

# **NYSCA Grants Gateway Application Guide**

**Before completing the Grants Gateway application you must complete the registration and program application in the NYSCA portal.**

**Applicants must submit a separate Grants Gateway application for each category they are applying for.**

**For sponsored requests, the sponsoring organization is responsible for the Grants Gateway application.**

**Ongoing multi-year grantees DO NOT need to complete the Grants Gateway Application. Please complete the registration process in the NYSCA portal and update your CDP on [www.nysculturaldata.org](http://www.nysculturaldata.org).**

**Do not submit your application until you are certain it is complete and accurate. Once submitted, applications cannot be reopened and edited.**

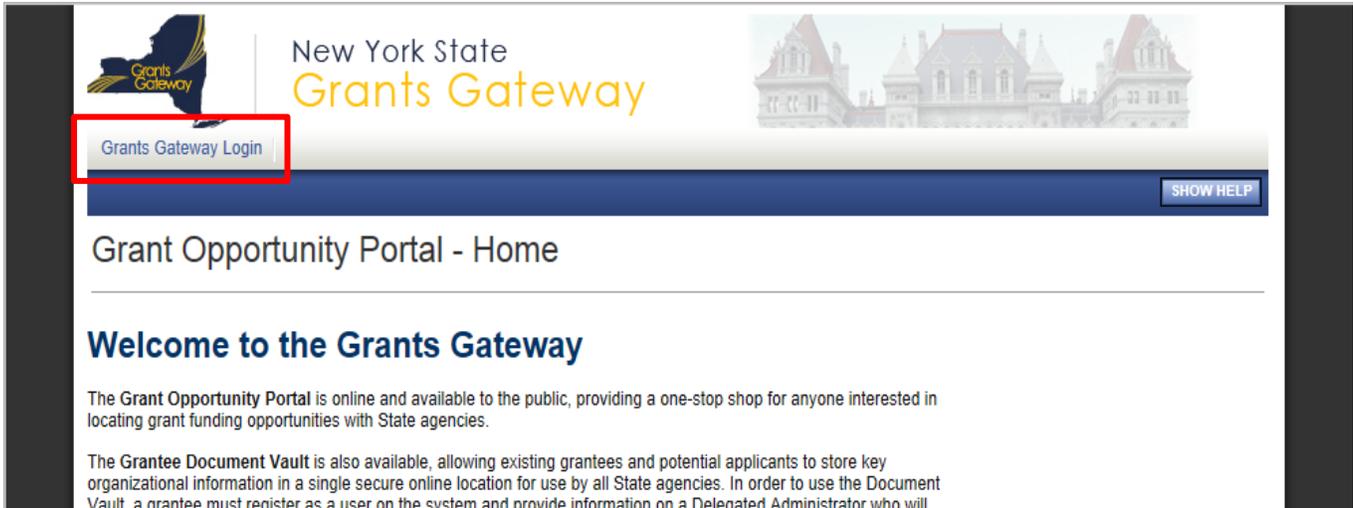
**ALL INCOMPLETE APPLICATIONS WILL BE DEEMED INELIGIBLE.**

## Table of Contents

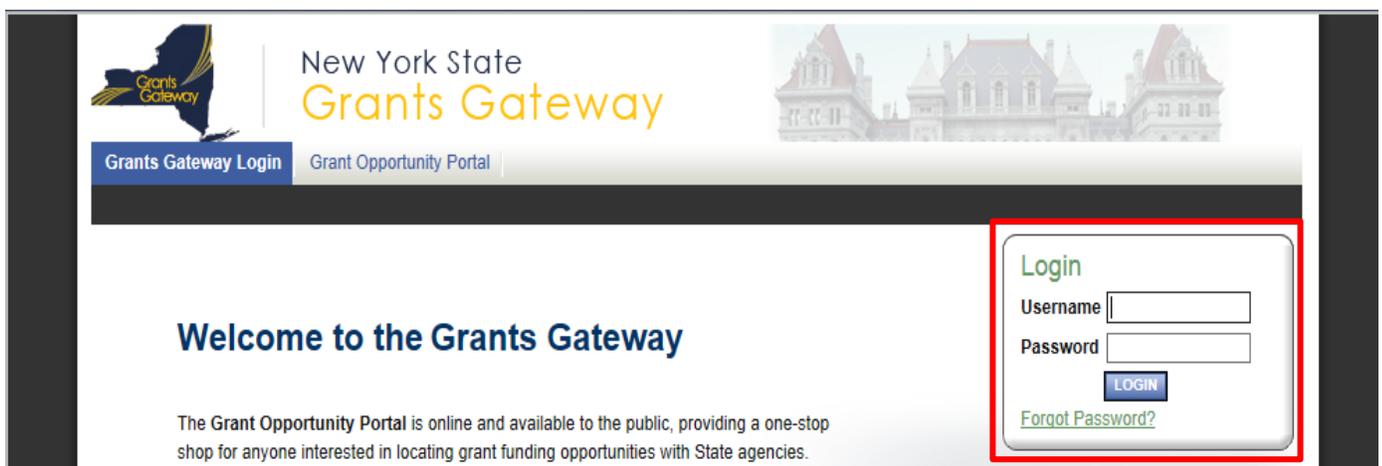
Accessing the NYSCA Grants Gateway Application	Page 3
Completing the NYSCA Grants Gateway Application	Page 6
- Project Site/Addresses	Page 9
- Program Specific Questions	Page 10
- Expenditure Budget	Page 11
- Expenditure Summary	Page 13
- Work Plan Overview	Page 14
- Objectives	Page 15
- Tasks	Page 16
- Performance Measures	Page 17
- Pre-Submission Uploads	Page 18
Submitting an Application	Page 19
Locating an Application You've Already Saved	Page 23
Grants Gateway Roles	Page 24

