

2011 Traffic Safety Symposia

WEB-BASED GRANTS MANAGEMENT SYSTEM

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NC DOT/ Governor's Highway Safety Program

Grants Management



- Beginning in 2011, the grant application process will **ONLY** be available on the new web-based system.
- Any agency interested in receiving a grant with GHSP will be required to use the new grant system.
- Information will be entered and stored in an online web-based portal.
- All applications, claims and revisions will be completed and transmitted via internet.

Benefits to New System



- Streamline Current Procedures
 - Real time transfers. Ability to view the status of application, claims and changes to contract at anytime.

- Improve Communications
 - Emails and “notes” displays on portal

- Reduce Paperwork
 - GHSP is going green. No more paper copies. No more files. All data will be submitted and stored electronically.

Benefits to New System



- Error Proof
 - Built in checks and balances. No more mathematical errors. No more transpiring numbers incorrectly.

- Simplified PDF Forms
 - GHSP forms look the same, no proposal needed. Ability to print/download other GHSP forms from your portal.

Negatives to New System



NONE

But you will have to learn how to navigate through the new system.

New Word Translations



Application = Concept, Traffic Safety Proposal

Agreement = Approved Contract

Change Request = Revision

SR_Applicant = Grantee, Project Director

Steps of the Process



Attain a User ID
January-February

Attend Training
February-March

Submit Application End of
March-April

Make Changes to
Application or Receive
Notification of Rejected
Application
May-August

Receive Notification of
Approved Agreement
October

Submit Claims, Revisions,
Upload Documents,
Quarterly Reports, Monthly
Enforcement Reports
October 1, 2011-
September 30, 2012

User ID, Passwords and PIN's

Why do we need a user ID and password?

- A user ID and password identifies the user and is required for access in the new system. It is necessary for the ability to view or perform changes to your GHSP grant.

How to get I get a user name, password and PIN?

- Complete the “Grant Management Access Authorization” form and fax to GHSP or email to GHSPSecurity@ncdot.gov

Can I choose my own password?

- The first time you log on to the grants system, you will be required to change your password.

User ID's Passwords and PIN's

Do I have to change my password?

- For security purposes, passwords will be changed every 90 days.

What happens if I get locked out of the system or forget my passwords?

- The grants system will lock if there has been no activity for 30 days or more. If you cannot log on, or if you forgot your user ID or password, contact the DOT Help Desk for assistance.

What is a PIN?

- A PIN represents an electronic signature and is unique to a specific person.

Why is a PIN needed?

- A PIN permits you to sign documents and transmit electronically.

How many PINS can my agency receive?

- No more than three (3) PIN's will be issued per agency.

Grants Management Access Authorization Form

The new Grant Management System requires a User ID and Password for access in the system. Complete Section 1 for a User ID and Password only, which will allow you to view, but not submit any information connected to a Grant. If you are going to perform work within the Grants System (i.e. submit an application, submit a claim, or make changes to an agreement), you must complete Section 1 and 2 for a PIN. No more than three (3) PIN's will be issued per agency. A separate form will be required for each User ID and PIN issuance. Fax 919-733-0604 or email the form to the GHSP Security Coordinator at GHSPSecurity@ncdot.gov

Section 1 - User ID Information

First: _____ Last: _____

Agency: _____

Agency Address: _____

Title: _____

Telephone: _____ Fax: _____

Email: _____

Secure 8 digit number: _____

If you forget your password, you will need this 8 digit # to retrieve your information. It is suggested to use the last 4 digits of your SSN & birthday (MMDD). After your application has received security clearance, you will be emailed your personal User ID and temporary password to access the system. You must create a new password prior to logging into the Grants System for the first time.

Section 2 - PIN Request Information

Final approval of Application, Claims for Reimbursement and Change Request forms will require the use of a PIN. A PIN represents an electronic signature and is unique to a specific person. In order for GHSP to issue a PIN, you must be an active employee of the department and the person responsible for the role. The following roles require the use of a PIN, please check which application you will be responsible for pinning (signing).

- Submit Final Application
- Create/Submit Claims for Reimbursement
- Create/ Submit Change Request

Choose a PIN with a minimum of 4 characters. PIN Number: _____

I certify information above is accurate and I am the authorized person to perform the duties listed.

