Exhibit C

Centers for Disease Control and Prevention (CDC)
Procurement and Grants Office
Instructions for Preparing an Interim Progress Report
Catalog of Federal Domestic Assistance (CFDA) Number:92.283
Funding Opportunity Announcement (FOA) Number: 0504209CONT08
Centers for Public Health Prepardness
Coordinating Office of Terriorism Prepardness and Emergency Response

Eligibility:

This award will be a continuation of funds intended only for grantees previously awarded under 0504209CONT08-Centers for Public Health Prepardness.

Application Submission:

CDC requires grantees to submit their Interim Progress Reports through www.Grants.gov. If you encounter any difficulties submitting your interim progress report through www.Grants.gov , please contact CDC's Technical Information Management Section at (770) 488-2700 prior to the submission deadline. If you need further information regarding the application process, please contact Kaleema O. Muhammad, Grants Management Specialist, at (770) 488-2742. For programmatic information, please contact Wanda King, CPHP Program Official, at 404-639-0641.

Reports must be submitted by May 30, 2008. Late or incomplete reports could result in an enforcement action such as a delay in the award/or a reduction in funds. CDC will accept requests for a deadline extension on rare occasions, and after adequate justification has been provided.

General Application Packet Tips:

- Properly label each item of the application packet
- Each section should use 1.5 spacing with one-inch margins
- Number all narrative pages only
- Use a 12 point font
- Where the instructions on the forms conflict with these instructions, follow these instructions

1. CDC requires the use of PDF format for ALL attachments.
2. Use of file formats other than PDF may result in the file being unreadable by CDC staff.
3. Directions for creating PDF files can be found on www.Grants.gov.

Checklist of required contents of application packet:

1. Application for Federal Domestic Assistance-Short Organizational Form
2. SF-424A Budget Information-Non-Construction Programs
3. Budget Justification
4. Indirect Cost Rate Agreement
5. Project Narrative

Instructions for completing required contents of the application package:

1. **Application for Federal Domestic Assistance-Short Organizational Form:**

   Download form from www.Grants.gov and complete all sections.

   A. *In addition to inserting the legal name of your organization in Block #5a, insert the CDC Award Number provided in the CDC Notice of Award. Failure to provide your award number could cause delay in processing your application.*
   B. *Please insert your organization's business official information in Block #8.*

SPECIAL NOTE: Items 2, 3, and 4 should be attached to the application through the "Mandatory Documents" section of the "Grant Application" page. Select "Other Attachments Form" and attach as a PDF file.

2. **SF 424A Budget Information and Justification:**

   A. Download the form from www.grants.gov.
   B. Complete all applicable sections.
   C. Estimated Un-obligated
      1. Provide an estimate of anticipated un-obligated funds at the end of the current budget period.
      2. If use of estimated un-obligated funds is requested in addition to funding for the next year, complete all columns in Section A of 424A and submit an interim Financial Status Report (FSR), Standard Form-269, available on the CDC internet at http://www.cdc.gov/od/pgo/forminfo.htm.
   D. The estimated un-obligated balance should be realistic in order to be consistent with the annual FSR to be submitted following the end of the budget period.
   E. Based on the current rate of obligation, if it appears there will be un-obligated funds at the end of the current budget period, provide detailed actions that will be taken to obligate this amount.
   F. If it appears there will be insufficient funds, (1) provide detailed justification of the shortfall; and (2) list the actions taken to bring the obligations in line with the authorized funding level.
   G. The proposed budget should be based on the federal funding level stated in the letter from CDC.
   H. In a separate narrative, provide a detailed, line-item budget justification of the funding amount requested to support the activities to be carried out with those funds.

Attach in the "Mandatory Documents" box under "Budget Narrative Attachment Form". Document needs to be in the PDF format.

I. The budget justification must be prepared in the general form, format, and to the level of detail as described in the CDC Budget Guidance. The sample budget guidance is provided on CDC's internet at: http://www.cdc.gov/od/pgo/funding/grantmain.htm.
J. For any new proposed subcontracts provide the information specified in the Budget Guidance.
K. When non-federal matching is required, provide a line-item list of non-Federal contributions including source, amount, and/or value of third party contributions proposed to meet a matching requirement.

3. Indirect Cost Rate Agreement:

Indirect costs will be reimbursed at eight percent of total allowable direct costs, exclusive of tuition and related fees and equipment, or at the actual indirect cost rate, whichever results in a lesser dollar amount. See your local program administrator for further clarification.

4. Project Narrative:

Current Budget Period Progress:

Demonstrate progress for each approved activity in meeting preparedness goals for the period September 1, 2007 - February 29, 2008 by preparing the narrative portion of the report using the pre-populated templates (an example is given as Attachment A). Pre-populated templates will go out to each grantee via the CPHP mailbox from the CDC CPHP program office. Submit to your CDC Project Officer only the locked template file on CD-ROM. Please ensure these are submitted only as Word files, not as PDF files. Title your completed, locked program narrative template as follows: *abbreviated CPHP name*; underscore; mid-yearBP4; *underscore*; narrative. Examples: Emory_mid-yearBP4_narrative or UCLA_mid-yearBP4_narrative.

