**FY 2020 CYS NOFO Application – Appendix 14**

**Executive Summary**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Agency Name: | | | | | FEIN: | | |
| Address: | | City: | | State: | | | Zip: |
| Projected Total youth to be served in FY20: | | Agency Website: | | | | | |
| Agency Telephone Number: | | Email Address | | | | | |
| Total Amount Requested: | Total Area Project Boards Requested: | | Total Community Committees Requested: | | | Projected Total Youth Served: | |

In the table below, please identify each Area Project Board and Community Committee applied for. There should be a separate row completed for each separate Community Committee. If additional lines are needed, please add.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Area Project Board (APB) Name | APB New or Established | Community Committee (CC) Name | CC New or Established | CC Service Area | Proposed # Youth to be served | Funds Requested  Per Service Area |
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*Add additional rows as necessary*