OREGON DEPARTMENT OF JUSTICE
CRIME VICTIM AND SURVIVOR SERVICES DIVISION

2023 – 2025 TRAUMA INFORMED RESPONSE TRAINING
STATE GRANT

E-GRANTS FORM INSTRUCTIONS

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Crime Victim and Survivor Services Division
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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.

   Applicants must agree to send at least one representative to any applicable required training event hosted by CVSSD.

   Applicants must certify that they are eligible to apply for the funds.

2. **Applicant Information.** Questions a, c, f, g, i, k, and l will automatically populate from the information entered in "My Organization". If any of this information is incorrect, please contact CVSSD staff to have corrections made.

   b. **Physical address of the applicant:** Enter the physical address of the applicant.

   d**. Additional county(ies) served**: Add all counties being served by this applicant.

   e. **Congressional District(s) served:** Refers to Oregon's Congressional Districts 1, 2, 3, 4, or 5. Include all that are covered by your service area. The Congressional District map is available next to the question.

   h. **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.

   j. **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.

3. **The project will include:**

   a. **Sending people to the Trauma Informed Oregon Training of Trainers (ToT) event and hosting subsequent training.**
   Check this box if you plan to put together a training team to send to Trauma Informed Oregon and DOJ's Train the Trainer event July 10-13, 2023, hosted at DPSST. Upon selecting this option, the relevant project description page and a budget page will populate in the application.

   b. Developing curriculum and hosting subsequent training based on it
   Check this box if you plan to work with a curriculum developer or trainer to develop a curriculum specific to your community. Upon selecting this option, the relevant project description page and a budget page will populate in the application.

   c. Hosting other training
   Check this box if you will bring a training/trainer into your community. You can choose an already developed training program or a trainer that can provide training on any/all

of the Learning Goals. Upon selecting this option, the relevant project description page and a budget page will populate in the application.

d. **Sending people to other training**
Check this box if you will send people to a training. You can choose an already developed training program or a trainer that can provide training on any/all the Learning Goals. Upon selecting this option, the relevant project description page and a budget page will populate in the application.

****PLEASE NOTE****

If you <u>uncheck</u> any of these boxes *after* entering information into the associated Project Description and Budget pages, the information you have entered will not be retained.

FORM B. PROJECT DESCRIPTION (TIO Train the Trainer)

This form will populate if you have selected the box on the cover page indicating you are sending people to the Trauma Informed Oregon (TIO) Train the Trainer event and hosting subsequent training based on that.

Trauma Informed Oregon's Training of Trainers (ToT)
July 10 -13, 2023
At the Department of Public Safety and Standards Training (DPSST) located in Salem, OR

1. **Who do you intend to send to the training? Include agency names and staff titles. Provide an explanation of why those particular people were selected.**
   Provide the agencies and staff titles of the training team the applying agency intends to send to the ToT. Some examples are:
   - DA's office – DAVP and/or Prosecutor
   - Sherriff's Office – Sexual Assault or DV Detective
   - DV/SA Community Based Agency – Advocate
   - Community based culturally specific services program
   - DHS – Child Welfare Advocate
   - Juvenile Department – Probation Officer
   - Restorative Justice Organization – Facilitator
   - LGBTQ Support – Staff Person

Provide a narrative of why you chose the people or agencies and why they are the best choice to attend the ToT and deliver the training in the community.

The intent is that you attend this ToT in order to bring the training into your own community. In the sections that follow, you must plan for <u>at least one subsequent</u> training with the materials developed at July's ToT.

   A. **Training Title**
      Please include the title of the training you will hold.
      For example:

"Trauma Informed Response for Law Enforcement." Or "Trauma Informed Response and Collaboration"

B. Anticipated Training Date(s)
Please indicate the date or dates you will conduct the training. If you intend to provide one training multiple times or you want to break up one day training into multiple two-hour trainings, you would indicate each of the dates you hope to hold the training.

