

**Congressman Chip Pickering (MS-03)  
Fiscal Year 2009 Appropriations Request Form**

**Deadline for submissions is February 8, 2008.**  
For questions, please contact staff at (202) 225-5031.

Date Submitted: \_\_\_\_\_

Project Title: \_\_\_\_\_

Project Address: \_\_\_\_\_

Recipient of Funds/Grantee: \_\_\_\_\_

Recipient's Address: \_\_\_\_\_

Project County: \_\_\_\_\_

**Point of Contact:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Mobile: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Requested Amount: \$ \_\_\_\_\_

**Requested Source of Federal Funding:**

Appropriations Bill: \_\_\_\_\_

Agency: \_\_\_\_\_

Account: \_\_\_\_\_

Sub Account: \_\_\_\_\_

**Project Non-Federal Match: (Include source, amount, and date received.)**

Project Sponsor Match: \_\_\_\_\_

State Government Match: \_\_\_\_\_

Local Government Match: \_\_\_\_\_

Other Match: \_\_\_\_\_

**Has this program been previously authorized?** (Please circle) Yes No

If yes, Bill number: \_\_\_\_\_ Year: \_\_\_\_\_

**Is this program funding in the President's budget request?** (Please circle) Yes No

If yes, Amount: \_\_\_\_\_ Account: \_\_\_\_\_

**Prior Funding:**

1. Has the project ever previously received federal discretionary funding?  
(Please circle) Yes No

If yes:

What year were the funds received? \_\_\_\_\_

What was the amount received? \$ \_\_\_\_\_

Please include the corresponding appropriations bill number: \_\_\_\_\_

Please describe how the funds were specifically spent?

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2. Please list all prior non-discretionary funding including federal, state, local, and private sources, such as grants or donations. Please include the amounts, dates received, and uses of prior non-discretionary or private funding. Use additional sheets if necessary.

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3. Has the prospective recipient previously applied for federal grants or small business assistance? If so, please describe the funding provided.

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**Project Description** (Please circle answer where relevant)

1. Please attach a description of the project and purpose of the project.
2. Please include an executive summary of the project's purpose: (please limit your executive summary to no more than 250 characters)

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3. Please include an executive summary of the project's description: (please limit your executive summary to no more than 250 characters)

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4. Explain the need for federal support.

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5. Can the project be completed within one year? (Please circle) Yes No

6. Can the requested funds be used within one year? Yes No

7. Can the requested funding be provided over multiple years? Yes No

8. If this is a phased program or project, what is the total project cost? \$ \_\_\_\_\_

- a. Please attach an explanation of future year requirement.

9. How will the project support economic development, i.e. # of jobs created?

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10. If a feasibility study has been completed please provide a copy with the application.

11. If this is a **Transportation Project**:

- a. Has eligibility with MDOT, FTA, FRA, or FAA been verified? Yes No

If yes, please provide verification.

- b. Is the project considered by the state as critical to their needs? Yes No

- c. If this is a highway request, is the project on the State's Transportation Improvement Plan (STIP)? Yes No

If yes, please include information from the STIP

- d. Please provide a minimum of one endorsement by state and local officials, such as letters or resolutions.

12. If this is a **Labor, Health and Human Services, Education and Related Agencies** request:

- a. Is this a new project?

- b. Please include a project breakdown (e.g. salaries, equipment, construction costs, etc.)

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**Additional Information:** (please circle where relevant)

1. Have you requested support from other members of the state delegation?

Yes No

If yes, who? \_\_\_\_\_

2. Does your project involve institutions or organizations outside of Mississippi?

Yes No

If yes, who? \_\_\_\_\_

**Please email this completed form with required attachments to  
hugh.carroll@mail.house.gov or fax to (202) 225-5797.  
If you have any questions, please contact staff at (202) 225-5031**