

2021-2022
SEXUAL ASSAULT SERVICES PROGRAM (SASP)
COMPETITIVE GRANT

**E-GRANTS
APPLICATION INSTRUCTIONS**



**ATTORNEY GENERAL ELLEN F. ROSENBLUM
OREGON DEPARTMENT OF JUSTICE
1162 COURT STREET NE
SALEM, OR 97301-4096**

TABLE OF CONTENTS

FY 2019 – 2020 SASP-COMPETITIVE E-GRANTS APPLICATION INSTRUCTIONS

FORM	TITLE	PAGE
A	COVER PAGE	1
B	OVERVIEW OF THE ORGANIZATION	3
C	ORGANIZATION CAPABILITY AND CAPACITY	4
D	POPULATION SPECIFIC CRITERIA	5
E	STAFF ROSTER	6
F	ADVANCED SEXUAL ASSAULT TRAINING	8
G	GOVERNING BODY ROSTER & INFORMATION	9
H	PROJECT DESCRIPTION	9
I	PROJECT SPECIFIC GOALS, OBJECTIVES, ACTIVITIES AND PERFORMANCE MEASURES	11
J	COMMUNITY COLLABORATION, MEMORANDUM OF UNDERSTANDING, CONTRACTS & SUBAWARDS	13
K	ATTACHMENTS TO UPLOAD	15
L	BUDGET - PERSONNEL	18
M	BUDGET - SERVICES & SUPPLIES	20
N	BUDGET - OTHER COSTS	23
O	BUDGET SUMMARY	25

FY 2019 – 2020 SASP COMPETITIVE E-GRANTS APPLICATION INSTRUCTIONS

FORM A. COVER PAGE

- 1. Organization Certification:** Please certify that the information included under the “Organization Information” and “Organization Members” sections of E-Grants are all complete and accurate. Please ensure that the appropriate people have access to this application, including those who will need access to the corresponding reports. Information on how to make any necessary changes can be found in the CVSSD E-Grants Applicant User Guide.

The Civil Rights Training Certification is required to be uploaded in Organizational Details every two years. If you have not completed the civil rights training requirements, information required to fulfill this requirement can be found at http://www.doj.state.or.us/victims/pages/civil_rights.aspx. You will need to complete this requirement before signing the Grant Agreement. **If your agency is new, by checking the you are certifying that your agency will complete the required training and upload the Certification prior to executing a Grant Agreement.**

The Whistleblower Certification is required. All grantees must certify that they are in compliance with federal whistleblower protection requirements (41 U.S.C. 4712), including informing employees of their rights and remedies. Grantees must complete and upload the Whistleblower Certification at least once every two years. You will need to complete this requirement before signing the Grant Agreement. **If your agency is new, by checking the you are certifying that your agency will complete the required training and upload the Certification prior to executing a Grant Agreement.**

2. Applicant Information

- **Questions a, c, f and g will auto populate from the information entered in “My Organization”.** If any of the information is incorrect, contact CVSSD staff to have correction made.
 - **Once a response is selected for i, k and m, click “SAVE” and j, l and n will auto populate.**
- b. Physical address of the applicant:** Enter the physical address of the applicant if different from the mailing address.
 - d. Additional Counties Served:** Add all counties being served by this agency.
 - e. Congressional Districts Served:** Refers to Oregon’s Congressional Districts 1, 2, 3, 4, or 5. Include all that are covered by applicant agency service area. This is a federal requirement. The Congressional District map is available next to the question.
 - h. SAM Expiration Date:** Provide the expiration date of the SAM. A current registration in the System for Award Management (SAM) database is required. The SAM database is the repository for standard information about federal financial assistance applicants, recipients, and subrecipients. Verify whether the applicant agency is already registered with the SAM. Applicants must update or renew their SAM registration *at least once per year* to maintain an active status. **Prior to a grant agreement being issued from this application, all programs meeting this criteria requirement must provide proof of a**

current SAM. See the most recent version of the relevant Grant Management Handbook for details regarding DUNS and SAM registration.

- i. **Contact Person:** Refers to the name of the contact person for this grant application; the contact person is the individual who will be responsible for the day to day management and program reporting for the grant.
- k. **Fiscal Contact:** Refers to the name of the fiscal contact for this grant application; the fiscal contact is the individual who will be responsible for the preparation and submission of the financial reports for the grant based on agency fiscal records.
- m. **Fiscal Officer:** Refers to the name of the fiscal officer for this grant application; this may or may not be the same as the fiscal contact. The fiscal officer is the individual who has signature authority for the agency for all financial reports submitted to CVSD for the grant. CVSD will assume that all financial reports submitted in E-Grants have been approved by the Fiscal Officer as a true and accurate representation of grant expenditures.
- o. **Website Address:** Refers to the applicant agency or program's website address (if applicable).

3. Implementing Agency Type

Choose the agency type that describes the applicant agency.

4. Implementing Agency Sub-Type

Select the sub-category in the agency type that describes the applicant agency. If the applicant selects Non-Criminal Governmental Entity or Other, a written description must be included.

5. Agency Staff:

- a. Indicate the **total** FTE of all paid staff of the organization.
- b. Indicate the **total** FTE of all paid staff of the domestic violence/sexual assault program.
- c. Indicate the **total** FTE of all paid staff providing sexual assault-specific services.
FTE conversion ratio: 2080 hours = 1 FTE

6. Identified Gaps. Indicate the service gaps that the application proposes to address (**check all that apply**):

- Advocacy Services;
- Counseling and Support Group Services;
- Emergency Financial Support Services;
- Medical and Legal Accompaniment;
- System Collaboration and Outreach; and
- Other Services (this can include a documented service gap related to one or more problems associated with the sexual violence issues facing the targeted underserved population specific community to be served with these grant funds).

7. Underserved Population Specific Community

UNDERSERVED POPULATION — Includes unserved, underserved and inadequately served population specific communities whose access to safety, resources and services is limited and is used broadly to include identities of race, ethnicity, language, immigration or refugee status, gender identity/expression, sexual orientation, cognitive and physical ability, blindness,

Deaf/hard of hearing, age, religion, Tribal sovereignty, or other marginalized identity.
(Based on definition developed by OCADSV Culturally Specific Definitions Work Group)

NOTE: “Population specific “ is used broadly and is intended to encompass “culturally specific “ by the inclusion of targeted identities of race, ethnicity, immigration or refugee status, and Tribal sovereignty and the expectation of delivering culturally proficient services to these targeted communities.

a. Application to serve victims of sexual assault from at least one of the following underserved population specific communities (check all that apply):

To be eligible to receive SASP funding, applicants must provide grant-funded services to at least one of the SASP-prioritized underserved populations included in the list. Click the survivor population(s) to be served with these funds. The applicant must be able to demonstrate that the organization, or a program of the organization, is specifically designed to deliver population specific services to the selected underserved group(s).

b. Please indicate if the underserved population(s) identified above will be from one or more of the following marginalized communities (check all that apply):

The “Other” category can be used to describe a locally identified marginalized community that has a documented access barrier. Select all that apply.