CDC will again utilize a reviewers' tool (Attachment B) for Part 1 of your IPR. This tool will allow CDC staff to systematically document, using a colored scale, the extent to which each grantee has answered questions and met objectives. This scale will provide an overview of the status of the CPHP program in each area, and will highlight areas, both overall and individually, from which promising practices might emerge or to which technical assistance should be directed.

New Budget Period Proposed Objectives and Activities:

Templates will again be used to collect data on proposed program activities and outcomes for FY 08.

Prepare the narrative portion of the application using the appropriate blank templates (examples are given as Attachment C). Budget Period 5 templates (both locked and unlocked versions) can be downloaded from the ASPH CPHP Intranet site at http://preparedness.asph.org/only.cfm. Once logged in, you can locate them through the "Announcements" link. From here, the templates can be saved to Microsoft Word for editing.

Prepare and submit your application using only the provided templates so that data will be compatible with the CPHP database at CDC. Please submit these only as Word files, not as PDF files.

Title your completed program narrative template as follows: *abbreviated CPHP name*; *underscore*; appBP5; *underscore*; narrative. Examples: Emory_appBP5_narrative or UCLA_appBP5_narrative.

Program Expectations
Although this is a close-out budget period, each proposed activity is expected to continue to support the intent of the original program announcement and must include at least one outcome evaluation measure.

All CPHP program activities should be planned in collaboration with state, local, tribal, and territorial health agencies to assist in meeting the CDC Preparedness Goals related to community preparedness (Attachment E). Submit letters of support from each partner, documenting the relationship. Please note that these letters should provide specific pledges of programmatic support to the CPHP, including anticipated activities.

Each proposed activity should include plans to both solicit participation and promote the activity among selected audiences; in addition, information about your activities should be shared through the CPHP Resource Center. Examples include: disseminating fact sheets via a list serve, submitting announcements to professional journals or newsletters, and listing with state and local learning management systems or the Public Health Foundation's TrainingFinder Real-time Affiliate Integrated Network (TRAIN).

For FY 08, CPHP program activities and efforts should be divided into these activity types:

Program Activities
The primary focus of CPHP program activities is the delivery of education and training and the delivery and dissemination of unduplicated information that enhances public health emergency preparedness and response.

A) Education & Training
CPHPs should provide consultation to partners to prioritize identified needs and determine if education and training are the solution.

All proposed education and training should address a need or performance gap identified in collaboration with partners. All activities involving an academic program for public health emergency preparedness and response, and collaborative work with partners should address long-term community needs and national workforce shortages to improve the nation's ability to respond to public health emergencies and disasters.

The Association of State and Territorial Health Officials (ASTHO) www.astho.org published a report which "indicates that there is an escalating shortage of qualified public health workers in the United States. The shortage will adversely affect the capacity of State and local public health agencies to respond to terrorist events, emerging infectious diseases, and other public health threats and emergencies." The report, "State Public Health Employee Worker Shortage Report: A Civil Service Recruitment and Retention Crisis," says that the most severe shortages are occurring in the fields of

nursing, epidemiology, and laboratory sciences.

All educational programs and courses are expected to be evaluated or field tested with members of the identified audience and key findings reported. At a minimum, all educational activities should be evaluated for: 1) instructional effectiveness in meeting participants' achievement of stated learning objectives or immediate gains in knowledge, skills, and attitudes are measured through written pre- and post-tests, behavior and skill demonstrations (e.g., performance-based tests), and/or self-report learner competency assessments; and 2) progress toward meeting identified needs and gaps.

B) Partner-Requested Activities

Partners may request that CPHPs assist with activities other than education or training. Tribal and state and local public health agency partners and the CPHP should mutually identify needs that can be met based on CPHP qualifications, expertise, and resources available to commit to the specific activity. The scope of work, timeline, and implementation plan should be developed collaboratively with the partner agencies and with the intent that the activity will be completed within this budget period.

Each partner-requested activity must include an evaluation component or measure that assesses impact or improvement toward achieving a preparedness goal. This assessment may take a variety of forms such as measures of process, measures of change, measures of products or other appropriate indicators.

Examples of partner-requested activities include:

- exercises or drills to demonstrate participants' knowledge, skills, and abilities to respond to pandemic influenza and all other hazards threats (additional information on the Homeland Security Exercise and Evaluation Program (HSEEP) can be found at http://www.ojp.usdoj.gov/odp/docs/hseep.htm);
- assistance with measuring key performance indicators of public health preparedness;
- assessment of workforce education and training needs that will be completed this budget period; and
- internships, fellowships, and scholarships designed to address identified shortages in the public health preparedness workforce while bridging academia and practice, but only if core activities are adequately addressed.

C) Supportive Activities

Supportive activities, determined by your CPHP, are activities needed for general support of public health preparedness education activities, outreach, partnerships, and CPHP program evaluation. Activities involving state and local partners should be planned collaboratively with those agencies.