C. **Identify training team, including roles and disciplines and what agencies they represent.**
4000 character limit. Include who you intend to have host and deliver the training. Please include what discipline and agency they represent.

D. **Who do you intend to train? Include how many people in each discipline you hope to train.**
4000 character limit. Who is the intended audience? Please include what disciplines you intend to train and how many people in each discipline.

E. Provide details regarding the content of the training. 4000 character limit.
Please provide as much detail about the training as possible. This includes goals of the training, a description of what the training will cover.

F. What do you intend to accomplish with this training? 4000 character limit.
Include how the training will build collaboration, increase access to justice for all community members, bridge gaps in service, and improve Trauma Informed Response in your community. Describe any policy, practice or procedure change you want to accomplish with this training.

FORM C. PROJECT DESCRIPTION (Develop Curriculum)

This form will populate if you have selected the box on the cover page indicating you are developing curriculum and hosting subsequent training based on that curriculum.

When filling out the Project Description be as detailed as possible.

A. What are the goals of developing your own curriculum?
Include information about the reasons for choosing to develop your own curriculum and the benefits you expect will result for your community.

B. Provide details regarding the anticipated content of the curriculum.
Include information about the anticipated content and the intended outcome of developing your own curriculum.

C. Identify your curriculum development team, including their roles and disciplines, and what agencies they represent.
Indicate who you will be working with to develop your curriculum. You should include any curriculum developer you hire. It should also include stakeholders from your community, including those that work with and are from underserved populations.

D. **How did you include input from those that are most impacted by the criminal legal system in the development of this curriculum?**
Who specifically did you work with to ensure you included the perspectives of those impacted by the criminal legal system and how did they help inform your process?

The intent is that you will develop curriculum with the purpose of training responders in your own community. You must plan for <u>at least one</u> subsequent training with the curriculum you developed. We encourage applicants to plan for more than one training to help ensure as many people as possible get trained.

A. **Training Title**
Please include the title of the training you will hold.
For example:
"Trauma Informed Response for Law Enforcement." Or "Trauma Informed Response and Collaboration"

B. **Anticipated Training Date(s)**
Please indicate the date or dates you will conduct the training. If you intend to provide one training multiple times or you want to break up one day training into multiple two- hour trainings, you would indicate each of the dates you hope to hold the training.

C. **Identify training team, including roles and disciplines and what agencies they represent.**
4000 character limit. Include who you intend to have host and deliver the training. Please include what discipline and agency they represent.

D. **Who do you intend to train? Include how many people in each discipline you hope to train.**
4000 character limit. Who is the intended audience? Please include what disciplines you intend to train and how many people in each discipline.

E. **Provide details regarding the content of the training.** 4000 character limit.
Please provide as much detail about the training as possible. This includes goals of the training, a description of what the training will cover.

F. **What do you intend to accomplish with this training?** 4000 character limit.
Include how the training will build collaboration, increase access to justice for all community members, bridge gaps in service, and improve Trauma Informed Response in your community. Also describe any policy, practice or procedure change you want to accomplish with this training.

FORM D. PROJECT DESCRIPTION (Hosting Training)

This form will populate if you have selected the box on the cover page indicating you will host other training.

In this section you will identify established trainings you plan to host for your community. This could include any training of the Model Curriculum that is done by a trainer hired from TIO or their trainer database or training provided by other qualified trainers.

When looking for trainings to host, please consider connecting with the community based and culturally specific agencies who are already working with underserved populations within your own community. They often have trainings already developed and understand the unique needs of your community.

When filling out the Project Description be as detailed as possible.

A. **Training Title**
   Please include the title of the training you will hold.
   For example:
   "Trauma Informed Response for Law Enforcement." Or "Trauma Informed Response and Collaboration"

B. **Anticipated Training Date(s)**
   Please indicate the date or dates you will conduct the training. If you intend to provide one training multiple times or you want to break up one day training into multiple two-hour trainings, you would indicate each of the dates you hope to hold the training.