8. Project Summary. In a brief summary, provide a description of the project purpose, major goals and activities, target underserve population/marginalized community served and specific problem(s) the project will address during the project award period; include the title and FTE of each funded position.

FORM B. OVERVIEW OF THE ORGANIZATION

All applicants must complete this section.

1. Brief Overview of the Organization. Applicants must demonstrate capability to implement the proposed project. Applicants should refer to the structure, practices, procedures, etc. already in place within the organization. This section is intended to provide reviewers with a sense of how the organization will oversee the proposed project and what capabilities the organization possesses. These capabilities are a factor in determining a proposed project's success.

- a. **Mission Statement.** As space allows, you may consider including Vision Statement and/or Values Statements if these will add relevant background or perspective.
- b. Be sure to address each of the elements listed from an organization-wide perspective. The specific purpose and activities of the grant-funded sexual assault project are asked in the Project Description section of the RFA.
- c. Be sure to address each of the elements listed from an organization-wide perspective. More detailed questions focused on the capacity of the organization to deliver sexual assault services are asked in other sections of the RFA, specifically, staff experience and expertise and community partnerships and collaborations.

d. Organization Chart. Be sure that the level of detail in the Organization Chart includes the department or staff for the project for which you are requesting funding and the relation of this department within the organization hierarchy.

2. Geography of Service Area. Applicants provide context into the makeup of their service area(s).

- a. Describe the geographical service area and the primary clientele served by the organization, not only for the specific project for which you are requesting funding. More detailed questions on the underserved population to be served by the grant-funded project are asked in the Project Description section of the RFA.
- b. Applicant should describe how they are responsive to the unique needs of providing services in rural areas.

FORM C. ORGANIZATION CAPABILITY AND CAPACITY

All applicants must complete this section.

- 1. Organization Capacity to Deliver Sexual Assault Services.** Applicants must demonstrate the specific organizational capacity to implement the proposed sexual assault project.
 - a. Your response to this question will provide reviewers with a sense of your organization’s commitment to address the subject of sexual violence in the community and your organization’s capacity to implement the proposed project.
 - b. Indicate what proportion of any current funding streams is dedicated specifically to support sexual assault services.

2. Indicators of High-Quality Sexual Assault Programs

The ten components of high quality sexual assault advocacy agencies are derived from the *Opening Our Doors: Building Strong Sexual Assault Services in Dual/Multi-Services Advocacy Agencies*, prepared by the Resource Sharing Project at the Iowa Coalition Against Sexual Assault through a grant awarded by the Office on Violence Against Women. The full report is available at:

http://www.resource-sharingproject.org/sites/resource-sharingproject.org/files/OOD_second_edition.pdf. There is no specific eligibility requirement that applicant organizations have integrated any or all of the ten components, however, your responses to this question will provide reviewers with a sense of an organization’s current and future capacity and commitment to serving survivors of sexual assault in a focused and intentional manner. To quote the report, “The ten components do not form a hierarchy. Instead, all of the components are equal and inform one another. While it is possible to start by focusing on a few components at a time, you will soon realize that all the components intersect and overlap with one another. When you grow one component, you will find that all of your components will grow.”

Mark the radial button that reflects the status of your agency’s current organizational systems pertaining to each of the *10 Components*. Select *Fully*, if your agency has integrated a component in its entirety into its organizational systems. Select *Partially*, if your agency has

integrated to some measure the elements described in a component into its organizational systems. Complete each narrative box by providing a brief description of how your agency has integrated this component into its organizational structure and describing any potential future efforts to build capacity to integrate this component. You can refer to each specific page in the cited reference for an in depth analysis of each component and you will find activities, reflection questions, and resources for further exploration and study.

3. Program Accessibility

Programs should be able to describe how they work towards providing equitable and accessible services for all victims/survivors. This includes how programs prepare staff to work with individuals from diverse backgrounds, how the organization examines its own internal practices, and how anti-oppression and anti-racism work is encompassed in the organization

FORM D. POPULATION SPECIFIC CRITERIA

To be eligible to receive SASP funding, applicants must provide population specific services to at least one of the SASP-prioritized underserved populations and must demonstrate that their organization or program *meets* the criteria of a population specific organization or program or is *developing* as a population specific organization or program. Your responses to questions on this page will determine if your organization meets the eligibility criteria for receiving SASP funds in Oregon.

A. Population Specific Services

1. If your organization is a *current* recipient of SASP funds and your organization did not fully meet the criteria for population specific services in the 2016 SASP Competitive RFA, reflect on your organization's practices for addressing the criteria for population specific services in 2016 and describe what progress your organization has made toward fully meeting the criteria.
2. To be eligible to receive SASP funding, applicants must demonstrate that their organization or program *fully* meets or *substantially* meets the four Criteria for Population Specific Services. Based on the underserved population and, as appropriate, the marginalized community the applicant proposes to serve, carefully consider the four criteria and check the appropriate box to indicate if the applicant organization or program *fully* meets the four criteria or *substantially* meets the four criteria.
- 3.a. If the applicant checked the box stating that their organization or program *fully* meets all of the Criteria for Population Specific Services, the applicant should respond to the narrative question by describing how the applicant organization or program aligns with *each* of the criteria. If the applicant checked the box stating that their organization or program *substantially* meets the Criteria for Population Specific Services, the applicant should check the N/A box and respond to the narrative in 3.b.

3.b. If the applicant checked the box stating that their organization or program *substantially* meets the Criteria for Population Specific Services, the applicant should respond to the narrative question by describing which, if any, of the criteria the applicant organization fully meets and what actions the applicant is taking to fully meet all or the remaining criteria. If the applicant checked the box stating that their organization or program *fully* meets the Criteria for Population Specific Services, the applicant should check the N/A box.