# Accessing the NYSCA Grants Gateway Application

1. On the Grants Gateway homepage ([www.grantsgateway.ny.gov](http://www.grantsgateway.ny.gov)), click “Grants Gateway Login



2. In order to create an application, you must log in with as a Grantee, Grantee Contract Signatory or Grantee System Administrator. The Grantee can begin the application, but **ONLY** the Grantee Contract Signatory or Grantee System Administrator can submit the application. Your organization’s Delegated Administrator can assign these roles. For more information on ‘roles’ please click



3. From the Grants Gateway homepage, click on “View Opportunities” under the “View Available Opportunities” heading

New York State  
Grants Gateway

Home | Grant Opportunity Portal | Applications | Contracts

Training Materials | Organization(s) | Profile | Logout

SHOW HELP

Welcome Grantee  
Grantee  
Change Picture

Instructions:  
Select the **SHOW HELP** button above for detailed instructions on the following.  
> Using System Messages  
> Understanding your Tasks

Hello Grantee, please choose an option below.

## View Available Opportunities

You have Opportunities available.  
Select the **View Opportunities** button below to see what is available to your organization.

**VIEW OPPORTUNITIES**

4. There are two ways to locate the NYSCA grant application

1. Select ‘Council on the Arts’ from the ‘Search by Funding Agency’ dropdown menu and click ‘Search’
- OR--
2. Type ‘Council on the Arts FY2015’ in the ‘Search by Grant Opportunity’ field

Training Materials | Organization(s) | Profile | Logout

Back

## Opportunities

Search by Grant Opportunity: Council on the Arts FY2015

Search by Due Date: From: [ ] To: [ ]

Search by Eligibility: - All -

Search by Funding Agency: - All -

- Division of Housing & Community Renewal
- Office of Children & Family Services
- Commission on Quality of Care and Advocacy for Persons with Disabilities
- Council on the Arts**
- Department of Agriculture & Markets
- Department of Corrections and Community Supervision
- Department of Economic Development

SEARCH CLEAR

Search Results

Click the Grant Opportunity Name to view the details. Sort the results by clicking on a column header.

- On the results screen, click “Council on the Arts FY2015” under “Grant Opportunity” to view the grant opportunity and begin the application.



New York State  
**Grants Gateway**

Home | Grant Opportunity Portal | Applications | Contracts

Training Materials | Organization(s) | Profile | Logout

[Back](#)

## Opportunities

Search by Grant Opportunity

Search by Due Date From:  To:

Search by Eligibility

Search by Funding Agency

**Search Results**

Click the **Grant Opportunity Name** to view more detail and apply.  
Sort the results by clicking on a column heading (sorting by Eligibility is not an option)  
A full list of Grant Opportunities can be found on the [Grant Opportunity Portal](#).

Funding Agency	Grant Opportunity	Status	Availability Date	Eligibility	Due Date
Council on the Arts	<a href="#">Council on the Arts FY2015</a>	Available	May 12, 2014	Governmental Entity, Not-For-Profit, Tribal Organization	Jun 27 2014 4:00PM

# Completing the NYSCA Grants Gateway Application

1. To begin the application, click on the “Apply for Grant Opportunity” button.

[Back](#)

## Opportunities

NOTICE: Online application is required for this opportunity. If you are concerned about your ability to apply online please contact Megan White at [public.affairs@arts.ny.gov](mailto:public.affairs@arts.ny.gov).

### Funding Profile

**Grant Opportunity ID**

ART01-COA15T-2015

**Agency**

Council on the Arts

**Grant Opportunity**

Council on the Arts FY14/15

**Contact Name**

Megan White

**Contact Email**

[public.affairs@arts.ny.gov](mailto:public.affairs@arts.ny.gov)

**Solicitation Profile**

NYSCA Grant Opportunity - FY2014-2015 Before completing this application component, all applicants must complete the registration and program application on the NYSCA website. [www.arts.ny.gov](http://www.arts.ny.gov) Incomplete applications will not be considered for funding. ---- The NYSCA grant program strives to make investments of public funds that serve all communities and people that comprise New York State's citizens and visitors. NYSCA strongly supports, values and encourages the sustained and concerted efforts of non-profit art, culture and heritage organizations to be inclusive and have its workforce, artists and programmatic offerings reflect New York State's diversity of people, geography and artistic interests. ---- To apply, click the 'Apply for Grant Opportunity' button below. If that button does not appear below, but your organization is eligible to apply, return to the home screen, click 'View Opportunities' and locate the Grant Opportunity from the search screen.

**APPLY FOR GRANT OPPORTUNITY**

**Full Announcement Details**

**Announcement Link** [Click here](#)

**Applications Due (Funding Round (FR) / Date / Time)**

• FR 1 / June 27, 2014 / 04:00 PM EST

**Bidder's Conference(s)/Application Workshop(s)**

*None available*

**Anticipated Award Date****Anticipated Initial Contract Length****Total Funding Available****Anticipated Amount of Award(s)**

**Letter of Intent** Not Required

**Letter of Intent Due**

**Eligible Applicants** Not-For-Profit, Governmental Entity, Tribal Organization

**Target Population(s)****Service Category(ies)**

2. To access the different application sections click on “Forms Menu.” Use this link throughout the application process to return the main menu.

