ 4.	Number of new delivery systems/access points offering specialty crops afarmers markets bproduce at corner stores cschool food programs and other food options (vending machines, school events, etc.) dgrocery stores ewholesale markets ffood hubs that process, aggregate, distribute, or store specialty crops ghome improvement centers with lawn and garden centers hlawn and garden centers iother systems/access points, not noted jtotal (if not reported above)
]	practio	<b>me 4</b> : Enhance the competitiveness of specialty crops though greater capacity of sustainable ses of specialty crop production resulting in increased yield, reduced inputs, increased efficiency, sed economic return, and/or conservation of resources
	Indicat	tors:
	□ 1.	Numbers of plant/seed releases (i.e., cultivars, drought-tolerant plants, organic, enhanced nutritional composition, etc.)
	□ 2.	Adoption of best practices and technologies resulting in increased yields, reduced inputs, increased efficiency, increased economic return, and conservation of resources (select at least one below).
		a. Number of growers/producers indicating adoption of recommended practices
		b. Number of growers/producers reporting reduction in pesticides, fertilizer, water used/acr
		c. Number of producers reporting increased dollar returns per acre or reduced costs per acre
		d. Number of acres in conservation tillage or acres in other best management practices
	□ 3.	Number of habitat acres established and maintained for the mutual benefit of pollinators and specialty crops
		<b>me 5</b> : Enhance the competitiveness of specialty crops through more sustainable, diverse, and nt specialty crop systems
	Indicat	tors:
	□ 1.	Number of new or improved innovation models (biological, economic, business, management, etc.), technologies, networks, products, processes, etc. developed for specialty crop entities including producers, processors, distributors, etc
	□ 2. □ 2	1
	□ 3.	chain) that have increased revenue expressed in dollars
	□ 4.	Number of new diagnostic systems analyzing specialty crop pests and diseases [Diagnostic systems refer to, among other things: labs, networks, procedures, access points.]

<ul><li>□ 5</li><li>□ 6</li><li>□ 7</li><li>□ 8</li></ul>	[The intent here is not to count individual pieces of equipment or devices, but to enumerate technologies that add to the diagnostic capacity.]  Number of first responders trained in early detection and rapid response to combat plant pests and diseases  Number of viable technologies/processes developed or modified that will increase specialty crop distribution and/or production
	<b>ome 6</b> : Enhance the competitiveness of specialty crops through increasing the number of viable ologies to improve food safety
Indica	ntors:
□ 1 □ 2 □ 3 □ 4 □ 5	specialty crop supply contamination from foodborne threats  Number of viable prevention, control and intervention strategies for all specialty crop production scales for foodborne threats along the production continuum  Number of individuals who learn about prevention, detection, control, and intervention food safety practices and number of those individuals who increase their food safety skills and knowledge  Number of improved prevention, detection, control, and intervention technologies
	ome 7: Enhance the competitiveness of specialty crops through increased understanding of the gy of threats to food safety from microbial and chemical sources
□ 1 □ 2 □ 3	<ul> <li>Increased understanding of the roles of humans, plants and animals as vectors</li> <li>Increased understanding of preharvest and postharvest process impacts on microbial and chemical threats</li> </ul>
	. Number of new rural careers created Number of new urban careers created
□ 3 □ 4	,

	5.	Increased revenue/increased savings/one-time capital purchases (in dollars)
	6.	Number of new beginning farmers who went into specialty crop production
П	7.	Number of socially disadvantaged famers who went into specialty crop production

#### OUTCOME INDICATOR(S)

Provide at least one indicator listed above and the related quantifiable result. If you have multiple outcomes and/or indicators, repeat this for each outcome/indicator. More details and instructions are in the 2016 NC-SCBGP Grant Manual.

For example:

#### Outcome 2, Indicator 1.a.

Of the 150 total number of children and youth reached, 132 will gain knowledge about eating more specialty

#### MISCELLANEOUS OUTCOME MEASURE

In the unlikely event that the outcomes and indicators above the selected outcomes are not relevant to your project, you must develop a project-specific outcome(s) and indicator(s) which will be subject to approval by AMS.