C. **Identify training/trainer you will be hosting.** 4000 character limit.
   Include the basic information of the training and trainer you are bringing in (including expertise and credentials that seem relevant).

D. **Provide details regarding the content of the training. If available, include a link to the training information online.** 4000 character limit.
   Please provide as much detail about the training as possible. This includes goals of the training, a description of what the training will cover, and a link if possible.

E. **Who do you intend to train? Include how many people in each discipline you hope to train.**
   4000 character limit**.** Who is the intended audience? Please include what disciplines you intend to train and how many people in each discipline.

F. **What do you intend to accomplish with this training?** 4000 character limit.
   Include how the training will build collaboration, increase access to justice for all community members, bridge gaps in service, and improve Trauma Informed Response in your community. Also describe any policy, practice or procedure change you want to accomplish with this training.

Appendix C provides a list of possible trainings and trainers that meet some, or all, of the Learning Goals. Grantees are not required to select from this list. It is intended as a resource to help applicants know what is available. We encourage applicants to use trainings they are familiar with and that meet their community needs.

FORM E. PROJECT DESCRIPTION (Sending to Training)

This form will populate if you have selected the box on the cover page indicating you are sending people to other training.

This section applies to applicants who want to use these funds to send people to training hosted and provided by others.

When filling out the Project Description be as detailed as possible.

A. Training Title
Please include the title of the training you will hold.
For example:
"Trauma Informed Response for Law Enforcement." Or "Trauma Informed Response and Collaboration"

B. Anticipated Training Date(s)
Please indicate the date or dates the training will occur.

C. **Who do you intend to send? Include agency names and staff titles. Provide an explanation of why those particular people were selected.** 4000 character limit.
Please talk about who you intend to send to training, including the discipline, agency and title. Describe the benefit of sending the identified people to receive the training.

D. **Provide details regarding the content of the training. If available, include a link to the training information online.** 4000 character limit.
Please provide as much detail as possible about the training(s) you've selected. This includes goals of the training, a description of what the training will cover, and a link if possible.

E. What do you intend to accomplish with this training? 4000 character limit.
Include how the training will build collaboration, increase access to justice for all community members, bridge gaps in service, and improve Trauma Informed Response in your community. Also describe any policy, practice or procedure change you want to accomplish with this training.

Appendix C provides a list of possible trainings and trainers that meet some, or all, of the Learning Goals. Grantees are not required to select from this list. It is intended as a resource to help applicants know what is available. We encourage applicants to use trainings they are familiar with and meet their community needs.

FORM F – Training Program Goals

This section requires applicants to use between 500 and 1000 characters discussing each of the Learning Goals and how the training programs described in the application will meet the individual Learning Goals. For each of the Learning Goals listed, please describe which training(s) meet that learning goal and how.

Below are the Learning Goals with further explanation to help you understand their scope.

1. Deepen their understanding of:
    a. **Trauma to include toxic stress as well as acute, chronic, historical, and collective trauma.** 4000 character limit.

The training must include a definition and clear understanding of what trauma is. It needs to address chronic, historical and collective trauma. The training must also address how that trauma, particularly historical and collective trauma, impact the ways in which people engage with the criminal legal system.

b. The neurobiology of trauma. 4000 character limit.
The training must include information about the science of trauma and how it impacts the brain.

c. *Foundational Best Practice* principles for engaging with persons who have experienced trauma. 4000 character limit.
The *Foundational Best Practice* principles in the model curriculum are adapted from SAMHSA's best practice, which aligns with DPSST's required best practice.
Department of Public Safety Standards & Training : Trauma-Informed Practices : Center for Policing Excellence : State of Oregon
Any training about Best Practice must meet SAMHSA's Best Practice.

d. **How trauma inflicted by systemic oppression of certain communities contributes to the inequity of resources and lack of access to services**. 4000 character limit.
Training must address how the history of racism, sexism, classism, homophobia, and other systematic oppression contributes to the lack of resources to certain communities.