New York State  
Grants Gateway

Home | Grant Opportunity Portal | Applications | Contracts

Training Materials | Organization(s) | Profile | Logout

SHOW HELP

Back

Menu Forms Menu Status Changes Management Tools Related Documents and Messages

Document Information: [ART01-COA15T-2015-00001](#)

[Details](#)

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**APPLICATION MAIN PAGE**

**Council on the Arts FY2015**

[Document Vault](#)

[Application Instructions](#)

1. Use the navigation above (Menu, Forms, etc.) to access the various areas of the application.
2. The **Forms** menu contains the application data input screens.
3. The **Change the Status** link will display a panel containing options for application submission or cancellation.

**Application Reports**

[Schedule and Activities Report](#)

3. The required application sections, or forms, are highlighted below. Click each page name to access the corresponding form. More information on each required form can be found on following pages.

Status	Page Name	Note	Created By	Last Modified By
<b>Contract Documents</b>				
	<a href="#">State of New York Master Grant Contract for Grants</a>			
	<a href="#">Attachment A-1: Program Specific Terms and Conditions</a>			
<b>Application Information</b>				
	<a href="#">Print Application</a>			
	<a href="#">Full Version of RFP</a>			
<b>Program Information</b>				
	<a href="#">Project/Site Addresses</a>			
	<a href="#">Program Specific Questions</a>			
<b>Expenditure Budget</b>				
	<a href="#">Personal Services - Salary</a>			
	<a href="#">&gt; Personal Services - Salary Narrative</a>			
	<a href="#">Personal Services - Fringe</a>			
	<a href="#">&gt; Personal Services - Fringe Narrative</a>			
	<a href="#">Contractual</a>			
	<a href="#">Travel</a>			
	<a href="#">Equipment</a>			
	<a href="#">&gt; Equipment Narrative</a>			
	<a href="#">Space/Property Rent</a>			
	<a href="#">&gt; Space/Property: Rent Narrative</a>			
	<a href="#">Space/Property: Own</a>			
	<a href="#">&gt; Space/Property: Own Narrative</a>			
	<a href="#">Utilities</a>			
	<a href="#">&gt; Utilities Narrative</a>			
	<a href="#">Operating Expenses</a>			
	<a href="#">&gt; Operating Expenses Narrative</a>			
	<a href="#">Other Expenses Detail</a>			
	<a href="#">&gt; Other Narrative</a>			
	<a href="#">Expenditure Summary</a>			
<b>Work Plan: Grantee Defined</b>				
	<a href="#">Work Plan Overview Form</a>			
	<a href="#">Objectives</a>			
<b>Pre-Submission Uploads</b>				
	<a href="#">Pre-Submission Uploads</a>			

In the various expenditure budget forms (Personal Services, Contractual, Travel, etc.) you will account for how your grant request will be allocated. Please consult the guidelines for eligible expenses.

**You only need to fill out the categories where you are allocating requested grant funds.**

# Project/Site Addresses

Please fill out the Project/Site Addresses form accordingly.

**Click Save before moving on to the next form.**

- [Back](#)
  - [Menu](#)
  - [Forms Menu](#)
  - [Status Changes](#)
  - [Management Tools](#)
  - [Related Documents and Messages](#)
- Document Information: [ART01-COA15T-2015-00002](#)  
My Activities: [New 0](#), [Current 0](#), [Review 0](#), [Assigned 0](#)  
[Details](#)

## PROJECT/SITE ADDRESSES

### Instructions:

1. Please complete all required fields.
2. If Project Statewide is "Yes", do not enter Address information. If Project Statewide is "No", please enter address information.
3. Select the **Save** button above to save your work frequently.
4. Click Forms Menu to return to the navigation links.

Name/Description:

Please enter your Unique Application ID (found on the first page "All NYSCA Application Information" report in the NYSCA Portal), Program, Category.

Ex: 2003#####, Museum, General Support

**SPONSORED PROJECTS:** Please also include the name of the sponsored artist or company

Ex: 2003#####, Dance, Professional Performances, Company Q

Project Statewide  \*

Address 1

Please enter your primary address.

Address 2

City

County

State NY

Zip

Regional Council:

If you are unsure which Region you are located in please consult the Regional Map [here](#)

Agency Specific Region:

Select N/A

# Program Specific Questions

Please fill out the Program Specific Questions form accordingly.

