NYS Department of State
Appalachian Regional Commission Program
2024-2025 Area Development Grant Application
ONE-PAGE SUMMARY COVER PAGE

Project Title:

Project Sponsor:

Sponsor Address:

Contact Person: **Phone:** x

(Name and Title) **E-Mail:**

Project Location / Counties Served:

Distressed Census Tract(s) (if any):

ARC Goal # and NYS Strategy:

Purpose: (Regional needs to be served?)

Description: (How will ARC & partners' resources be used to meet ARC's Goal?)

Funds & Sources:

Fund Source(s)	Program(s)*	Amount	Status**	Type***
ARC	Area Development Grant		Current Application	Federal Grant (Cash)
Select One		$ 0	Select One	Select One
Select One		$ 0	Select One	Select One
Select One		$ 0	Select One	Select One
Select One		$ 0	Select One	Select One
Select One		$ 0	Select One	Select One
	TOTAL: >>>	$ 0		

**Please list agency AND program(s) providing funds.; **Please state if committed or pending; ***State if cash, loan, or in-kind.*

Construction % 0% **Basic Agency (BA):** (If % > 5% type name of Basic Agency here, if applicable)

Performance Measures:

Anticipated (a) Outputs; (b) Outcomes; (c) Regional benefits

(see: https://www.arc.gov/resource/guide-to-arc-project-performance-measures/

Revised: 8/18/2022