Print Name: _____

Signature: _____

Agency Head Signature*: _____

**As agency head, I understand that allowing someone to request a pin permits them to sign documents for this agency.*

Grants Management Access Authorization Form



- Complete Section 1 for a User ID and Password.
 - ▣ Allow you to “VIEW ONLY” the grant, but not submit information.

- Complete Section 1 & 2 for User ID, password and PIN
 - ▣ Allow you to perform work within the Grants System; create applications, claims and change request forms. Any document that requires a signature.

Grants Management Access Authorization Form-

Section 1

Section 1 - User ID Information

First: _____ Last: _____

Agency: _____

Agency Address: _____

Title: _____

Telephone: _____ Fax: _____

Email: _____

Secure 8 digit number: _____

If you forget your password, you will need this 8 digit # to retrieve your information. It is suggested to use the last 4 digits of your SSN & birthday (MMDD). After your application has received security clearance, you will be emailed your personal User ID and temporary password to access the system. You must create a new password prior to logging into the Grants System for the first time.

Grants Management Access Authorization Form-

Section 2

Section 2 - PIN Request Information

Final approval of Application, Claims for Reimbursement and Change Request forms will require the use of a PIN. A PIN represents an electronic signature and is unique to a specific person. In order for GHSP to issue a PIN, you must be an active employee of the department and the person responsible for the role. The following roles require the use of a PIN, please check which application you will be responsible for pining (signing).

- Submit Final Application
- Create/Submit Claims for Reimbursement
- Create/ Submit Change Request

Choose a PIN with a minimum of 4 characters. PIN Number: _____

User ID Request Form – Last Section



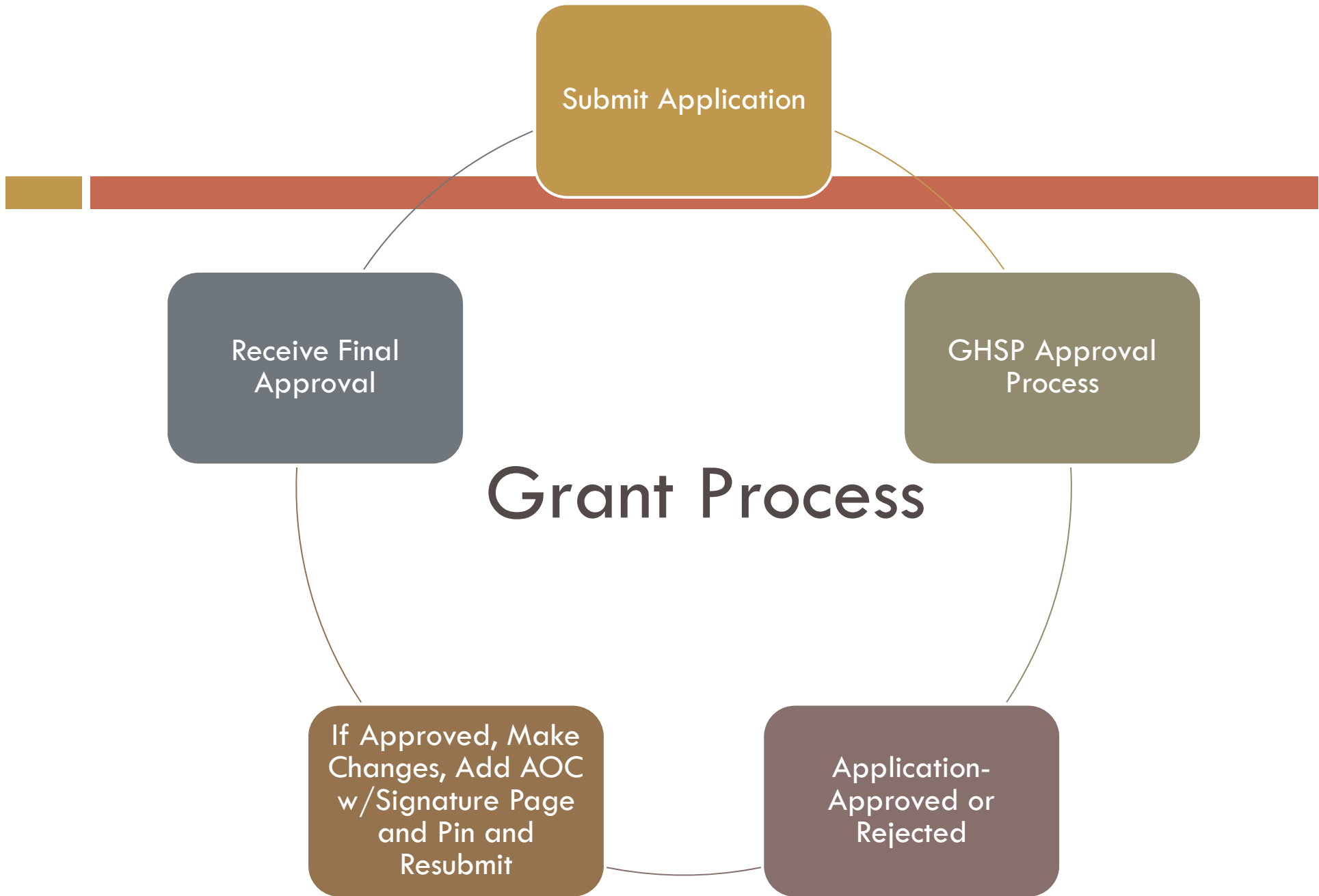
I certify information above is accurate and I am the authorized person to perform the duties listed.

