# Description: C:\Users\mmarhein\Desktop\banner_oregon.jpg Fiscal Year 2015

**U.S. Department of Homeland Security**

Emergency Management

State Homeland Security Grant Program

Project Planning Worksheet

December 2014



**State Homeland Security**

**Project Planning Worksheet**

# Overview

This worksheet is for applicants applying for the FY2015 State Homeland Security Grant Program (SHSGP) funding in compliance with FY2015 Application Instructions and Grant Guidance. This worksheet must be completed in full and provide a detailed budget as identified in the application instructions. No more than seven (7) worksheets may be turned in per county or tribe.

# Project Information:

(See page 7 of application instructions)

|  |
| --- |
| **1. County or Tribe:**  |
|       |

|  |
| --- |
| **2. Project Name:**  |
|       |

|  |
| --- |
| **3. Total Federal Funding Requested:**  |
|       |

# Investment Justification

(See page 4 of application instructions)

|  |
| --- |
| **4. Identify State IJ:** |
|  |

# Baseline: New or Ongoing Project

**Capabilities that will be created or enhanced by the project.**

(See pages 7 and 8 of application instructions)

|  |
| --- |
| **5. Project Phase: (Place an “X” in the corresponding box) (Point Value = 5)** |
| **[ ]** Sustaining or maintaining a core capability acquired with Federal funding**[ ]** Sustaining or maintaining a core capability acquired without Federal funding **[ ]** Developing or acquiring a new core capability (new capabilities must be deployable)Description of Capabilities:      |

# Project Description:

**Provide a detailed description of this project.**

(See page 8 of application instructions)

|  |  |
| --- | --- |
| **6. Description of Project:** | **(Point Value = 30)** |
|       |

# Equipment or Services

**Equipment or services to be purchased for the project.**

(See page 8 of application instructions)

|  |  |
| --- | --- |
| **7. Project Outputs:**  | **(Point Value = 10)** |
|       |

# Capabilities

**Capabilities that will be created or enhanced by the project.**

(See pages 8 and 9 of application instructions)

|  |  |
| --- | --- |
| **8. Project Outcomes:**  | **(Point Value = 15)** |
|       |

# State Strategy:

**Identify all goals and objectives in the State Homeland Security Strategy supported by this project.**

(See page 9 of application instructions)

|  |  |
| --- | --- |
| **9. Project Goals and Objectives:**  | **(Point Value = 5)** |
|       |

# Proposed Funding by Solution Area:

**Provide the Proposed Funding amount to be obligated from this project towards Planning, Organization, Equipment, Training, and Exercises (POETE). (Please provide amounts for all that apply)** (See page 9 of application instructions)

|  |  |
| --- | --- |
| **10. Proposed Funding:**  | **(Point Value = 5)** |

|  |  |  |
| --- | --- | --- |
| **Solution Area** | **Amount of Proposed Funding $** | **Funds dedicated to****LETPA\*** |
|  |
| Planning | $0 | $0 |
| Organization | $0 | $0 |
| Equipment | $0 | $0 |
| Training | $0 | $0 |
| Exercises | $0 | $0 |
| **Total Proposed Funding:** | **$****0** | **$****0** |

*\* If applicable, provide the proposed funding amount that is expected to be obligated towards Law Enforcement Terrorism Prevention Activities (LETPA).*

# Core Capabilities:

**Select all Core Capabilities supported by this Project. (Place an “X” in the corresponding boxes)**

(See page 9 of application instructions)

|  |  |
| --- | --- |
| **11. Project Core Capabilities:**  | (check all that apply) |
| [ ]  Access Control and Identity Verification[ ]  Community Resilience [ ]  Environmental Response/Health and Safety[ ]  Infrastructure Systems[ ]  Intelligence and Information Sharing[ ]  Interdiction and Disruption[ ]  On-Scene Security and Protection | [ ]  Operational Communications[ ]  Operational Coordination [ ]  Planning [ ]  Public Information and Warning[ ]  Screening, Search, and Detection[ ]  Situational Assessment[ ]  Threats and Hazard Identification |

# Milestones:

**Identify Milestones by quarter, with start and end dates, which will be achieved within the period of performance.**

(See pages 9 and 10 of application instructions)

|  |  |
| --- | --- |
| **12. Project Milestones:**  | **(Point Value = 15)** |
| **Quarter** | **Milestones** | **Start Date****(mm/yyyy)** | **End Date****(mm/yyyy)** |
| **1** |       | 10/2015 | 12/2015 |
| **2** |       | 01/2016 | 03/2016 |
| **3** |       | 04/2016 | 06/2016 |
| **4** |       | 7/2016 | 9/2016 |

# Sustainment:

**Identify how you will sustain the project.**

(See page 10 of application instructions)

|  |  |
| --- | --- |
| **13. Sustainment:**  | **(Point Value = 15)** |
|       |