e. How community collaboration can reduce trauma and/or the impact of trauma and skills to develop those collaborations. 4000 character limit.
The training must discuss and encourage collaboration across systems and provide tools for developing those collaborations.

f. **Trauma informed care and how principles apply to organizational practices (safety, transparency trust, collaboration, mutual self-help and peer support, ….)** 4000 character limit. The training must discuss how trauma informed best practices can and should apply to organizations and how they can influence practices within the organization.

g. Primary and vicarious trauma and the impact on their lives. 4000 character limit.
The training must include discussion of the definitions of primary and vicarious trauma and how many responders see it manifest.

2. Improve resiliency skills to minimize impact of secondary trauma. 4000 character limit.
The training must provide discussion that goes beyond a simple definition of vicarious trauma and focuses on developing skills to improve resiliency.

3. Strengthen skills in trauma-informed communication. 4000 character limit.

This training must provide hands-on opportunities to build skills in interviewing and communicating with someone who has experienced trauma.

FORM G. MOU's, CONTRACTS AND SUBAWARDS

This form page may be left blank if no Memorandum of Understanding (MOU), contract or subaward is proposed as a part of this application.

CVSSD expects that strong partnerships will be developed for project implementation purposes and to ensure that the project is effectively responding to the needs of the population being served. For any formal partnerships that do not involve an exchange of funds, a Memorandum of Understanding must be used. If grant funds will be paid to an outside entity, the Checklist for Determining if an Entity Receiving Funds has a Contractor or Subrecipient Relationship should be used as guidance to determine whether a contract or subaward is more appropriate. To read guidance about the procurement process, click here.

A. Memorandum of Understanding (MOU). A sample MOU is available here. Upload a complete, signed MOU. It is okay to upload an unsigned MOU if a signed copy is not yet available. Up to three MOUs may be uploaded under Part 'A'.

For applicants proposing to work with Tribal Nations (or Tribal Nations proposing to work with another partner), first consult with the Tribal Nation to determine if a Tribal Resolution or an MOU is the appropriate documentation. The MOU template may be revised as necessary. Additionally, ensure that Tribal Council or Leadership will meet to approve documents related to the proposed collaborative partnership within the open solicitation period.

B. 1. Contracts/Subawards. If relevant, 100 character limit for a. and 2000 character limit for each b. and c. View the required minimum elements of a contract here. If proposing to contract or subaward funds to an individual or organization, then respond to **Question 1.a. – 1. c.: "Proposed Contract/Subaward #1."** Upload a complete, signed contract or subaward under Question 1.d. It is okay to upload an unsigned contract or subaward if a signed copy is not yet available. A signed copy will be required prior to the expenditure of grant funds for contract or subaward costs.

Additional contracts or subawards may be included**.** Select 'yes' if the applicant intends to add another contract or subaward. A new section will automatically appear. Select 'no' if the applicant does not intend to enter another contract or subaward. Click SAVE for either answer.

FORM H. ATTACHMENTS TO UPLOAD

All applicants are required to submit the following documents unless otherwise indicated.

1. **Letter of Authorization**
   If someone other than the Authorized Official intends to sign grant documents and/or submit reports, applicants must attach a Letter of Authorization to the application. If applicable, upload a signed Letter of Authorization. A sample form can be found here.

If the applicant is a Tribal Nation, please 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 funds on behalf of the Tribe. The documentation must be current, sufficient to demonstrate authority for the application, and contain authorized signature(s).

2. Administrative Risk Assessment
This is required as part of the CVSSD Monitoring Process. A chart describing the process and a copy of the Risk Assessment can be found here. Upload the completed Risk Assessment.

3. 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 CVSSD Monitoring Process. A chart describing the process and a copy of the Risk Assessment can be found here. Upload the completed Risk Assessment.

BUDGET

FORM I. Training Budget (TIO Train the Trainer)

Applicants will complete this section if they marked the box on the cover page indicating they are sending people to the Trauma Informed Oregon Train the Trainer event and hosting subsequent training based on that.