**Click Save before moving on to the next form.**

SAVE

CHECK GLOBAL ERRORS

[Back](#)

[Menu](#) [Forms Menu](#) [Status Changes](#) [Management Tools](#) [Related Documents and Messages](#)

Document Information: [ART01-COA15T-2015-00002](#)

My Activities: [New 0](#), [Current 0](#), [Review 0](#), [Assigned 0](#)

[Details](#)

## PROGRAM SPECIFIC QUESTIONS

### Instructions:

1. Please complete all the required fields.
2. Select the **Save** button above to save your work frequently.

Project Title \*

Please enter the Project Title as entered in NYSCA Program application

1 What NYSCA program are you applying for?

i.e. Museum, Theatre, State & Local Partnerships, etc. \*

0 of 250

2 What program category are you applying for?

i.e. General Support, Project Support, Services to the Field, etc. \*

0 of 250

3 Please enter the unique application ID.

This ID can be found on the report available once you have completed the NYSCA program application.

i.e.: 2003##### \*

0 of 250

Please enter your Unique Application ID as found in "All NYSCA Application Information" report

Ex: 2003#####

# Expenditure Budget

In the various expenditure budget forms (Personal Services, Contractual, Travel, etc.) you will account for how your grant request will be allocated. Please consult the guidelines for eligible expenses.

You only need to fill out the categories where you are allocating grant funds. To avoid errors do not enter any information in categories where you will not use your grant funding. You do not need to add any information in the “Narrative” forms.

**Click Save before moving on to the next form.**

Please review the example below. This outlines a grant request for \$10,000 to be used for salary support and contractual services.

## PERSONAL SERVICES - SALARY

### Salary Detail

In the Salary section only include staff positions related to the implementation and the section blank.

### Details

Position/Title \*

Role/Responsibility \*

# in Title \*

### Financial

Annualized Salary Per Position \*

STD Work Week (hrs)

% Funded %

# Months Funded

Total Grant Funds \*

Total Match Funds

Match %

Total Other Funds

Line Total	\$5,000.00
Category Total	\$5,000

Please enter the position or title that will supported by the grant. If it is more than one position, enter 'Multiple Positions' or 'All Positions'

Approx. number of positions supported.

Please briefly describe the responsibility of the position(s) that will supported by the grant. This can simply be 'administrative,' 'artistic,' 'programmatic,' etc.

The approx. TOTAL salary for all positions supported.

Please enter the portion of the grant request that will be used for the category. **THIS IS THE MOST IMPORTANT FIELD ON ALL FORMS. PLEASE BE ACCURATE.**

Upon saving the Line and Category Totals will populate.

# Expenditure Budget, Cont'd

## Contractual Detail

In the Contractual Services section should include costs for services rendered by contractual arrangement. If Contractual is not applicable leave this section blank.

Please enter the type of contractual service (or other category) you will purchase/rent.

such as direct provision

### Details

Contractual - Type/Description

Justification

Briefly describe why you will contract the service (or other category)

### Financial

Total Grant Funds

Total Match Funds

Match %

Total Other Funds

**Line Total**

**Category Total**

Please enter the portion of the grant request that will be used for the category. **THIS IS THE MOST IMPORTANT FIELD ON ALL FORMS. PLEASE BE ACCURATE.**

[Click here to see a summary of the data entered for this category.](#)

[CATEGORY TOTAL SUMMARY](#)

Upon saving the Line and Category Totals will populate.

NOTE: The fields required in 'Contractual' are the same in all other categories, except for Salary, above.

# Expenditure Summary

In order to confirm your Expenditure Budget is correct you must review your Expenditure Summary. This will show you how you have allocated your grant request. This example outlines a grant request for \$10,000 to be used for salary support and contractual services.

**The 'Total' field must be the total of your grant request.**

Any changes must be made in the category's corresponding form. You cannot make changes on this page.

**Click Save before moving on to the next form.**

## EXPENDITURE SUMMARY

### Instructions:

1. Save this form to display a roll-up of the category budget details.
2. Click Forms Menu to return to the navigation links.

Budget Category	Grant Funds	Match Funds	Match % Calculated	Match % Required	Other Funds	Total
1. Personal Services						
a) Salary	\$5,000.00	\$0	0%	0%	\$0	\$5,000.00
b) Fringe	\$0	\$0	0%	0%	\$0	\$0
<b>Subtotal</b>	<b>\$5,000.00</b>	<b>\$0</b>	<b>0%</b>		<b>\$0</b>	<b>\$5,000.00</b>
2. Non Personal Services						
a) Contractual	\$5,000.00	\$0	0%	0%	\$0	\$0
b) Travel	\$0	\$0	0%	0%	\$0	\$0
c) Equipment	\$0	\$0	0%	0%	\$0	\$5,000.00
d) Space/Property & Utilities	\$0	\$0	0%	0%	\$0	\$0
e) Operating Expenses	\$0	\$0	0%	0%	\$0	\$0
f) Other	\$0	\$0	0%	0%	\$0	\$0
<b>Subtotal</b>	<b>\$5,000.00</b>	<b>\$0</b>	<b>0%</b>		<b>\$0</b>	<b>\$5,000.00</b>
<b>Total</b>	<b>\$10,000.00</b>	<b>\$0</b>	<b>0%</b>	<b>0%</b>	<b>\$0</b>	<b>\$10,000.00</b>
PERIOD TOTAL	\$0.00					

Total = Total Grant Requested

# Work Plan Overview

First you must fill in the “Work Plan Overview” then you will be prompted to add “Objective”, “Task” and Performance Measures.

**This language an organization submits will appear on the contract if the request is recommended for funding.**

**Click Save before moving on to the next form.**

## WORK PLAN OVERVIEW FORM

### Instructions:

The purpose of this form is to capture organizational information necessary for application processing, as well as a detailed accounting of the proposed or funded project. It is made up of three sections:

1. Project Summary
2. Organizational Capacity
3. Project Details - Objectives, Tasks and Performance Measures

If applicable, specific instructions/requirements for completing these sections may be found in the Grant Opportunity under which you are applying. Click Forms Menu to return to the navigation links.

