



## Native American Graves Protection and Repatriation Act

### Fiscal Year 2016 REPATRIATION Grant Proposal

Please read the **FY2016 REPATRIATION Grant Guidelines** carefully before completing this form.

All NAGPRA grant applicants must submit their proposals electronically through <http://www.grants.gov/web/grants/applicants/apply-for-grants.html>.

If you are unable to submit your proposal electronically, please contact the National NAGPRA Program for instructions on obtaining a waiver to this requirement at 202-354-2201.

### Section 1. Basic Information

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A. **Legal Name of Applicant** \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

B. **Type of Applicant** \_\_\_\_\_ Tribal/NHO Applicant \_\_\_\_\_ Museum Applicant

C. **Amount Requested** (*not to exceed \$15,000*) \$ \_\_\_\_\_

D. **Expected date for the repatriation to occur** \_\_\_\_\_

F. **REPATRIATION Project Summary:** Summarize the key points of your repatriation project. Include the number of NAGPRA cultural items that will be repatriated or transferred as a result from this grant. Indicate if this is a collaborative project and list key partners. If funded, your summary may appear on the NAGPRA website (250 words max).

**Section 1 (continued)**

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**G. Contact Information.** A minimum of two different people must be listed as contacts below.

**1. Project Director:** Who will be responsible for the supervision and management of the entire grant?

Name \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

**2. Fiscal Management:** Who will be responsible for the fiscal management of the grant?

Name \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

**3. Other Grant Official** *(if needed and different from above)*

Name \_\_\_\_\_

Title \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

**4. Other Grant Official** *(if needed and different from above)*

Name \_\_\_\_\_

Title \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

## Section 2. Project Description

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All applicants must submit narrative responses to the following questions. Add pages if necessary.

**A. Grant Objectives.** Provide an overview of the repatriation to be funded by supplying the following information:

1. List of Federal Register Notice(s) including, notice title, date of publication, Federal Register volume and number, and page numbers.  
*(Example: Notice of Inventory Completion: University of Michigan, Ann Arbor, MI, 10/16/2014, Vol. 79, No. 200, pages 62202-62203)*

2. For museum applicants, list tribe(s) designated to take physical custody of the human remains/cultural items. For tribal applicants, list museum(s) that will transfer the human remains and/or cultural items.

3. Number of sets of human remains (minimum number of individuals) and associated funerary objects to be repatriated.

Minimum number of individuals: \_\_\_\_\_

Associated funerary objects: \_\_\_\_\_

4. Number of cultural items to be repatriated by their NAGPRA category

Unassociated funerary objects: \_\_\_\_\_

Sacred objects: \_\_\_\_\_

Objects of cultural patrimony: \_\_\_\_\_

Cultural Items (not specified in notice): \_\_\_\_\_

Sacred objects that are also Objects of cultural patrimony: \_\_\_\_\_

5. Projected date for the repatriation. \_\_\_\_\_

## Section 2 (continued)

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**B. Grant Activities.** Provide a description of the activities that will occur with these grant funds.

**C. Partnerships.** Provide a comprehensive list of project partners (includes all museums or tribes involved with the repatriation) and briefly explain their involvement. If the project involves working with a coalition, include a statement describing the coalition and list all coalition members.

**D. Letters of Commitment** (*attach as supporting documents*).

Have all tribes listed in the notice as eligible to receive the human remains and/or cultural items been notified of this repatriation?

Does the transfer of control letter from the museum indicate all tribes and NHOs listed in the notice as eligible to receive the human remains and/or cultural items support the tribe/NHO(s) designated to conduct the repatriation?

**E. Federal Agency Collections** (*if applicable*). NAGPRA Repatriation Grants are not intended to replace Federal agency funds for repatriation, where Federal agency funds are available. If this is a grant to conduct repatriation for human remains or cultural items under the control of a Federal agency, please indicate why funds are being requested.

## Section 2 (continued)

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- F. Monitoring and Evaluation.** What structure do you have in place to assess the progress of the grant and ensure compliance with all administrative and financial requirements? Be specific.
- G. Personnel Qualifications.** Who will carry out the grant activities? List all project personnel, including consultants, who are listed in part A and C of the budget section. Briefly describe how their experience and qualifications are appropriate to successfully achieve the stated objectives. If you plan to hire new personnel or consultant(s), describe the criteria that will be used to competitively select these individuals or services. ***All Federal grants require consultants to be competitively selected.***
- H. Schedule of Completion.** Repatriation Grant projects must be completed within 12 months. Using a table or outline format, list each objective, the major activities needed to complete the objective, and the timeframe associated with each activity.

### Section 3. Budget

Each item should clearly show how the total was determined. If more space is needed, please follow the budget format on a separate sheet of paper. All major costs must be listed in a budget category listed below, and all cost items must be explained in the Budget Summary and Justification (Section 4). See **FY2016 REPATRIATION Grant Guidelines** for more details on each budget category.