You will include all the costs of attending the ToT as well as the costs associated with hosting subsequent trainings.

The basis for each computation should be clearly demonstrated in the text boxes provided.

Expenditures must be allowable costs for the grant.

1) **Training of Trainers**
   a) **Registration Fees:** Registration for this event is **$1,000 per person.** Enter the total amount. In the text box provide a breakdown of the number of people registering and the tuition per person.

   b) **Travel:** Indicate the amounts the applicant agency is requesting for travel to the ToT. This includes the total mileage requested to travel to and from the ToT for each person the applicant intends to send. In the text box provide a breakdown of travel costs and show the basis of the computation (# of miles, cost per mile), for each attendee requesting travel.

   c) **Lodging:** Indicate the total amount the applicant agency is requesting for lodging to attend the ToT. In the text box provide a breakdown of lodging costs and show the basis of the computation (# of nights, cost per night, number of people), for each attendee requesting lodging.

c) **Per Diem:** Indicate the total amount the applicant agency is requesting for per diem to attend the ToT. In the text box provide a breakdown of costs and show the basis of the computation (amount for breakfast, lunch, dinner, per person, per day), for each attendee requesting per diem.

   All travel costs should be based on the organization or program's written travel policy. Per diem rates may not exceed the federal per diem rates found at www.gsa.gov/travel-resources. In financial reports to CVSSD, the grantee will be required to provide more details regarding the actual costs associated with the training.

d) **Other.** Indicate any other costs that are not listed that need to be considered to send a team to the ToT. Provide a breakdown of any "other" costs in the text box.

2) Hosted Training Costs

a) **Venue:** Indicate the total amount the applicant agency anticipates spending on a training venue. In the text box provide a breakdown of venue costs and show the basis of the computation. (rental fee, amount of days, other costs)

b) **Speakers/Trainers:** Indicate the total amount the applicant agency anticipates spending to pay speakers and/or trainers. In the text box provide a breakdown of speaker costs and show the basis of the computation.

c) **Materials:** Indicate the total estimated costs the applicant agency expects to spend on materials. This can include training documents, notes pages, handouts, promotional materials, etc. Provide a breakdown of any material cost in the text box and show the basis of the computation.

d) **Food/Drink:** Indicate the total estimated costs estimated cost to provide coffee/snacks for participants throughout the training. Provide a basis for the computation.

e) **Travel Scholarships:** Indicate the total amount of travel scholarships the applicant agency would like to have available. Travel scholarships are useful to encourage participation in any training you host in the community. If participants can attend for free, offering travel scholarships removes another barrier to people attending training. Describe how travel scholarships will be distributed, including estimated costs for mileage, lodging, and per diem. Also indicate how many scholarships you are hoping to provide for this amount.

f) **Other:** Any other anticipated costs associated with hosting a training. Provide a breakdown of any other costs in the text box

FORM J. Training Budget (Curriculum Development)

Applicants will complete this section if they marked the box on the cover page indicating they are developing curriculum and hosting subsequent training based on that curriculum. Here you will include all the costs of developing a curriculum as well as the costs of hosting subsequent trainings.

1) Curriculum Development

a) **Meeting Venue -** Indicate the amount the applicant agency is requesting for meeting space, specific to the development of the curriculum. In the text box provide a breakdown of venue costs and show the basis of the computation (rental fee, amount of days, other costs).

b) **Curriculum Developers –** Indicate the amount the applicant agency is requesting for curriculum developers. When calculating this amount, you should account for both professional curriculum developers *and* any community members or agencies you are asking to participate. Provide a breakdown of costs of curriculum developers in the text box (amount per hour, number of hours for each person on the team).

c) **Travel -** Indicate the amounts the applicant agency is requesting for Travel.
In the text box describe the purpose of the budgeted travel expenses (e.g., travel to attend meetings, travel for outreach, and any other travel related to curriculum development). Show the basis of the computation (# of miles, cost per mile).

d) **Materials –** Indicate the amount the applicant agency is requesting for any materials needed for the development of the curriculum. Please provide a basis for the computation.

e) **Other –** Any other costs associated to the curriculum development. Provide a detailed description and breakdown of any "other" costs in the textbox.