#### DATA COLLECTION TO REPORT ON OUTCOMES AND INDICATORS

Explain how you will collect the required data to report on the outcome and indicator in the space below.

#### **BUDGET NARRATIVE**

All expenses described in this Budget Narrative must be associated with expenses that will be covered by the SCBGP. If any matching funds will be used and a description of their use is required by the State department of agriculture, the expenses to be covered with matching funds must be described separately. Applicants should review the Request for Applications section 4.6 Funding Restrictions prior to developing their budget narrative.

Budget Summary			
Expense Category	Funds Requested		
Personnel			
Fringe Benefits			
Travel			
Equipment (NC-SCBGP does not allow these purchases)	\$0.00		
Supplies			
Contractual			
Other			
Direct Costs Subtotal			

<b>Total Budget</b>	

#### **PERSONNEL**

List the organization's employees whose time and effort can be specifically identified and easily and accurately traced to project activities that solely enhance the competitiveness of specialty crops. See the Request for Applications section 4.6.2 Allowable and Unallowable Costs and Activities, Salaries and Wages, and Presenting Direct and Indirect Costs Consistently under section 4.6.1 for further guidance.

#	Name/Title	Level of Effort (# of hours OR % FTE)	Funds Requested
1			
2			
3			
4	Add other Personnel as necessary		

Personnel Subtotal	

#### PERSONNEL JUSTIFICATION

For each individual listed in the above table, describe the activities to be completed by name/title including approximately when activities will occur. Add more personnel by copying and pasting the existing listing or deleting personnel that aren't necessary.

#	Who will do the work? Indicate the project participants who will do the work of each activity, including subrecipients, and/or contractors. If you request grant funds for personnel and contractors, you must include them in the work plan to demonstrate the requested funding is warranted. If you request funds for travel, these activities must also be included.	Project Activities - Describe the project activities that are necessary to accomplish the objectives. Make sure you include your performance monitoring/data collection activities.  Please list all activities and target dates under each person name.	When will the activity be accomplished? Include a timeline that indicates when each activity will occur (at least month and year) and beginning and end dates for the project. Make sure the work plan timeline shows that the project will be completed within the
1	activities must also be included.		completed within the allowable grant period.
2			
3			
4			

#### FRINGE BENEFITS

Provide the fringe benefit rates for each of the project's salaried employees described in the Personnel section that will be paid with SCBGP funds.

#	Name/Title	Fringe Benefit Rate	Funds Requested
1			
2			
3			
4			

Fringe Subtotal	
i i inge subtotai	

#### TRAVEL

Explain the purpose for each Trip Request. Please note that travel costs are limited to those allowed by formal organizational policy; in the case of air travel, project participants must use the lowest reasonable commercial airfares. Travel expenses associated with the project shall follow the North Carolina State Travel Policy. The approved travel rate sheet can be found on the Forms Page of the NC-SCBGP webpage. See the Request for Applications section 4.6.2 Allowable and Unallowable Costs and Activities, Travel, and Foreign Travel for further guidance.

#	Trip Destination	Type of Expense (airfare, car rental, hotel, meals, mileage, etc.)	Unit of Measure (days, nights, miles)	# of Units	Cost per Unit	# of Travelers Claiming the Expense	Funds Requested
1							
2							
3							
4							
5							
6							
7							

Travel Subtotal	Travel Subtotal	

#### TRAVEL JUSTIFICATION

For each trip listed in the above table describe the purpose of this trip and how it will achieve the objectives and outcomes of the project. Be sure to include approximately when the trip will occur. Add more trips by copying and pasting the existing listing or delete trips that aren't necessary.

Trip 1 (Approximate Date of Travel MM/YYYY):

Trip 2(Approximate Date of Travel MM/YYYY):

Trip 3(Approximate Date of Travel MM/YYYY):	
Add other Trips as necessary	
CONFORMING WITH YOUR TRAVEL POLICY	

By checking the box to the right, I confirm that my organization's established travel policies will be adhered to when completing the above-mentioned trips in accordance with 2 CFR 200.474 or 48 CFR subpart 31.2 as applicable.

#### **EQUIPMENT**

Capital expenditures for equipment, buildings, and land are unallowable as direct or indirect charges. Items purchased with a value greater than \$5,000.00 are considered equipment and are unallowable.

