



## FY 2023 AmeriCorps State and National Competitive Grants 23AC-C Notice of Intent to Apply

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Organi	zation Name		
Conta	ct Information:		
	Name and Title:		
	Phone number:		
	Email:		
SAM UI	≣:	EIN/Tax ID:	
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Summary (one or two paragraphs) of what the program is proposing

Number of AmeriCorps members the program is expecting to enroll

Performance Measure(s) (output paired with outcome)
A general budget (not detailed)
Estimated Match Source(s)