2) **Hosted Training**

a) **Venue:** Indicate the total amount the applicant agency anticipates spending on a training venue. In the text box provide a breakdown of venue costs and show the basis of the computation (rental fee, amount of days, other costs).

b) **Speakers/Trainers:** Indicate the total amount the applicant agency anticipates spending to pay speakers and/or trainers. In the text box provide a breakdown of speaker costs and show the basis of the computation.

c) **Materials:** Indicate the total estimated costs the applicant agency expects to spend on materials. This can include training documents, notes pages, handouts, promotional materials, etc. Provide a breakdown of any material cost in the text box and show the basis of the computation.

d) **Food/Drink:** Indicate the total estimated costs estimated cost to provide coffee/snacks for participants throughout the training. Show the basis of the computation in the textbox.

e) **Travel Scholarships:** Indicate the total amount of travel scholarships the applicant agency would like to have available. Travel scholarships are useful to encourage participation in any training you host in the community. If participants can attend for free, offering travel scholarships removes another barrier to people attending training. Describe how travel scholarships will be distributed, including estimated costs for mileage, lodging, and per diem. Also indicate how many scholarships you are hoping to provide for this amount.

f) **Other:** Any other anticipated costs associated with hosting a training. Provide a breakdown of any other costs in the text box.

FORM K. Training Budget (Hosting Training)

Applicants will complete this section if they marked the box on the cover page indicating they are hosting other training. Applicants should use this page to budget for all the anticipated costs associated with hosting a training in their community.

1) Hosted Training

a) **Venue:** Indicate the total amount the applicant agency anticipates spending on a training venue. In the text box provide a breakdown of venue costs and show the basis of the computation (rental fee, amount of days, other costs).

b) **Speakers/Trainers:** Indicate the total amount the applicant agency anticipates spending to pay speakers and/or trainers. In the text box provide a breakdown of speaker costs and show the basis of the computation.

c) **Materials:** Indicate the total estimated costs the applicant agency expects to spend on materials. This can include training documents, notes pages, handouts, promotional materials, etc. Provide a breakdown of any material cost in the text box and show the basis of the computation.

d) **Food/Drink:** Indicate the total estimated costs estimated cost to provide coffee/snacks for participants throughout the training. Show the basis of the computation in the textbox.

e) **Travel Scholarships:** Indicate the total amount of travel scholarships the applicant agency would like to have available. Travel scholarships are useful to encourage participation in any training you host in the community. If participants can attend for free, offering travel scholarships removes another barrier to people attending training. Describe how travel scholarships will be distributed, including estimated costs for mileage, lodging, and per diem. Also indicate how many scholarships you are hoping to provide for this amount.

f) **Other:** Any other anticipated costs associated with hosting a training. Provide a breakdown of any other costs in the text box**.**

FORM L. Training Budget (Sending to Training)

Applicants will complete this section if they marked the box on the cover page indicating they are sending people to other training. Applicants should consider all costs of sending participants to a training.

1) Training Costs

a) Registration Fees: Indicate the total registration cost for everyone the applicant agency intends to send to training. Provide a breakdown in the textbox to show the cost of registration per person and the number of people attending.

b) Travel: Indicate the total cost of travel the applicant agency is requesting to send people to training. Travel costs include mileage and/or airfare (for out of state trainings). First class air travel is prohibited. Please show the basis of the computation in the textbox.

c) Lodging: Indicate the total amount the applicant agency is requesting for lodging for people attending training. In the text box provide a breakdown of lodging costs and show the basis of the computation (# of nights, cost per night, number of people), for each attendee requesting lodging.

d) Per Diem: Indicate the total amount the applicant agency is requesting for per diem to attend the training. In the text box provide a breakdown of per diem costs and show the basis of the computation (amount for breakfast, lunch, dinner, per person, per day), for each attendee.