Work Plan Period From \* To \*

Work Plan Period = Contract Period. Please enter From: 1/1/2015, To: 12/31/2015

### Project Summary

Provide a high-level overview of the project, including the overall goal and desired outcomes. Include information such as location, target population, overall number of persons to be served, service delivery method and hours of operation.

The Project Summary should align with the Project Description outline in the NYSCA Program Application. For sponsored projects, please include the name of the sponsored project, organization or artist.

### Organizational Capacity

Describe the staffing, qualifications and ongoing staff development/training activities, and relevant experience of the provider organization to support the project.

Please **briefly** describe your organization’s staffing, managerial capability and other organizational strengths related to your grant request. For sponsored projects, we are looking for the Organizational Capacity of the sponsoring organization only. Information on the sponsored project, organization or artist should be included in the Project Summary.

# Objectives

Upon saving your Work Plan Overview, please click on “Objective” in the form menu.  
Please fill out the Objective form accordingly. You may only add one Objective.

Please be brief.

**This language an organization submits will appear on the contract if the request is recommended for funding.**

**Click Save before moving on to the next form.**

## OBJECTIVES

### Instructions:

1. Enter an *Objective* in the field provided below.
2. Select the **Save** button.
3. To add another *Objective*, select the **Add** button above.
4. Follow the directions below for adding *Tasks* to the *Objective*.
5. Click Forms Menu to return to the navigation links.

### Objective Name

Please title your objective. This may simply be Organization Name’s Objective.

### Objective Description

An objective is what you plan to achieve with the grant funding. Limit: 250 characters.

For example: an upcoming programming season, a specific individual project, supporting general operations etc.

### Instructions for Adding Tasks for this Objective:

Click the **Task** link in the Forms Menu navigation panel above to add a Task to this Objective.

# Tasks

Upon saving your Objective, please click on “Tasks” in the form menu. Please fill out the Task form accordingly. You may only add one Task.

Please be brief.

**This language an organization submits will appear on the contract if the request is recommended for funding.**

**Click Save before moving on to the next form.**

## TASKS

### Instructions:

1. Enter an *Task* in the field provided below.
2. Select the **Save** button.
3. To add another *Task*, select the **Add** button above.
4. Follow the directions below for adding *Performance Measures* to the *Task*.
5. Click Forms Menu to return to the navigation links.

Objective: test  
Task Name

Please enter your organization’s name and the word ‘task’

i.e. XYZ Theater’s Task

### Task Description

A task is an activity which will enable you to achieve your objective. Limit: 250 characters.

For example, if your objective is your upcoming programming season, your tasks will be to have a series of five performances that will comprise that season.

### Instructions for Adding Performance Measures for this Task:

Click the **Performance Measures** link in the Forms Menu navigation panel above to add a Performance Measure to this Task.

# Performance Measures

Upon saving your Task, please click on “Performance Measure” in the form menu. Please fill out the Performance Measure form accordingly. You may only add one Performance Measure.

Please be brief

**This language an organization submits will appear on the contract if the request is recommended for funding.**

**Click Save before moving on to the next form.**

## PERFORMANCE MEASURE

### Instructions:

1. Enter a *Performance Measure* in the field(s) provided below.
2. Select the **Save** button.
3. To add another *Performance Measure*, select the **Add** button above.
4. Click Forms Menu to return to the navigation links.

Objective: test  
Task: test

Performance Measure Name

Please title your performance measure. This may simply be Organization Name's Performance Measure.

Narrative

0 of 500

Performance Measures are how you will determine you have successfully achieved your objective. Limit: 250 characters.

For example, if your objective was for your upcoming programming season, your performance measure could reference increased attendance, attracting new audiences or strong reviews.

# Pre-Submission Uploads

Please upload ALL support materials to this page. Please review your [funding category's guidelines](#) for a list of required support materials. The complete list can be found under the heading "Mandatory Support Materials"

Do not submit your application until you have uploaded ALL required support materials. Applications **CANNOT** be reopened after they are submitted.

**Click Save before moving on to the next form.**

To upload a file click the "Choose File" button, located the appropriate file and click "Open".

**All NYSCA Application Information**  
Required of all applicants. Please upload a copy of your Organization Profile, Organizational Budget, Registration and Program Application as completed in the NYSCA application portal

No file chosen \*

**NYS Cultural Data Project (CDP) Funder Report**  
Required of all applicants. To complete and download the CDP visit: [www.nysculturaldata.org](http://www.nysculturaldata.org)

No file chosen \*

**Résumés or Biographical Statements**  
If required by the funding category you are applying for, please upload Résumés or biographical statements for the key artistic or administrative staff.

No file chosen

**Marketing Materials**  
If required by the funding category you are applying for, please upload relevant marketing materials.

No file chosen

**List of Links/URLS**  
If required by the funding category you are applying for, please upload a PDF or Word document with a list of relevant URLs. Please be sure to describe each link/url in the file. URLs cannot be password protected and must remain live until December 31, 2014. NYSCA is not responsible for any broken, inactive or password protected links.