Examples of supportive activities include:

- enhancement of resources for education or information dissemination
- developing publications
- promoting public health preparedness education programs or activity promotion
- presenting and/or exhibiting at appropriate conferences
- convening state and local preparedness partners for planning
- maintaining learning management systems

Network Activities
Although this is a closeout budget period, each CPHP is required to participate in activities that enhance the public health emergency preparedness network, maximize opportunities for sharing resources, market the courses developed, and contribute to the national public health preparedness strategy.

To ensure ongoing communication between CDC, the Association of Schools of Public Health (ASPH), and the CPHPs, all Principal Investigators and their designated Program Directors and/or Coordinators must participate in monthly teleconferences and travel to the annual CPHP all-hands meeting.

Resource Center and Educational Calendar
It is required that a shared resource will result from each distinct education program activity supported by this cooperative agreement. Each CPHP must provide to the internet-based Resource Center a description of each preparedness education course or program and identify the target audience. CPHPs will provide ongoing updates by promptly replacing any outdated or revised materials with the correct and current versions. The web address for the CPHP Resource Center is http://www.asph.org/acphp/phprc.cfm.

Ongoing updates will include:

- course/program title
- abstract /description that includes topics covered, intended audience, teaching methods
- learning objectives and/or competencies
- URL links to specific program or course available via your website
- comprehensive course outline, slides and speaker notes or URL links/contact person for information
- evaluation tools
- evaluation reports on key findings

Information regarding your educational offerings, courses, or programs that are open to enrollment must be posted on the CPHP Educational Calendar. Efforts will be made to link to other relevant similar course calendars, minimizing duplication of effort.

FY 08 Detailed Line Item Budget and Justification
A detailed line item budget and justification of the funding amount requested to support the proposed activities for FY 08 are required on Form 424A and as a narrative.

Form 424A may be downloaded at www.Grants.gov.

In a separate narrative, provide a detailed, line-item budget justification of the funding amount requested to support the activities to be carried out with those funds. Attach the budget information and justification to the application through the “Mandatory Documents” section of the “Submit Application” page in www.Grants.gov.

For FY 08, CPHPs are not required to separate Program and Network activities in the detailed line item budget.

Contracts
The following information must be submitted for all newly-requested contracts as well as for revisions to any existing contract:

- name(s) of contractor(s)
- scope of work
- method of selection (competitive or sole source); procurement by noncompetitive proposals may be used only when the award of a contract is infeasible under small purchase procedures, sealed bids or competitive proposals and is justified under criteria in 45 CFR Part 92.36
- period of performance
- method of accountability
- itemized budget with narrative justification

For your convenience, sample budget guidance is provided on CDC's Internet page at: http://www.cdc.gov/od/pgo/funding/budgetguide.htm.

For additional budget resources refer to http://www.cdc.gov/od/pgo/funding/grantmain.htm.

5. Additional Requirements (Closeout)

Due to implementation of the *Pandemic and All-Hazards Preparedness Act of 2006* (PAHPA), The project period end date for the Centers for Public Health Preparedness (CPHP) awards (Program Announcement 04209) will now be August 9, 2009. This will currently align all CPHP awards with the Public Health Emergency Preparedness awards (Program Announcement AA154). This change is a result of the new requirements established in the Pandemic and All-Hazards Preparedness Act (PAHPA).

The current Budget Period will end August 9, 2008. As a result of this change, FY 08 Budget Period will start August 10, 2008 and end August 9, 2009.

Assistance Award Closeout Requirements

Submit the following required reports to CDC within 90 days after the project completion date as specified in terms and conditions of the award/agreement and 45 CFR Part 74 and 92:

a. **Final Performance/Progress Report** – the narrative of the final report should include information to fulfill any specific reporting requirements in the Notice of Award, a summary statement of progress toward the achievement of the originally stated goals, and a list of the results considered significant (whether positive or negative).

b. **Final Financial Status Report (SF 269 or 269A)** – the final report should not show any unliquidated obligations and must indicate the exact balance of the unobligated funds. The final FSR should agree with the final expenditures reported to HHS, PMS. If not, the recipient will be required to

update the reports (SF 272 and FSR 269) so they agree.

Link*:* *www.whitehouse.gov/omb/grants/grants_forms.html*

c. **Equipment Inventory List –** An inventory list should include the description of the item, manufacturer serial and/or identification number, acquisition date and cost, percentage of Federal funds used in the acquisition of the item. When equipment acquired with CDC funds is no longer needed on the grant, the equipment may be used for other activities in accordance with the following standards: Equipment with a fair market value of $5,000 or more may be retained for other uses provided compensation is made to CDC. These requirements do not apply to equipment which was purchased with non-federal funds. Equipment no longer need shall be disposed following instructions requested from and provided by CDC/PGO. If no equipment was acquired under this grant/cooperative agreement a negative report is required.

d. **Final Invention Statement –** A final Invention Statement is required. If no inventions were conceived under this assistance award, a negative report is required. This statement may be included in a cover letter.