Print Name: _____

Signature: _____

Agency Head Signature*: _____

**As agency head, I understand that allowing someone to request a pin permits them to sign documents for this agency.*



Submit Application

GHSP Approval Process

Grant Process


Receive Final Approval


If Approved, Make Changes, Add AOC w/Signature Page and Pin and Resubmit

Application-Approved or Rejected



SAP NetWeaver™ SAP Web Application Server

 No switch to HTTPS occurred, so it is not secure to send a password

System	<input type="text" value="QCR"/>
Client *	<input type="text" value="200"/>
User *	<input type="text"/>
Password *	<input type="password"/>
Language	<input type="text" value="English"/> 
	<input type="button" value="Log On"/>

[Change Password](#)


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Home

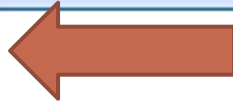
Grants Home

 Recent Items

- 1000000016
- 1000000015
- 2000000007
- 1000000013
- 1000000012

Activity Links

- Submit Application
- Review Application
- View Agreement
- Submit Amendment
- Submit Claim
- Review Claim





Search: Application Form

Back

Grants Home

Recent Items

- 1000000016
- 1000000015
- 2000000007
- 1000000013
- 1000000012

Search Criteria

Hide Search Fields

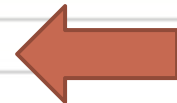
Program ID	is	G001*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Program Description	is		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Program Type	is		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Service Organization	is		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Maximum Number of Results

Save Search As

Result List: 3 Application Forms Found

Program ID	Application Form
G001_2010	
G001_2010_01	GHSP Application Form - Adobe
G001_2010_02	GHSP Application Form - Adobe



New Application Form

Grants Home

Recent Items

- 100000016
- 100000015
- 200000007
- 100000013
- 100000012

1 / 4


73.9%

Please fill out the following form. You can save data typed into this form.


GHSP-01

1. Name of Applicant Agency CITY OF LOCUST POLICE DEPARTMENT	4. Name of Project Contact Person for Agency Sub-recipient Recipient
2. Address of Applicant Agency LOCUST, NC 28097-0190	5. Telephone Number of Contact Person * +1 (919) 707-2128
3. Location of Project (if different from # 2)	6. Email Address of Contact Person * mpandya@ncdot.gov
8. Federal Tax ID Number / Type of Agency Federal Tax ID Number: *56-1179643 County: <input type="text"/>	7. Fax Number of Contact Person +1 (919) 707-2016
Type of Agency <input type="radio"/> State <input type="radio"/> Non-Profit <input type="radio"/> County <input type="radio"/> Higher Education <input type="radio"/> Municipality <input type="radio"/> Hospital	9. Type of Application * <input type="radio"/> Initial <input type="radio"/> Continuation Year: <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3
	10. Funding Share * Federal % Local % <input type="text"/>

New Application Form

 Back

Grants Home

 Recent Items

- 1000000016
- 1000000015
- 2000000007
- 1000000013
- 1000000012

Select View

Request was saved with number 1000000017

Do you want to add attachments? Yes No





Home



Grants Home



Recent Items

- 1000000016
- 1000000015
- 2000000007
- 1000000013
- 1000000012

Activity Links



- Submit Application
- Review Application
- View Agreement
- Submit Amendment
- Submit Claim
- Review Claim