B. Population Specific Organizations and Programs

1. If your organization is a *current* recipient of SASP funds and your organization did not fully meet the criteria for a population specific organization or a population specific program within a larger organization in the 2016 SASP Competitive RFA, reflect on your organization’s structure for addressing the stipulated population specific criteria in 2016 and describe what progress your organization has made toward fully meeting the criteria.
2. To be eligible to receive SASP funding, applicants must demonstrate that their organization or program *meets* the criteria of a population specific organization or program or is *developing* as a population specific organization or program. Based on the underserved population and, as appropriate, the marginalized community the applicant proposes to serve, carefully consider the criteria for population specific organizations or programs and check the appropriate box to indicate if the applicant organization or program *meets* the criteria of a population specific organization or program or is *developing* as a population specific organization or program.
 - 3.a. If the applicant checked the box stating that their organization or program *meets* all of the Criteria for Population Specific Organizations or Programs, the applicant should respond to the narrative question by describing how the applicant organization or program aligns with *each* of the criteria. If the applicant checked the box stating that their organization or program is *developing* as a Population Specific Organization or Program, the applicant should check the N/A box and respond to the narrative in 2.b.
 - 3.b. If the applicant checked the box stating that their organization or program is *developing* as a Population Specific Organization or Program, the applicant should respond to the narrative question by describing which, if any, of the criteria the applicant organization is meeting and what actions the applicant is taking to meet all or the remaining criteria. If the applicant checked the box stating that their organization or program *meets* the Criteria for Population Specific Organizations or Programs, the applicant should check the N/A box.

FORM E. STAFF ROSTER

All applicants must complete the Staff Roster. This section provides the applicant immediate access to view the Staff Roster. No edits can be made to the Staff Roster report from this page; to make edits to the Staff Roster applicants need to access the roster under “My Organization”. Select “My Organization” at the top of the page, then select the applicant organization on the page, then select “Organization Details” to access the Staff Roster form.

Be sure to complete all of the required fields (marked with *) for each staff person on the Staff Roster. Staff Roster information for any unfilled positions, including new hires, must be completed during the application process by entering “vacant” in the name field and any other known information (Title, Job Description, Funding for the position). The Staff Roster should then be updated at the time of hire.

5. Please indicate bicultural and/or bilingual followed by the specific cultural capacity and language capacity.
6. Please be sure to upload a current job description.
7. Be sure that the SASP-funded FTE coincides with the FTE included in the project budget. The total FTE should include all funding sources and match the total paid FTE for the position.
8. Be sure to include the total number of hours for each training attended. The DV/SA requirement for staff training includes a minimum of 40 hours of content-specific training (refer to Appendix A of the RFA for a detailed outline of the training content required). An additional 24 hours of Advanced Sexual Assault Training is required for any staff partially or fully funded by SASP (applicants are asked to provide a detailed list of the advanced sexual assault specific training on Form E). Refer to the RFA for additional details on the advanced training requirement. In addition, the Population Specific Lean and Liaison is expected to have training on population- and culturally-specific services and practices (applicants are asked to provide a detailed list of the population specific training on Form C).
9. While the SVAA (State Victim Assistance Academy) training is required for District Attorney Victim Assistance Program staff and is not required for Domestic Violence/Sexual Assault program staff, SASP-funded staff may choose to attend SVAA. Either No or N/A would be acceptable responses. However, if Yes is checked, be sure to enter the date the training was successfully completed.
10. The DV/SA staff training requirement refers to the minimum of 40 hours of content-specific training for victim advocate staff. Either Yes or No would be acceptable responses. If Yes is checked, be sure to enter the date the requirement was met. If No is checked, be sure to have a plan for staff to meet this requirement. Staff that has not met this training requirement is not allowed to interact unsupervised with survivors.
11. The advocate-victim privilege training requirement refers to the two-hour training on confidentiality and advocate privilege. An advocate who completed the OCADSV Online Core Advocacy Training after March 2018 has completed this confidentiality and privilege training. If an advocate completed the OCADSV Online Core Advocacy Training before March 2018, the advocate must complete confidentiality and privilege training separately. This requirement can be met by viewing the recorded Advocate Privilege and Survivor Confidentiality Training.

When you have completed the Staff Roster in the “Organization Details” section, check the box in **Form E** to certify that the Staff Roster is complete and accurate.

FORM F. ADVANCED SEXUAL ASSAULT TRAINING

All applicants must complete the Advanced Sexual Assault Training Form. Applicants must complete this page for the organization's Sexual Assault Lead and for each staff person who is proposed to be wholly or partially funded by this grant. The Sexual Assault Lead and all SASP-funded staff must meet the advanced sexual assault training requirement or be able to meet the requirement within 6 months of the award start date. This is a multiple page form; click on the "Add" button to create a new page for each additional SASP-funded staff person.

SASP Training Requirement

CVSSD requires of a minimum of 40 hours of content-specific training all grant-funded staff and volunteers serving survivors of domestic violence and sexual assault. In addition, to qualify for SASP funding, each staff person wholly or partially funded by this grant ***must have attended at least 24 hours of advanced sexual assault training within the last 24 months***. A SASP-funded staff person who does not meet the full 24-hour training requirement is required to complete the remaining training hours within the first 6 months of the grant period or, if newly hired, within 6 months of the hire date.

Refer to the RFA: Section II. Application Overview F. CVSD Requirements, for a list of resources for advanced sexual assault training. Training on population- and culturally-specific services and practices specific to the underserved population indicated on the Cover Page may substitute for a portion of the required training hours.

2.a. Indicate if the staff person will be the organization's Sexual Assault Lead by clicking either the *Yes* or the *No* radio button.

4. Complete the table with the advanced sexual assault training history within the last 24 months (see citation for specific requirements above). The following further explains what to include in the table:

- Training Title: this should be the title of the conference or training.
- Topic: Provide the titles/names of only the sessions that meet the advanced training requirement.
- Hours: Indicate the total number of training hours only for the session or sessions included in the Topics box.
- Date: Provide the date(s) of the training attended.
- Sponsor: Provide the name of the host or sponsor of this training (i.e. OSATF, OCADSV, etc.).
- City, State: Provide the city and state where the training was conducted.

5. Complete the table with the advanced sexual assault training history for any staff person who does not fully meet the requirement of 24 hours of advanced sexual assault training within the last 24 months (see citation for specific requirements above). The explanation for the content required in each column is the same as described above.

6. Complete the table with the names and locations of any statewide, regional, local sexual assault-related committees, task forces, multi-disciplinary teams etc. that the staff person attends including the frequency of the meetings and the date of the last meeting attended.
7. OPTIONAL. Add any additional information related to training or community collaborations that may be relevant and helpful to reviewers.

FORM G. GOVERNING BODY ROSTER & INFORMATION

All **nonprofit** applicants must complete this section.

- This section provides the applicant immediate access to the Board Roster
- No edits can be made to the Board Roster from this page.
- The Board Roster can be accessed by selecting “My Organizations” at the top of the page, then select “Organization Details” to access the Board Roster form.
- Please respond to questions 1-4 as completely and concisely as possible.

When you have completed the Board Roster in the *Organization Details* section, check the box in **question 5** to certify that the Roster is complete and accurate.