No file chosen

**Additional Support Materials**  
Please consult the funding category guidelines for additional support required. Upload here. Please include your organization and the name of the support material in the file name. i.e. OrganizationXEventSchedule.pdf, OrganizationXSampleContract.pdf

No file chosen

## NOTES:

- You are required to upload All NYSCA Application Information (Organization Profile, Budget, Registration and Program Application) as completed in the NYSCA Portal. This information is available upon submitting a Program Application in the NYSCA Portal by clicking the "View All NYSCA Application Information" link.
- All applicants **MUST** upload All NYSCA Application Information and the NYS Cultural Data Project (CDP) Funder Report.
- **Applications submitted without ALL mandatory support materials will not be considered for funding.**

# Submitting an Application

**DO NOT SUBMIT YOUR APPLICATION UNTIL YOU CERTAIN IT IS COMPLETE AND ACCURATE. ONCE SUBMITTED, APPLICATIONS CANNOT BE REOPENED AND EDITED. ALL INCOMPLETE APPLICATIONS WILL BE DEEMED INELIGIBLE.**

This information was pulled from the “NYS Grants Gateway Vendor's Quick Start Guide - How to apply for an Online Opportunity”. To reievw the full Quick Start guide, [click here](#)

## 9. Submit the Application

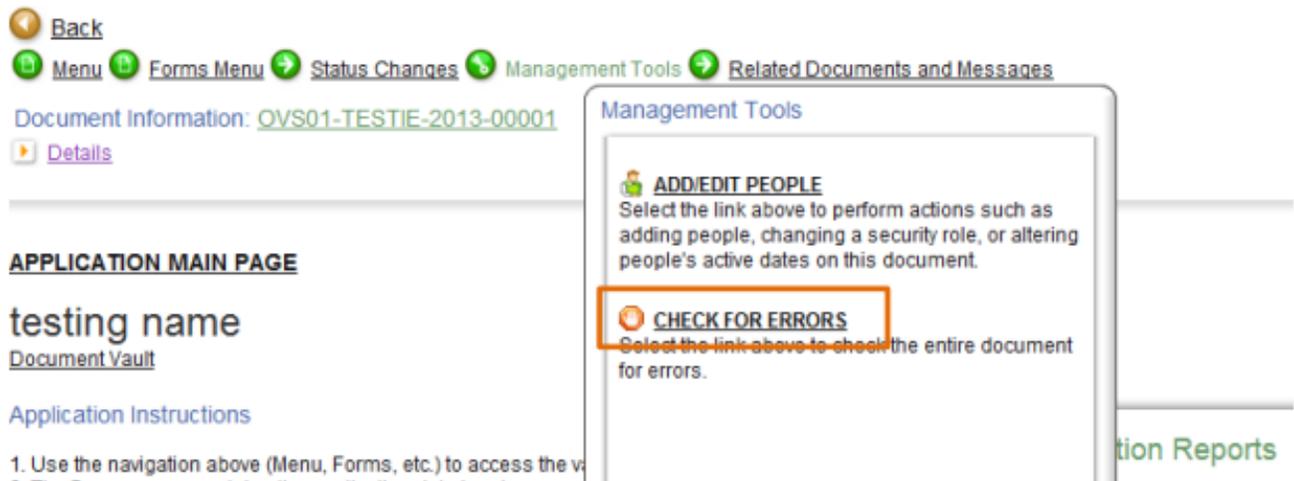
9.1. Log in to the Grants Gateway with one of the following Grants Gateway roles.

- Grantee Contract Signatory
- Grantee System Admin

9.2. Retrieve the completed application by searching for it under the Applications link on top of the screen

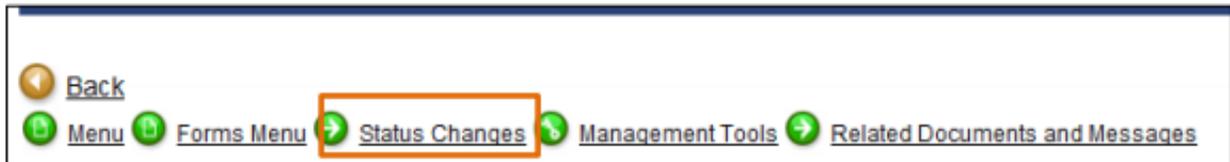


9.3. To check your application for errors, click on the “Check for Errors” link under the management tools link:



This will provide you with a list of errors that need to be corrected before submission.

