

Application for Federal Assistance SF-424		
<div> <div> * 1. Type of Submission: <input type="checkbox"/> Preapplication <input checked="" type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application </div> <div> * 2. Type of Application: <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision </div> <div> * If Revision, select appropriate letter(s): <input type="text"/> * Other (Specify): <input type="text"/> </div> </div>		
* 3. Date Received: 02/02/2017		4. Applicant Identifier: <input type="text"/>
5a. Federal Entity Identifier: <input type="text"/>		5b. Federal Award Identifier: <input type="text"/>
State Use Only:		
6. Date Received by State: <input type="text"/>		7. State Application Identifier: <input type="text"/>
8. APPLICANT INFORMATION:		
* a. Legal Name: University of Southern California		
* b. Employer/Taxpayer Identification Number (EIN/TIN): 951642394		* c. Organizational DUNS: 072933393
d. Address:		
* Street1: Department of Contracts and Grants Street2: 2001 North Soto Street Suite 205 * City: Los Angeles County/Parish: <input type="text"/> * State: CA: California Province: <input type="text"/> * Country: USA: UNITED STATES * Zip / Postal Code: 90089 9235		
e. Organizational Unit:		
Department Name: Div of Contracts and Grants		Division Name: Vice President For Research
f. Name and contact information of person to be contacted on matters involving this application:		
Prefix: Ms. Middle Name: Ann * Last Name: Rivera Suffix: <input type="text"/> * First Name: Lillian Title: Contract and Grant Officer		
Organizational Affiliation: University of Southern California		
* Telephone Number: +1 323 442 2400		Fax Number: +1 323 442 2835
* Email: lriviera@usc.edu		

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* 9. Type of Applicant 1: Select Applicant Type: <input type="text" value="0: Private Institution of Higher Education"/>			
Type of Applicant 2: Select Applicant Type: <input type="text"/>			
Type of Applicant 3: Select Applicant Type: <input type="text"/>			
* Other (specify): <input type="text"/>			
* 10. Name of Federal Agency: <input type="text" value="Bureau of Land Management"/>			
11. Catalog of Federal Domestic Assistance Number: <input type="text" value="15.231"/>			
CFDA Title: <input type="text" value="Fish, Wildlife and Plant Conservation Resource Management"/>			
* 12. Funding Opportunity Number: <input type="text" value="L17AS00001"/>			
* Title: <input type="text" value="BLM FY2017 Bureau wide National Conservation Lands Scientific Studies Support Program"/>			
13. Competition Identification Number: <input type="text"/>			
Title: <input type="text"/>			
14. Areas Affected by Project (Cities, Counties, States, etc.): <div> <input type="text"/> <input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/> </div>			
* 15. Descriptive Title of Applicant's Project: <input type="text" value="INVENTORY AND SALVAGE OF PRE DINOSAUR FOSSIL VERTEBRATES IN THE CARBONIFEROUS PERMIAN CUTLER GROUP, VALLEY OF THE GODS AND JOHNS CANYON, SE UTAH"/>			
Attach supporting documents as specified in agency instructions. <div> <input type="button" value="Add Attachments"/> <input type="button" value="Delete Attachments"/> <input type="button" value="View Attachments"/> </div>			

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16. Congressional Districts Of:	
* a. Applicant <input style="width: 80px;" type="text" value="CA 034"/>	* b. Program/Project <input style="width: 80px;" type="text" value="UT 003"/>
Attach an additional list of Program/Project Congressional Districts if needed. <div style="display: flex; align-items: center; margin-top: 5px;"> <input style="width: 300px; height: 20px; border: 1px solid black;" type="text"/> <div style="margin-left: 10px;"> <input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/> </div> </div>	
17. Proposed Project:	
* a. Start Date: <input style="width: 80px;" type="text" value="07/01/2017"/>	* b. End Date: <input style="width: 80px;" type="text" value="06/30/2018"/>
18. Estimated Funding (\$):	
* a. Federal	<input style="width: 100px;" type="text" value="20,941.00"/>
* b. Applicant	<input style="width: 100px;" type="text" value="7,031.00"/>
* c. State	<input style="width: 100px;" type="text" value="0.00"/>
* d. Local	<input style="width: 100px;" type="text" value="0.00"/>
* e. Other	<input style="width: 100px;" type="text" value="500.00"/>
* f. Program Income	<input style="width: 100px;" type="text" value="0.00"/>
* g. TOTAL	<input style="width: 100px;" type="text" value="28,472.00"/>
* 19. Is Application Subject to Review By State Under Executive Order 12372 Process? <input type="checkbox"/> a. This application was made available to the State under the Executive Order 12372 Process for review on <input style="width: 100px;" type="text"/> . <input checked="" type="checkbox"/> b. Program is subject to E.O. 12372 but has not been selected by the State for review. <input type="checkbox"/> c. Program is not covered by E.O. 12372.	
* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes", provide explanation and attach <div style="display: flex; align-items: center; margin-top: 5px;"> <input style="width: 300px; height: 20px; border: 1px solid black;" type="text"/> <div style="margin-left: 10px;"> <input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/> </div> </div>	
21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001) <input checked="" type="checkbox"/> ** I AGREE <small>** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.</small>	
Authorized Representative:	
Prefix: <input style="width: 100px;" type="text" value="Ms."/>	* First Name: <input style="width: 200px;" type="text" value="Lillian"/>
Middle Name: <input style="width: 300px;" type="text" value="Ann"/>	
* Last Name: <input style="width: 300px;" type="text" value="Rivera"/>	
Suffix: <input style="width: 100px;" type="text"/>	
* Title: <input style="width: 300px;" type="text" value="Contract and Grant Officer"/>	
* Telephone Number: <input style="width: 150px;" type="text" value="+1 323 442 2400"/>	Fax Number: <input style="width: 150px;" type="text" value="+1 323 442 2835"/>
* Email: <input style="width: 300px;" type="text" value="lrivera@usc.edu"/>	
* Signature of Authorized Representative: <input style="width: 150px;" type="text" value="Lillian Rivera"/>	* Date Signed: <input style="width: 100px;" type="text" value="02/02/2017"/>