FORM H. PROJECT DESCRIPTION

All applicants must complete the Project Description Form. Responding to the narrative questions is the applicant’s opportunity to explain in a clear and concise manner the project and the services being planned specifically with these funds. Respond to questions 1 –5 in as much detail as necessary to provide a clear project description. Ensure that the information entered on this Form matches the position name(s) and FTE(s) shown on the Staff Roster and on Form K Project Budget - Personnel.

1. Type of project to be supported with SASP funding

- Select one of the radio buttons that best describes the type of project for which the applicant is seeking SASP funding – New, Continuation, Enhancement or Expansion.
- After the applicant selects the appropriate type of project, the applicant must check one of the corresponding check boxes.
- If the applicant checks either the “Current recipient of SASP funds for unrelated project” box or a “Currently supported with SASP funds” box, the applicant must respond to the narrative question to provide details on the accomplishments of the currently funded project.

2. Description of underserved population/marginalized community: This is the applicant's opportunity to describe the underserved population and marginalized community that the applicant intends to serve with SASP funds. This description will provide reviewers with a sense of the applicant’s depth and breadth of understanding of the identified population or community.

3. Service access challenges and obstacles. This is the applicant's opportunity to describe the specific challenges and obstacles the underserved population/marginalized community faces when seeking meaningful access to services to address the immediate needs and the longer term healing and empowerment needs caused by the experience of sexual violence. This description will provide reviewers with a sense of the applicant's depth and breadth of understanding of the identified population or community.

4.a. Specific services to be provided and how these services will be implemented. Based on the 2017 Underserved Populations Service Needs and Barriers for Sexual Assault Services Survey five gap areas were consistently identified. Applicants for SASP funding must address one or more of these gaps, or a locally identified and documented gap, in the delivery of project services. Ensure that the gap(s) described in the response match the identified gap(s). Refer to Appendix C in the RFA for definitions of core and comprehensive services as they relate to the identified service gaps. When describing how these activities will be delivered, consider staffing, facilities, materials, partnerships, etc.

Additionally, following are examples of gaps identified in the surveys:

Advocacy Services

- Crisis intervention, 24-hour crisis hotline, ongoing follow-up services, and I&R
- More staff and volunteers for 24/7 response
- Interpretation services for non-English speakers
- Ongoing follow-up services
- Ongoing support for survivors, especially for those outside of the criminal justice system
- 24/7 response and advocacy
- Ongoing follow-up support after crisis intervention and emergency legal and medical services provided

Counseling and Support Group Services

- Individual counseling and support groups
- Need for low cost mental health services
- Limited counseling services available
- Need for more community support groups
- Support groups for secondary victims
- No age specific support groups
- No support groups for secondary victims of child sexual abuse
- SA specific support groups
- Support groups for friends and family

Emergency Financial Support Services

- Emergency support services
- Ongoing support services
- Safe, confidential, affordable housing
- Transportation is a huge barrier
- General lack of resources
- Lack of emergency financial and housing services

Medical and Legal Accompaniment

- Criminal justice/legal advocacy and hospital/medical advocacy
- Understaffing and undertraining for medical response
- The gap is hospital response
- Lack of trained SART responders

System Collaboration and Outreach

- Systems coordination/collaboration
- Stronger support and outreach network needed
- Limited staffing for outreach
- Outreach, knowledge about services needed
- Lack of information regarding existing services and access to services

4.b. How service implementation will address identified challenge and obstacles: Ensure that there is a clear connection between the direct service activities and the challenges and obstacles to accessing services identified in question 3.

4.c. How service delivery will be tailored to the culture of the underserved population/marginalized community.

5. Start-up and ongoing activities: As appropriate, address both specific activities required to implement a new project as well as ongoing activities necessary to ensure the success of a continuing project. If start-up activities are included, be sure to include time lines for implementation.

FORM I. PROJECT SPECIFIC GOALS, OBJECTIVES, ACTIVITIES AND PERFORMANCE MEASURES

All applicants must complete this form. Form H provides the applicant with six lines for entering objectives, activities, target outputs, output numbers, outcomes, and outcome percentages. If the applicant needs additional rows, the applicant can add another goal and enter CONTINUED FROM GOAL #1 in the Goal box.

Applicants are encouraged to write goal statements, objectives, outputs and outcomes that are specific and unique to the project. If an applicant chooses to use Common Outcome Measures (refer to the Monitoring and Financial Reporting, Reporting Requirement, Reporting on CVSD Common Outcome Measures in the RFA for information on Common Outcome Measures), the applicant **MUST** be able to demonstrate that the Common Outcome Measures reflect only responses from sexual assault survivors receiving grant-funded services.

1. Goal, Objectives, Activities, and Performance Measures #1

The table below provides examples of a goal statement, objectives, activities, target outputs, output numbers, outcomes, and outcome percentages. Examples are provided for illustrative purposes only and should not be viewed as a model to be duplicated; each project will write goal statements, objectives, outputs and outcomes that are specific and unique to the project.

- a. **Goals** are broad, general statements of what the program hopes to accomplish. Ensure that there is a clear connection between the goal and the problem, gap(s) and activities described in the Project Description.
- b. When completing the table/grid, write only one objective per box. If you will be entering multiple outputs and outcomes for a single objective, repeat the objective and activities columns for each additional target output or outcome associated with the objective.
Objectives are the desired changes of the project and are derived from the goal. Objectives are specific, measurable changes your organization intends to bring about through the project activities. Objectives should be simple, realistic, attainable and measurable. An objective is measurable when it specifically identifies the target (who or what will be affected), is time oriented (when it will be accomplished), and indicates direction of desired change (increase, decrease, maintain the object of change).
- c. When completing the table/grid, include all activities associated with the objective in the single box. **Activities** indicate actions you are going to take or something that you are going to do in order to accomplish the project objective. These proposed activities, which address the problem or need, should stem from the objectives that have been developed.

Performance Measures: Performance measures are indicators that determine whether the project has met its objectives. Performance measures include both target outputs and outcome measures.