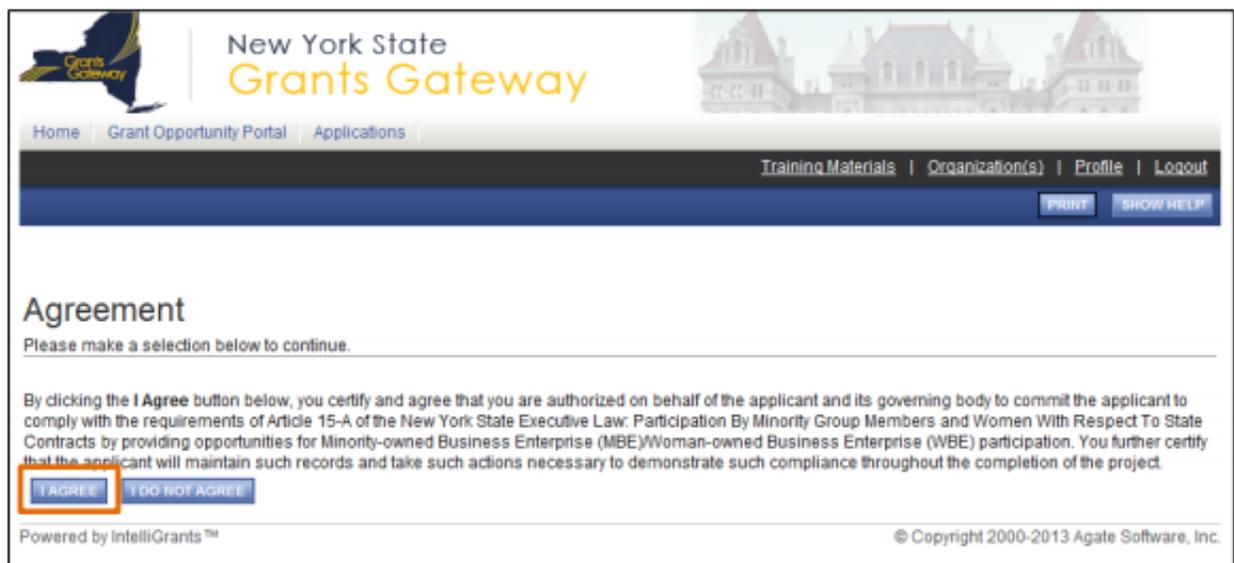
- 9.4. In order to submit your online application, click on the Status Changes link located top of your application main page.



- 9.5. Click on the APPLY STATUS button located under APPLICATION SUBMITTED



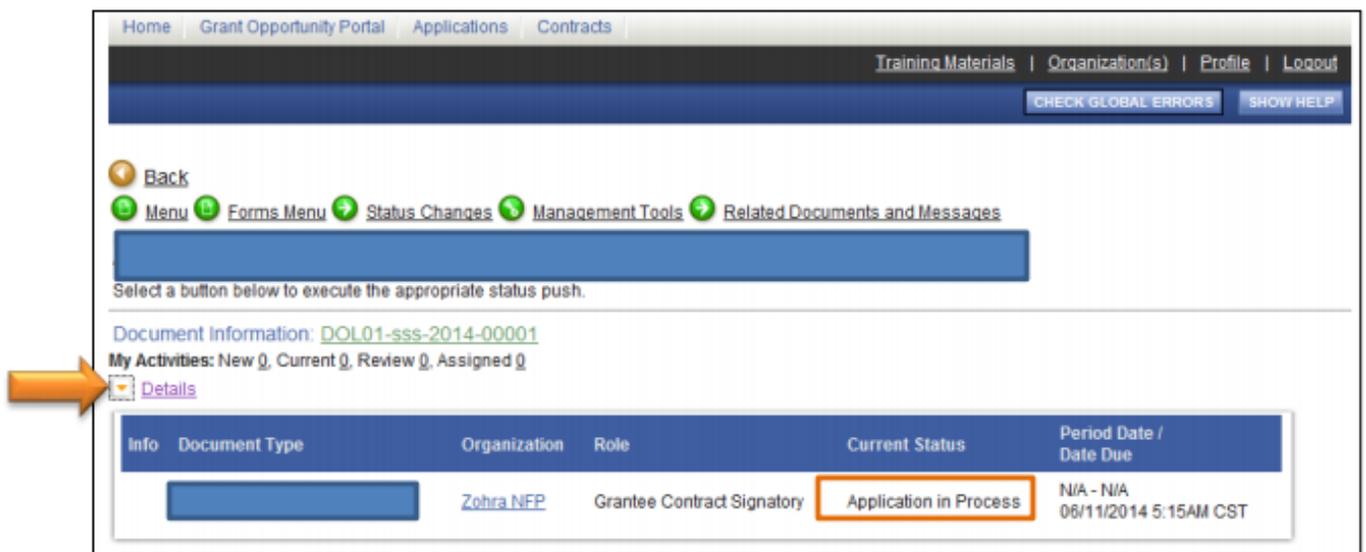
- 9.6. Prior to final submission, you will need to certify the agreement as stated. Please read the paragraph closely and click on I agree. If you select I DO NOT AGREE, your application will not be submitted. Click I AGREE to submit the application.



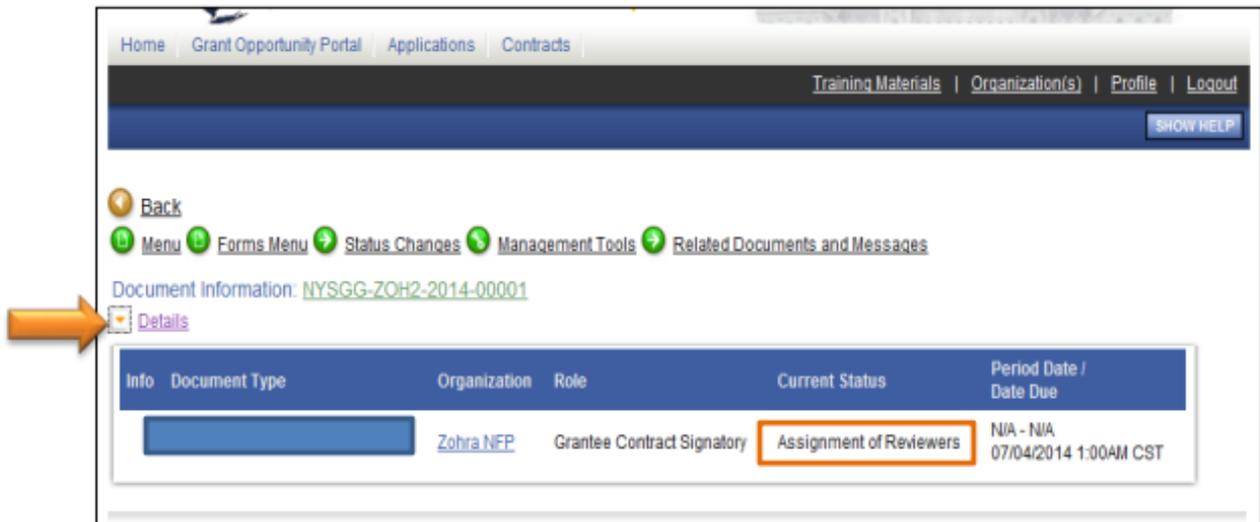
- 9.7. Once your application is submitted you are returned to the Application main page. If you hover over the status changes link you will see that there are no available status options at this time.