<b>Equipment Subtotal</b>	\$0.00

#### **SUPPLIES**

List the materials, supplies, and fabricated parts costing less than \$5,000 per unit and describe how they will support the purpose and goal of the proposal and solely enhance the competitiveness of specialty crops. See Request for Applications section 4.6.2 Allowable and Unallowable Costs and Activities, Supplies and Materials, Including Costs of Computing Devices for further information.

Item Description	Per-Unit Cost	# of Units/Pieces Purchased	Acquire When?	Funds Requested

Supplies Subtotal	

#### SUPPLIES JUSTIFICATION

Describe the purpose of each supply listed in the table above purchased and how it is necessary for the completion of the project's objective(s) and outcome(s).

#### CONTRACTUAL/CONSULTANT

Contractual/consultant costs are the expenses associated with purchasing goods and/or procuring services performed by an individual or organization other than the applicant in the form of a procurement relationship. If there is more than one contractor or consultant, each must be described separately. (Repeat this section for each contract/consultant.)

#### ITEMIZED CONTRACTOR(S)/CONSULTANT(S)

Provide an itemized budget (personnel, fringe, travel, equipment, supplies, other, etc.) with appropriate justification. No indirect costs are to be included in the contract.

#	Name/Organization	Hourly Rate/Flat Rate	Funds Requested
1			
2			
3			
4			

Contractual/Consultant Subtotal	

#### CONTRACTUAL JUSTIFICATION

Describe the project activities each contractor or consultant will accomplish to meet the objectives and outcomes of the project. Include timelines for each activity. If contractor employee and consultant hourly rates of pay exceed the salary of a GS-15 step 10 Federal employee in your area (for more information please go to <a href="http://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/2016/general-schedule/">http://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/2016/general-schedule/</a>), provide a justification for the expenses. This limit does not include fringe benefits, travel, indirect costs, or other expenses. See Request for Applications section 4.6.2 Allowable and Unallowable Costs and Activities, Contractual and Consultant Costs for acceptable justifications.

Contractor	/Consult	ant 1.
COIIU actor	/ COHSUN	anı 11

**Contractor/Consultant 2:** 

**Contractor/Consultant 3:** 

Add other Contractors/Consultants as necessary

#### CONFORMING WITH YOUR PROCUREMENT STANDARDS

By checking the box to the right, I confirm that my organization followed the same policies and procedures used for procurements from non-federal sources, which reflect applicable State and local laws and regulations and conform to the Federal laws and standards identified in <u>2 CFR Part 200.317 through.326</u>, as applicable. If the contractor(s)/consultant(s) are not already selected, my organization will follow the same requirements.

48 CFR 2.101 and 48 CFR 13.106-1 requires documentation of three (3) written, quotes for personal service contracts over \$2,500.00.

#### **OTHER**

Include any expenses not covered in any of the previous budget categories. Be sure to break down costs into cost/unit. Expenses in this section include, but are not limited to, meetings and conferences, communications, rental expenses, advertisements, publication costs, and data collection.

If you budget meal costs for reasons other than meals associated with travel per diem, provide an adequate justification to support that these costs are not entertainment costs. See Request for Applications section 4.6.2 Allowable and Unallowable Costs and Activities, Meals for further guidance.

Item Description	Per-Unit Cost	Number of Units	Acquire When?	Funds Requested

Other Subtotal	

#### OTHER JUSTIFICATION

Describe the purpose of each item listed in the table above purchased and how it is necessary for the completion of the project's objective(s) and outcome(s).

#### PROGRAM INCOME

Program income is gross income—earned by a recipient or subrecipient under a grant—directly generated by the grant-supported activity, or earned only because of the grant agreement during the grant period of performance. Program income includes, but is not limited to, income from fees for services performed; the sale of commodities or items fabricated under an award (this includes items sold at cost if the cost of producing the item was funded in whole or partially with grant funds); registration fees for conferences, etc.

Source/Nature of Program Income	Description of how you will reinvest the program income into the project to solely enhance the competitiveness of specialty crops	Estimated Income

Program Income	
Total	