- d. When completing the table/grid, write at least one (1) target output for each objective. If you will be entering multiple target outputs for a single objective, repeat the objective and activities for each additional target output associated with the objective. **Target Outputs** are the proposed results of project activities. Target outputs are intended to be a concrete, objective measurement and may include the following information:
 - Number and type of survivors served
 - Number and type of services delivered
 - Length of time that it will take to serve that number of survivors – for this project the length of time should be no longer than the 2-year grant award period.
- e. Enter the actual number associated with the narrative target output described in column d.
- f. When completing the table/grid, write at least one (1) outcome for each objective. If you will be entering multiple outcomes for a single objective, repeat the objective and activities for each additional outcome associated with the objective. **Outcomes** are changes in participants' lives as a result of the services delivered by the project. Outcomes are generally measured by asking for feedback through an evaluation process from those served by the project.
- g. Enter the actual outcome percentage associated with the narrative outcome described in column f.

h. **Do you want to add another goal?** The applicant will select *Yes* or *No* if intending to add another goal. If not intending to enter a second goal, click *No*, and then click *SAVE*. If intending to enter a second goal, click *Yes* and a new *Goal, Objectives, Activities, and Performance Measures* section will automatically appear.

i. **EXAMPLE:**

Goal: Develop a sexual assault specific support group to assist in the healing and recovery of sexual assault survivors from the elder community.

b. Objectives	c. Activities	d. Target Outputs	e. Output Number	f. Outcomes	g. Outcome Percentage
Increase healthy interactions and ongoing healing for survivors of sexual assault during the 24-month grant period.	Organize outreach, logistics, materials and trained facilitators for SA specific support groups.	Convene 72 weekly SA specific support groups during the 24-month grant period.	72	80% of the SA survivors attending SA specific support groups who responded to a satisfaction survey will indicate satisfaction with the curriculum and group process of the support groups.	80%
Increase healthy interactions and ongoing healing for survivors of sexual assault during the 24-month grant period.	Organize outreach, logistics, materials and trained facilitators for SA specific support groups.	36 unduplicated SA survivors will attend SA specific support groups during the 24-month grant period.	36	80% of the SA survivors attending SA specific support groups who responded to a satisfaction survey will indicate that they have healthier interactions and improved healing as a result of support group attendance.	80%

FORM J. COMMUNITY COLLABORATION, MEMORANDUM OF UNDERSTANDING, CONTRACTS & SUBAWARDS

A. Community Collaboration

All applicants must complete questions 1.

Applicants should respond to each type of collaborations listed and, as appropriate, include relevant collaborations with population and culturally specific organizations.

Applicants may leave the remainder of this form blank and click *SAVE* if the applicant is **not**

proposing a formal Memorandum of Understanding (MOU) and is **not** proposing to subcontract or subaward any of the funds included in this application.

B. Memorandum of Understanding (MOU)

If the applicant is proposing a formal collaborative partnership, a copy of the MOU must be uploaded in the upload field(s) provided (there is space to upload three Memoranda of Understanding). If the applicant does not yet have a signed copy, upload an unsigned MOU. A signed copy of the MOU will be required prior to the execution of grant award documents.

If an agency is proposing a formal collaboration with a Tribal Nation please consult with the Tribe to determine if a Tribal resolution or an MOU is the appropriate documentation to demonstrate collaboration.

C. Contract

If you are proposing to Contract any of these funds to an individual or outside entity:

- Be sure to complete the Subrecipient and Contractor Determination Checklist to verify that the proposed Contract is indeed a contractual relationship;
- Indicate if the applicant followed appropriate procurement procedures, provide an explanation if procurement procedures were not utilized.
- Indicate if the Contract was procured as a sole source.
- Respond to questions B.1. e–i for the first Contract and be sure to address the additional questions if this is a sole source Contract;
- Be sure to review the *Minimally Recommended Elements for an Independent Contractor Agreement* document (by clicking **here** in question B.i.) and include the recommended elements in the Contract.
- Upload the completed Contract form in B.i. If you do not yet have a signed copy, upload an unsigned Contract. A signed copy of the Contract will be required prior to the execution of grant award documents.
- **Do you have an additional Contract to include?** The applicant will select Yes or No if intending to add another Contract. If not intending to enter a second Contract, click No, and then click SAVE. If intending to include a second Contract, click Yes, and a new Proposed Contract section will automatically appear.

D. Subaward

If you are proposing to Subaward any of these funds to an outside entity:

- Be sure to complete the Subrecipient and Contractor Determination Checklist to verify that the proposed Contract agreement is indeed a subrecipient relationship;
- Respond to questions C.1. c – g for the first Subaward;
- Be sure to review the *Minimally Recommended Elements for a Subaward Agreement* document (by clicking **here** in question C. g.) and include the recommended elements in the Subaward.

- Upload the completed Subaward form in C. g. If you do not yet have a signed copy, upload an unsigned Subaward. A signed copy of the Subaward. will be required prior to the execution of grant award documents.
- **Do you have an additional Subaward to include?** The applicant will select Yes or No if intending to add another Subaward. If not intending to enter a second Subaward. click No, and then click SAVE. If intending to include a second Subaward, click Yes, and a new Proposed Subaward section will automatically appear.

FORM K. ATTACHMENTS TO UPLOAD

All applicants are required to submit the following documents unless otherwise designated:

1. Letter of Authorization and/or Tribal Resolution (*as applicable*)

If someone other than an authorized member of the Board of Directors or the Tribal Council intends to sign the application documents or sign grant documents (including reports), applicants must attach a letter of authorization to the application. If applicable, upload a signed Letter of Authorization. A sample form for the Letter of Authorization can be found [here](#).

Tribal Applicants:

Submit a single letter, resolution, affidavit, or other documentation that indicates the individual(s) who is authorized to sign the Grant Agreement and any grant-related documents and certifies that the applicant has the legal authority to apply for SASP funds on behalf of the Tribe. The documentation must be current, sufficient to demonstrate authority for the application, and contain authorized signature(s).

2. Statement of Compliance (*all applicants*)

Upload a signed Statement of Compliance. The Authorized Official for the applicant's agency must initial each of the listed Grant Agreement Exhibit documents to certify intended compliance and sign and date the form.

An "Authorized Official" is defined as the individual legally responsible for obligating the organization to receive federal funds and meet the terms of the federal program as included in this application and comply with the Terms and Conditions in the CVSD Grant Agreement. Sample CVSD grant agreement language is available at https://www.doj.state.or.us/wp-content/uploads/2017/06/2016-2017_sasp_grant_agreement_sample.pdf. This sample grant agreement is intended for informational use only as grant terms may be adjusted from year to year.

In many non-profit organizations, the Authorized Official is the Board Chair. If the director of a nonprofit is authorized to sign the grant documents, a letter of authorization from the Board of Directors or Chair of the Board is to be included in the grant application. *See Letter of Authorization in item 1 above.*

3. Certification of Non-Supplanting (Tribal and public agencies only)

If applicable, upload a signed Certification of Non-Supplanting. The authorized signatory for the applicant's agency must sign and date the form.

4. Indirect Cost Rates

A federal grant may be charged an indirect cost rate based on:

A. Use a current indirect cost rate already negotiated either provisional or approved by a federal agency:

- Applicants with a federally-approved or provisional* indirect cost rate agreement may choose to charge their indirect cost rate to the grant.
- Agencies that elect to charge indirect costs must use the same indirect cost rate for all federal funding awards.
- Applicants can choose to charge the full amount, a reduced amount or waive their indirect cost rate for this award.
- Agencies that currently have or have had in the past a federally approved negotiated rate **cannot** use the 10% *de minimis* rate and must use the current negotiated rate or contact the cognizant federal agency to request an extension of the expired negotiated rate.
- Applicants **MUST** upload their current, signed indirect cost rate agreement certificate.