- 9.8. To check the current status of your Application click on the Details link. When you are working on your Application, the application status would say "Application in Process".



9.9. After you submit your application, the application status in the Details grid would say "Assignment of Reviewers" Congratulations! This status means you have successfully submitted an application.



Home Grant Opportunity Portal Applications Contracts

Training Materials | Organization(s) | Profile | Logout

SHOW HELP

Back

Menu Forms Menu Status Changes Management Tools Related Documents and Messages

Document Information: [NYSGG-ZOH2-2014-00001](#)

Details

Info	Document Type	Organization	Role	Current Status	Period Date / Date Due
		<a href="#">Zohra NFP</a>	Grantee Contract Signatory	Assignment of Reviewers	N/A - N/A 07/04/2014 1:00AM CST

# Locating an Application You've Already Started

This information was pulled from the "NYS Grants Gateway Vendor's Quick Start Guide - How to apply for an Online Opportunity". To review the full Quick Start guide, click [here](#)

## **8.** Retrieve the Application you already started

- 8.1. If you need to save your work and come back at a later time, you can do so. To retrieve the application you already started, click on the Applications link located at the top of your home screen and enter search criteria to locate the application.

New York State Grants Gateway

Home Grant Opportunity Portal **Applications** Contracts

Training Materials | Organization(s) | Profile | Logout

Back

### Applications

Use the search criteria below, then select the Search button.

Search Applications

Use the search criteria below, then select the Search button.

Agency: Office of Victim Services

Grant Opportunity Name: Victims of Crime Act (VOCA) Victim and Witness Assistance Grant Proc

Current Application Status: - SELECT -

-OR-

Application Status: - SELECT - From To

Application Type: - SELECT -

Application Number:

SEARCH CLEAR

- 8.2. The system will display the application you have already started.

Search Results

Export Results to: Screen Sort by: -- Select -- GO

Number of Results 1

Application Number	Grant Opportunity Name	Application Type	Organization Legal Name	Status	Start Date	End Date
<a href="#">OVS01-VOCA-2014-00001</a>	2014 VICTIMS OF CRIME ACT VICTIM AND WITNESS ASSISTANCE GRANT PROGRAM	Competitive	Zohra NFP	Application in Process	Apr 01, 2014	

- 8.3. Click on the application number to restart the application where you left it earlier.
- 8.4. It is very important you do not click "Apply for Grant Opportunity" again in the system, as it will create duplicate applications (if the RFP allows more than one application per grantee). Once an application has been initiated, you should continue using that one by utilizing the application search function.



# NYS Grants Gateway Grantee Role Description

## GRANTEE ROLES

### GRANTEE

The Grantee role is the Grantee Organization user responsible for performing tasks related to applications, contracts and reporting. Activities for this role include but are not limited to:

- Initiate and complete applications
- Comply in a timely manner with Agency requests for information
- Initiate payment and modification requests
- Submit modification requests
- Initiate, complete and submit progress reports

### GRANTEE CONTRACT SIGNATORY

The Grantee Contract Signatory role is the user authorized to review and sign contracts on behalf of the Grantee Organization. Activities for this role include but are not limited to:

- Initiate, complete and submit applications
- Sign contracts
- Initiate, complete and submit modification requests
- Initiate payment requests
- Initiate, edit and submit progress reports

### GRANTEE DELEGATED ADMINISTRATOR

The Grantee Delegated Administrator is the Grantee Organization user responsible for performing user management tasks within the system. This includes but is not limited to creating and maintaining user accounts and ensuring that user accounts remain current.

### GRANTEE PAYMENT SIGNATORY

The Grantee Payment Signatory role is the user authorized to review and submit payment requests on behalf of the Grantee Organization. Activities for this role include but are not limited to:

- Initiate applications
- Initiate, complete and submit modification and payment requests
- Initiate, complete and submit progress reports



## GRANTEE SYSTEM ADMINISTRATOR

The Grantee System Administrator role is the user authorized to complete all the processes required of a Grantee user. Activities for this role include but are not limited to:

- Initiate, complete and submit applications
- Sign contracts
- Initiate, complete and submit modification and payment requests
- Initiate, complete and submit progress reports

## GRANTEE VIEW ONLY

The Grantee View Only role is the user authorized to view all information for the Grantee Organization. This role is assigned permission to view documents, reports and statuses.