2022-23 AmeriCorps State and National Formula Grants
Planning Grant Notice of Intent to Apply (NOIA)

Organization Name:

Primary Grant Contact and Entity Information for this application:

Name and Title: _____

Phone Number: _____ Email: _____

EIN/Tax ID: _____ DUNS Number: _____

Active SAM registration: ☐ Yes ☐ No

Eligible Entity? Type:

Project Summary:

In the space provided, with one or two paragraphs, describe how your organization proposes to utilize an AmeriCorps Planning Grant to explore opportunities for the future utilization of AmeriCorps members (proposed number) to address (list community need(s)) in the target communities of list the communities that will be engaged.

Organizational Experience/Capacity

☐ Did your organization have an AmeriCorps program in the past?

Is your organization a recipient of any of the following grant funding sources?

☐ federal ☐ state ☐ private/foundation