Application: 1000000017, G001_2010_01 -CITY OF LOCUST POLICE DEPA

Back [dropdown]

Save | Cancel | New | Create Activity | Create Agreement | Refresh

Grants Home

Recent Items

- 1000000016
- 1000000015
- 2000000007
- 1000000013
- 1000000012

Application Details [Edit]

General Data

Description G001_2010_01 -CITY OF LOCUST POLIC

Grantee ID/Name 1000000344 / CITY OF LOCUST POLICE

Grantee Contact Sub-recipient Recipint

Program ID G001_2010_01 / Traffic Safety Project Cor

Service Organization Service

Employee Responsible Shannon Bullock

Start Date 12/01/2010

End Date 11/30/2011

External Reference

Status Submitted

Application Amounts

Requested Amount 77,250.00 USD

Funding Sources

% Local	50.00	% Federal (NB)	0.00
WBS Element			
FA Project Number			
Grant Dept		CFDA Number	

DBE, MBE, WBE Participation Goals

DBE %	0.00	WBE %	0.00	MBE %	0.00
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Application Form

Version 0000000001

View GHSP Application Adobe Form View

Last Changed By SR_APPLICANT

Change Date 01/04/2011 14:24:09

Application: 1000000017, G001_2010_01 -CITY OF LOCUST POLICE DEPA

Back

Save | Cancel | New | Create Activity | Create Agreement | Refresh

Grants Home

Recent Items

- 1000000017
- 1000000016
- 1000000015
- 2000000007
- 1000000016
- 1000000015
- 2000000007
- 1000000010
- 2000000007
- 1000000013

Application Details [Edit](#)

General Data

Description G001_2010_01 -CITY OF LOCUST POLIC
 Grantee ID/Name 1000000344 / CITY OF LOCUST POLICE
 Grantee Contact Sub-recipient Recipint
 Program ID G001_2010_01 / Traffic Safety Project Cor
 Posting Date 01/04/2011
 Last Changed By/On WF-BATCH / 01/05/2011
 Service Organization Service
 Employee Responsible Shannon Bullock
 Start Date 12/01/2010
 End Date 11/30/2011
 External Reference

Application Amounts

Requested Amount 77,250.00 USD

Funding Sources

% Local	50.00	% Federal (NB)	0.00
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Project Information

WBS Element	
FA Project Number	
Grant Dept	CFDA Number

DBE, MBE, WBE Participation Goals

DBE %	0.00	WBE %	0.00	MBE %	0.00
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Application Form

Attachments [Attachment](#) [URL](#) [With Template](#) | Advanced

No result found

Transaction History

**North Carolina Governor's Highway Safety Program
Claim for Reimbursement
Cost Summary Statement - GHSP-08**

To: Governor's Highway Safety Program 215 East Lane Street Raleigh, NC 27601		From: 1000000344 - CITY OF LOCUST POLICE DEPARTMENT	
		Phone:	
Project Number:		Final: <input type="radio"/> Yes <input type="radio"/> No	
Claim Number:		Period of Claim - From: * To: *	
Agreement ID: 2000000002		Claim Date: * Jan 9, 2011	
Funding Share -		Federal %: 70.00% State / Local %: 30.00%	

Expenditures This Period

Cost Categories	Total Budget	Approved Expenditures	Expenditure this Period	Federal Share this Period	State / Local Share this Period	Balance
Personnel Services	\$35,650.00	\$1,300.00		\$0.00	\$0.00	\$34,350.00
Contractual Services				\$0.00	\$0.00	
Commodities				\$0.00	\$0.00	
Other Direct Cost	\$14,450.00	\$2,500.00		\$0.00	\$0.00	\$11,950.00
Indirect Cost				\$0.00	\$0.00	
Total	\$50,100.00	\$3,800.00		\$0.00	\$0.00	\$46,300.00

Total Federal Share Request for Reimbursement This Period: \$0.00

Questions?????



What's Next....

- Submit Application Demo
- Submit Claim Demo
- Submit a Change Request for Agreement
- Personalize help completing User ID Request Forms

http://crmqas.dot.nc.net:8052/sap/crm_logon?sap-client=200