* Applicants that have a pending federally-approved indirect cost rate agreement may choose to budget their provisional indirect cost rate to the SASP grant. Applicants **MUST** upload their pending indirect cost rate proposal. Billing for indirect costs may require a budget revision and will be contingent on the applicant receiving a final rate from the federal awarding agency and submitting a current, signed indirect cost rate agreement. The Grant Agreement will include an award condition requiring submission of the negotiated indirect cost rate agreement when approved by the federal cognizant agency.

B. Entities eligible to use the 10% *de minimis* rate of the MTDC must certify that no unallowable expenses are included in the rate (including lobbying and fundraising) and must keep the documentation of this decision on file. Entities include:

- Nonprofit organizations that have **NEVER** negotiated a federal indirect cost rate;
- State and local government departments that have **NEVER** negotiated indirect cost rates with the Federal government and that receive less than \$35 million in direct Federal funding per year;
- Federally recognized Indian tribes that have **NEVER** negotiated an indirect cost rate with the Federal government may use the 10% *de minimis* rate of the modified total direct costs (MTDC).

For federal grants, DOJ is required to honor an applicant's negotiated indirect cost rate, or the *de minimis* indirect cost rate of 10% of modified total direct costs or the applicant may choose to waive an indirect cost rate. The applicant is required to select the appropriate box to indicate to CVSSD the applicant's intent regarding the allocation of indirect costs to these awards.

NOTE: Applicants that wish to negotiate an indirect cost rate may contact their federal cognizant agency or follow the instructions available at <https://ojp.gov/funding/Apply/Resources/IndirectCosts.pdf>.

An applicant must prepare and, if required, submit an indirect cost rate proposal no later than 90 calendar days from the date the award is made and thereafter annually within 6 months of the end of the applicant agency’s fiscal year.

C. Modified Total Direct Costs (MTDC)

Modified Total Direct Costs (MTDC) means all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and up to the first \$25,000 of each sub-award (regardless of the period of performance of the sub-awards under the award). MTDC excludes equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs and the portion of each sub-award (contract) in excess of \$25,000.

Example Budget: Calculating the Modified Total Direct Costs (MTDC) rate in a budget:

Personnel:	\$20,000
Personnel Expenses:	\$4,400
Contractual Services:	\$27,000
Travel:	\$1,000
Office Supplies:	\$400
Equipment:	\$3,000
Total Direct Costs:	\$55,800

Total Direct Costs:	\$55,800
Less amount of a contract exceeding \$25,000 (for each contract)	\$2,000
Less Equipment	\$3,000
Less Rental costs (if part of an organization allocation plan)	0
MTDC	\$50,800
de minimis @ 10% of the total MTDC: \$50,800 x 10%	\$5,080
Total Project Amount: \$55,800 total Direct Costs + \$5,080 Indirect Costs.	\$60,880

5. **Administrative Risk Assessment.** This is required as part of the CVSSD Monitoring Process, a chart describing the process can be found [here](#). Either upload the completed Risk Assessment or mark the check box if, a) applicant has already completed this CVSSD risk assessment in the past 12 months (you may choose to upload a new assessment) or 2) applicant is new to CVSSD and agrees to complete and submit the Administrative Risk Assessment prior to the execution of a Grant Agreement.

6. **Financial Risk Assessment.** There are two Financial Risk Assessment forms: one for nonprofit programs and one for government-based programs including Tribal Nations. This is

required as part of the CVSD Monitoring Process, a chart describing the process can be found [here](#). Either upload the completed Risk Assessment or mark the check box if, a) applicant has already completed this CVSSD risk assessment in the past 12 months (you may choose to upload a new assessment) or 2) applicant is new to CVSSD and agrees to complete and submit the Administrative Risk Assessment prior to the execution of a Grant Agreement.

7. Legal Documents (non-profit organizations only)

Applicants who are nonprofit, non-governmental organizations are required to provide information related to the financial and non-profit position of the applicant organization.

Federal regulations require that CVSSD ensure that nonprofit organizations applying for federal funds have status as a nonprofit organization as described in section 501(c)(3) of the Internal Revenue Code of 1986 and are exempt from taxation under section 501(a) of that Code.

- a. **Organization's most recent balance sheet or Statement of Financial Position:** Upload the Statement of Financial Position or balance sheet that reflects the organization's assets and liabilities for the most current accounting period.
- b. Upload the most recent submission of **IRS Form 990** filed with the IRS.
- c. Indicate if the applicant organization has **Articles of Incorporation**. CVSD will verify on the Oregon Secretary of State Corporation Division website the applicant's business entity status.
- d. Upload the organization's **IRS 501(c)3 Determination Letter**.
- e. Upload the most recent Organizational **Bylaws** approved by the Board of Directors.

FORM L. PERSONNEL

General Budget Instructions: Each applicant is required to submit a 2-year budget. A list of allowable and unallowable costs is available in the most recent version of the SASP Guidance.

Include costs for staff providing direct client services and services that can be identified specifically with the SASP project (includes supervision of direct service staff and completion of program-related records, statistics, and reports). Any staff time performing general administrative duties, duties that cannot be readily identified with the project (salaries and expenses of executive directors, personnel administration, fiscal administration, etc.) should be included on the Other Costs page under Administrative Costs or Indirect Costs.

Applicants completing this form should keep the following in mind:

- This is a multiple page form. A separate personnel page must be created for each grant-funded staff. After the form is SAVED, click on the ADD button to open a new page;
- Applicants should consider any personnel salary and benefit increases when preparing project budget requests for the project award period January 1, 2016 – December 31, 2017;
- Salary should only include actual wages; all mandatory and optional personnel expenses should be included in the personnel expenses lines;

- Personnel expenses (mandatory payroll taxes and optional fringe benefits) may include any of the following: FICA, workers' compensation, unemployment insurance, health insurance, short/long term disability, retirement, etc.;
- The basis for each computation should be clearly demonstrated; and
- The information entered on each page aligns with the position name(s) and FTE(s) shown on the Staff Roster and in the Project Description.

- 1. Staff Name:** For each position requested list the name of the employee. If the position is not filled, enter *Vacant* or *To Be Hired*.
- 2. Position Title:** For each position, provide the position title.
- 3. Salary Funded by this Grant:** Enter the salary amount for the position that will be funded by SASP. In the first text box, provide a detailed calculation that clearly shows how the budgeted salary was determined for **Year 1** of the award. In the second text box, provide a detailed calculation that clearly shows how the budgeted was determined for **Year 2** of the award.