**Round all numbers to the nearest dollar amount, even if exact costs are known.**

<b>A. Salaries and Wages.</b> Provide the names and/or titles of key project personnel.				
Name/Title of Position	Wage or Salary	Federal Grant Funds	Applicant Cost Share (if any)	Total (federal + applicant)
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
Subtotal		\$	\$	\$

<b>B. Fringe Benefits.</b> If more than one rate is used, list each rate and the wage or salary base.				
Rate	Wage or Salary Base	Federal Grant Funds	Applicant Cost Share (if any)	Total (federal + applicant)
% of	\$	\$	\$	\$
% of	\$	\$	\$	\$
% of	\$	\$	\$	\$
% of	\$	\$	\$	\$
Subtotal		\$	\$	\$

<b>C. Consultant Fees.</b> This should include payments for professional and technical consultants participating in the project. Do NOT include stipends for Elders or interns here (see section F). Consultants must be competitively selected.					
Name and type of Consultant	# of Days	Daily Rate	Federal Grant Funds	Applicant Cost Share (if any)	Total (federal + applicant)
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$
Subtotal			\$	\$	\$



**Section 3 (continued)**

**E. Consumable Supplies and Materials.** Include consumable supplies and materials to be used in the project and any items of expendable equipment, defined as equipment costing less than \$5,000 or with an estimated useful life of less than two years. Equipment costing more than \$5,000 should be listed in Other Costs (Category F, below).

Item	# of items	Cost	Federal Grant Funds	Applicant Cost Share (if any)	Total (federal + applicant)
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
Subtotal			\$	\$	\$

**F. Other Costs.** List stipends (including stipends for Elders and students), equipment items in excess of \$5,000, and other items such as duplication and printing costs, equipment rental and other services not previously listed. Clearly define each item - "Miscellaneous," "overhead," and "contingency" are not acceptable line items.

Item	Cost	Federal Grant Funds	Applicant Cost Share (if any)	Total (federal + applicant)
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
Subtotal		\$	\$	\$

**G. Indirect Costs.** If indirect costs will be charged to the grant, complete the table below with your current approved indirect cost rate and the direct costs it will be applied to. Copies of your most recent indirect cost rate must be attached if indirect costs will be requested. **Only indirect costs up to 25% of the grant may be charged to the grant.\***

The Direct Costs* from sections A -- F above to which the indirect cost rate applies	Current Approved Indirect Cost Rate Percentage	Indirect Cost Rate Amount	Indirect Cost Rate Amount Charged to Grant
\$	%	\$	\$

\*NOTE: Indirect costs may be applied only to eligible direct costs in accordance with your approved rate. Most indirect cost rate agreements exclude contracts or pass-through funds above a certain amount. Please check your rate and apply it accordingly. Any indirect cost rate that exceed 25% may NOT be claimed as an applicant cost share.

## Section 4. Budget Summary and Justification

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The Budget Summary table below must exactly match the Estimated Funding table recorded on the SF-424, Application for Federal Assistance and the SF-424A Budget Information – Non-Construction Programs. See the **FY2016 REPATRIATION Grant Guidelines** for specific instructions.

**Round all numbers to the nearest dollar amount, even if exact costs are known.**

Budget Summary			
Category	Federal Grant Funds	Applicant Cost Share (if any)	Total (federal + applicant)
A. Salaries and Wages	\$	\$	\$
B. Fringe Benefits	\$	\$	\$
C. Consultant Fees	\$	\$	\$
D. Travel and Per Diem	\$	\$	\$
E. Supplies and Materials	\$	\$	\$
F. Other Costs	\$	\$	\$
G. Indirect Costs	\$	\$	\$
<b>TOTAL PROJECT COSTS</b>	\$	\$	\$

**Budget Justification.** In the space below, provide a brief narrative justification of all cost items listed in the budget. Be specific and explain why these items are necessary to accomplish the grant objectives. If the project involves travel costs, include a brief summary of each trip (for example, Project Director and two tribal Elders will fly from Hometown to Someplace and stay three days to take possession of items from Someplace Museum’s collection). If purchasing or renting large budget items, justify their necessity. Use an additional sheet, if necessary.

## Section 5. Status of Current or Recent NAGPRA Grant(s)

Please indicate whether or not your tribe or museum has received a NAGPRA Consultation/Documentation or Repatriation Grant within the past five years.

- \_\_\_\_\_ 1. No. We do not currently have a NAGPRA Grant, nor did we complete a NAGPRA grant in the past five years.
- \_\_\_\_\_ 2. Yes. We currently have an active NAGPRA Grant.
- \_\_\_\_\_ 3. Yes. We completed a NAGPRA Grant within the past five years. The grant is closed.

If you checked #2 or #3 above, list each NAGPRA grant number and provide an overview of each grant's activities and accomplishments. If additional space is needed, attach no more than one page.

## Section 6. Supporting Documents

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All applicants must submit certain documents in support of the project proposal. **Supporting documents should be uploaded to Grants.gov.**

- A. Transfer of control letter from the museum to the tribe(s) or NHO(s) for all human remains and cultural items to be repatriated.
- B. Letters of commitment from tribe(s) or NHO(s) listed in the notice(s) and/or listed in the transfer of control letter authorizing the lead tribe(s) or NHO(s) to coordinate and manage the repatriation.
- C. If a museum is applying for the grant, letters of commitment from tribe(s) or NHO(s) who will receive transfer of the cultural items.
- D. If a tribe is applying for the grant, letters of commitment from museum(s) or Federal agencies who will transfer physical custody of the items.
- E. Tribal resolution confirming support for the proposal and authorizing implementation of the grant project, if funded (if applicable).
- F. Letters of commitment and resumes (maximum 2 pages) for all project consultants, if they have been selected or detailed positions descriptions and search criteria if consultants have not yet been chosen. (Grantees must document a competitive selection process for hiring of personnel.)
- G. List of proposed equipment to be purchased and the cost of each item. Equipment exceeding a cost of \$5,000 per item must be listed.
- H. Most Recent Auditor's Report Letter (do not include full audit).
- I. Current indirect cost rate agreement, including a letter from the Federal agency approving the rate to be used and the period for which the rate is approved.