Example Year 1: Salary Detail: \$30,000/year x .6 FTE (SASP funded) = \$18,000. This can also be calculated using an hourly approach: \$14.4231/hour x 1248 hours (SASP funded) = \$18,000.

Example Year 2: Salary Detail: \$31,500/year x .6 FTE (SASP funded) = \$18,900. This can also be calculated using an hourly approach: \$15.1442/hour x 1248 hours (SASP funded) = \$18,900.

- 4. Total Salary:** List the total annual salary for this position funded at a full time equivalency (1 FTE). Even if the position is part-time, list the cost for 1 FTE. A 1 FTE position for 12 months is calculated at 2080 hours.

Example: In this example the Year 1 salary for 1 FTE would be \$30,000 ($\$14.4231 \times 2080 = \$30,000$) and the Year 2 salary for 1 FTE would be \$31,500 ($\$16.1442 \times 2080 = \$31,500$).

- 5. Personnel Expenses Funded by this Grant:** Indicate the amounts the applicant agency is requesting for personnel expenses to be funded by this grant. In the first text box, provide a detailed calculation that clearly shows how the budgeted personnel expenses were determined for **Year 1** of the award. In the second text box, provide a detailed calculation that clearly shows how the budgeted personnel expenses were determined for **Year 2** of the award. In both text boxes, indicate the dollar amount and the rate used to calculate the personnel costs of the staff position to be allocated to the project and list the personnel costs included in the calculation (FICA, UI, Workers' Compensation, health insurance, retirement, etc.).

Example Year 1: $\$30,000 \times .35 = \$10,500$ X .6 (SASP funded) = \$6,300. Personnel expenses are calculated at 35% of the total salary. Personnel expenses include: employer portion of FICA, workers' compensation, unemployment, health insurance, short/long term disability, life insurance, and retirement.

Example Year 2: $\$31,500 \times .35 = \$11,025 \times .6$ (SASP funded) = \$6,615. Personnel expenses are calculated at 35% of the total salary. Personnel expenses include: employer portion of FICA, workers' compensation, unemployment, health insurance, short/long term disability, life insurance, and retirement.

- 6. Total Annual Personnel Expenses:** Indicate the total 12-month costs of personnel expenses for this position funded at a full time equivalency (1 FTE). Even if the position is part-time, list the cost for 1 FTE.

Example: In this example the Year 1 personnel expenses for 1 FTE would be \$10,500 ($\$30,000 \times .35 = \$10,500$) and the Year 2 personnel expenses for 1 FTE would be \$11,025 ($\$31,500 \times .35 = \$11,025$).

- 7. FTE Calculation:** The FTE will auto-populate once the salary and benefits are entered. The CVSD E-Grants system calculates FTE by combining both salary and personnel expenses. Grantees should use the same method of calculating FTE on the Staff Roster. FTE can be calculated using the following formula:

$$\frac{\text{Grant Funded Salary} + \text{Grant Funded Personnel Expenses (PE)}}{\text{Total 1 FTE Salary} + \text{Total 1 FTE PE}}$$

Example:

$$\begin{aligned} &\$18,000 \text{ (SASP Grant Funded Salary)} + \$6,300 \text{ (SASP Grant Funded PE @ 35\%)} = \$24,300 \\ &\$30,000 \text{ (Total Salary)} + \$10,500 \text{ (Total PE)} = \$40,500 \\ &\$24,300 / \$40,500 = .6 \text{ FTE} \end{aligned}$$

- 7. What activities will this staff member perform during their time funded by this grant?:** In this section, explain and justify the need for the personnel funds requested. Specifically describe the five (5) major direct service activities to be conducted by the grant-funded position in this project. Ensure that the description is consistent with the Job Description.

FORM M. SERVICES & SUPPLIES

General Budget Instructions: Each applicant is required to submit a 2-year budget. A list of allowable and unallowable costs is available in the most recent version of the relevant SASP Guidance.

Services & Supplies Page Instructions:

Applicants completing this section of the budget form should keep the following in mind:

- Expenditures in this section should support and enhance direct services and show they are consistent with the project activities;
- The basis for each computation should be clearly demonstrated;
- Costs should be directly attributable to the project or represent a pro-rated cost based on an agency identified allocation method;

- Expenditures must be allowable costs under SASP; and
- The budget narrative should clearly explain the benefits of each grant-funded expense to the project.

1. **Contract/Subaward:** If the applicant is requesting funds in this line item, applicant is required to complete **Form I: Community Collaboration, Memorandum of Understanding, Contracts & Subawards** and upload a copy of the Contract or Subaward. Do not include contracted services for accounting or other administrative services, these costs should be included on the Other Costs page under Administrative Costs or Indirect Costs. Indicate the amounts the applicant agency is requesting for Contractual Services to be funded in Year 1 and Year 2.

In the first test box enter the Subcontractor/Subrecipient name, if known, the goods or services to be provided, and, as appropriate, the compensation rate (hourly or monthly salary, hourly or daily fee, monthly fee, etc.) and the total estimated time to deliver the service (hours, days, months based on compensation rate).

Consultant fees in excess of \$650 per day or \$81.25 per hour require additional justification and prior approval.

Calculation Examples: Subaward for FTE: \$15/hour X 1040 hours = \$15,600.
Contract for Trainer: \$50/hour X 16 hours = \$800.

In the second text box, list all expenses to be paid to the Contractor/Subrecipient in addition to any compensation (training costs, travel costs, mileage, meals and lodging, supplies, etc.).

Calculation Example: Contract for Trainer: \$300 for mileage, per diem and lodging and \$50 for supplies and copies.

2. **Travel:** Indicate the amounts the applicant agency is requesting for Travel to be funded in Year 1 and Year 2.

In the text boxes for **Year 1** and **Year 2** describe the purpose of the budgeted travel expenses (e.g. travel to attend meetings, travel for outreach, client transport, and any other travel *not* related to attendance at training, etc.), show the basis of the computation (# of miles, cost per mile), and explain how the travel costs are necessary and beneficial to the project.

Calculation Example: 1000 miles X .55/mile = \$550

3. **Training:** Complete the **Year 1 Training** table and the **Year 2 Training** table by providing the title of the training, the number of attendees, any registration fee, and the estimated travel, lodging and per diem costs. The Total Cost column will auto-populate the total training costs.

In the Year 1 and Year 2 text boxes, provide a brief description for each training, the calculations for how the training costs were determined, and an explanation of how the training is necessary and beneficial to the project.

Out of State Travel: Out of state travel is allowable, but must be well justified and must be approved by CVSD during grant negotiation. See the most recent version of the relevant Grant Management Handbooks for further details on training requests outside of Oregon.

NOTE: Government per diem rates must be used to calculate travel costs and are accessible by clicking on the link included on the form.

FOOD AND BEVERAGE FEDERAL POLICY

No SASP funding can be used to purchase food and/or beverages for any meeting, retreat, seminar, symposium, training, or other similar event. Some exceptions do apply. This does not apply to providing emergency support to survivors. Please see the most recent version of the relevant Grant Management Handbooks for more details around this policy.

Table Example:

Training –Sexual Assault Training, Salem

Approximate Date –3/7/19

Number of Attendees – 2

Registration Cost –\$500.00

Travel Cost – \$360.00 (include mileage, car rental, hotel parking, gas, airline ticket, airport parking, taxi/shuttle, etc.)

Lodging Cost – \$227.70 (include lodging and related taxes)

Meal Per Diem Cost – \$198 (include any meals during travel not included in the training)

Total Cost – \$1,285.70 (auto-populated)

Text Box Calculation Example: Registration fees: $\$250 \times 2 = \500 . Travel costs: 600 miles round trip $\times .55/\text{mile} + \30 (2 days hotel parking) = \$360. Lodging costs: $\$99/\text{night} \times 2 \times 1.15$ taxes = \$227.70. Per diem costs: $\$66/\text{day} \times 2\text{days} \times 2$ attendees – \$66 (4 lunches provided) = \$198.

4. Office Supplies, Postal Supplies, Printing & Coping, Communication, and Equipment

Rental: Indicate the amounts the applicant agency is requesting for each of the cost categories to be funded in Year 1 and Year 2.

In the text boxes for **Year 1** and **Year 2** describe the purpose of the budgeted expenses, show the basis of the computation, and explain how the costs are necessary and beneficial to the project.

Calculation Examples:

Office Supplies: $\$50/\text{month} = \600 (describe as either a cost directly attributable to the project or a pro-rated cost based on an agency identified allocation method)

Postal Supplies: $\$125$ to mail 100 copies of Project product + $\$10/\text{month}$ postage = $\$245$ (describe postage as either a cost directly attributable to the project or a pro-rated cost based on an agency identified allocation method)

Printing & Coping: $\$1,000$ to print 100 copies of Project product + $\$10/\text{month}$ printing = $\$1,120$ (describe the printing as either a cost directly attributable to the project or a pro-rated cost based on an agency identified allocation method)

Communication: \$70/ month cell phone + \$35/month office phone/Internet = \$1,260
(describe as either a cost directly attributable to the project or a pro-rated cost based on an agency identified allocation method)

Equipment Rental: \$25/month = \$288 (describe as either a cost directly attributable to the project or a pro-rated cost based on an agency identified allocation method)

FORM N. OTHER COSTS

General Budget Instructions: Each applicant is required to submit a 2-year budget. A list of allowable and unallowable costs is available in the most recent version of the SASP Guidance.

Other Costs Page Instructions:

Applicants completing this section should keep the following in mind:

- Expenditures in this section must support and enhance direct services and show they are consistent with the project activities;
- The basis for each computation should be clearly demonstrated;
- Costs should be directly attributable to the project or represent a pro-rated cost based on an agency identified allocation method;
- Expenditures must be allowable costs under the SASP grant funds; and
- The budget narrative should clearly explain the benefits of each grant funded expense and how it relates to the project.

1. **Rent:** Indicate the amounts the applicant agency is requesting for Rent to be funded in Year 1 and Year 2.

In the text boxes for Year 1 and Year 2 describe the type of rent expense (office space, training space, storage space, etc.), show how the cost was determined (cost per square foot, monthly rent, etc.), the basis for the computation, and explain how the rent costs are necessary and beneficial to the project.

NOTE: Mortgage costs are not allowed. Rent costs are not allowed if the space is owned by the applicant.

2. **Emergency Services:** Indicate the amounts the applicant is requesting for Emergency Services to be funded in Year 1 and Year 2.

In the text boxes for Year 1 and Year 2 describe the type of Emergency Services, explain how the cost was determined, and explain how the emergency service costs are necessary and beneficial to the project.

3. **Capital Outlay:** Indicate the amounts the applicant is requesting for Capital Outlay to be funded in Year 1 and Year 2.

In the text boxes for Year 1 and Year 2 list each non-expendable item to be purchased, the cost for each item, and the pro-rated portion allocated to SASP, unless the item is being purchased exclusively for this project. Explain how the item to be purchased is necessary for the success of the project. Capital purchases have an acquisition cost equal to or greater than applicant's capitalization limit and a useful life exceeding one year. Expendable items should be included in Office Supplies and rented or leased items should be included in Equipment Rental.

A link is available (click [here](#)) above each text box on the forms page which provides clarification of the federal requirements regarding procurement.

4. **Indirect/De Minimis Costs:** Refer to Application Instruction for **Form J: Attachments to Upload** for information on the options for including indirect costs in the SASP award (page 15).

If an applicant is charging indirect costs or a *de minimis* they cannot also charge Direct Administrative costs to federal awards.

Instructions:

Either indicate the amount(s) the applicant is requesting for Indirect costs or de minimis costs to be funded in Year 1 and Year 2 or leave blank if the applicant is waiving and indirect/de minimis costs for this award or will be budgeting direct administrative costs.

In the text boxes for **Year 1** and **Year 2** provide a brief narrative that describes what costs are included, that is, either costs based on a negotiated indirect cost rate agreement or de minimis costs.

5. **Administrative Costs:** If an applicant does not have an indirect cost rate and does not want to charge the 10% de minimis rate to all federal awards they can choose to direct charge administrative costs at any rate up to 10% of the MTDC. The MTDC is calculated the same as shown for the 10% *de minimis* (refer to page 16).

Instructions:

Indicate the amounts applicant is requesting for Administrative Costs to be funded in Year 1 and Year 2.

In the text boxes for **Year 1** and **Year 2** provide a detailed explanation of the administrative costs, either a percentage or direct charge, to be funded by this grant (staff FTE, fiscal services, IT services, HR services, general liability insurance, audit costs, etc.) and the method used by the organization to equitably allocate administrative costs, and how these costs are necessary and beneficial to the project.

6. **Other:** Indicate any amounts the applicant agency is requesting for Other Costs to be funded in Year 1 and Year 2.

In the text boxes for Year 1 and Year 2 list other items by major type, the basis for the computation and how these costs are necessary and beneficial to the project.

FORM O: BUDGET SUMMARY

This page summarizes the budgets from the Personnel, Services & Supplies, and Other forms. **Please click the “Save” button when opening this form** to have it pull information from the other budget forms and calculate totals. In order to address any errors that appear on this page you will need to go back to the appropriate budget form to make the necessary corrections. Once the corrections have been made return to the Budget Summary and click the “Save” button to ensure that no additional errors exist.