All travel costs should be based on the organization or program's written travel policy. Per diem rates may not exceed the federal per diem rates found at www.gsa.gov/travel-resources. Check the box beneath the training table to confirm that all travel costs comply with CVSSD and federal guidance. In financial reports to CVSSD, the grantee will be required to provide more details regarding the actual costs associated with the training.

e) **Other:** Any other anticipated costs associated with attending training. Provide a breakdown of any other costs in the text box**.**

FORM M. Other Costs

Applicants will complete this section for all other costs that are associated with writing and managing this grant.

1) Salary/Personnel: 1000 character limit for description. Indicate the total amount requested for personnel expenses funded by the grant. Use the text box to describe what position you intend to fund, including the amount of time that person expects to spend working on the projects detailed in the grant.

2) Travel: 1000 character limit for description. Indicate the amounts the applicant agency is requesting for Travel. In the text box describe the purpose of the budgeted travel expenses (e.g. travel to attend meetings, travel for outreach, 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.

3) Office Supplies: 1000 character limit for description. Indicate the amounts your agency is requesting for Office Supplies to be funded to carry out the project. In the text box, 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

4) **Indirect/De Minimis Costs:** If an applicant is charging indirect costs or a *de minimis,* then typically the applicant should not also charge Direct Administrative costs to the award. CVSSD will honor an applicant's negotiated indirect cost rate, or the de minimis rate of modified total direct costs (MTDC) not to exceed 10%. **Select the appropriate box(es) to signal the organization's intent regarding the use of indirect or de minimis costs with this two-year award.**

   The grant may be charged an indirect cost rate based on:

   Use of 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.[1]
   - Applicants 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.
   - Applicants 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 under the My Organization section of E-Grants.

   Use of an established de minimis rate of the MTDC (not to exceed 10%):

   - If the applicant agency has never negotiated an indirect cost rate, and is an eligible entity, the applicant may use the 10% *de minimis* indirect cost rate with no additional documentation requirements.
   - If an applicant agency chooses to use the *de minimis* rate, it must do so consistently until such time that the agency chooses to negotiate a rate with a federal agency.
   - 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 subaward/contract (regardless of the period of performance). MTDC excludes equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs and the portion of each subaward/contract in excess of $25,000.

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

Salary:	*$20,000*
Personnel Expenses:	*$4,400*
Contract:	*$27,000*

[1] Applicants that wish to negotiate an indirect cost rate may contact their cognizant federal agency or follow the instructions available at http://ojp.gov/funding/Apply/Resources/IndirectCosts.pdf.

Travel:	*$1,000*
Office Supplies:	*$400*
Capital Outlay:	*$3,000*
Total Direct Costs:	***$55,800***
Less amount of a contract exceeding $25,000 (for each contract)	*$2,000*
Less Capital Outlay	*$3,000*
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 Costs:** 1000 character limit for description. Applicants that do not have an indirect/de minimis cost rate or choose not to apply the indirect cost/de minimis rate to their state awards may choose to directly charge administrative costs. Direct charge of administrative costs cannot exceed more than 10% of the total budget amount.

   If an applicant is charging indirect costs or a de minimis, then typically the applicant should not also charge Direct Administrative costs to the award. An organization that has an indirect or de minimis rate may only charge direct administrative costs when they are not otherwise covered by the indirect or de minimis rate, and only when similar costs are charged consistently.

   Indicate the amount your organization will directly charge in administrative costs for the two-year award period. Provide a detailed explanation of the administrative costs to be funded by this grant (e.g., staff FTE, fiscal services, IT services, HR services, general liability insurance, audit costs), the method used by the organization to equitably allocate administrative costs, and how these costs are necessary and beneficial to the project.

6) **Other Costs:** 1000 character limit for computations. Indicate any amounts your agency is requesting for costs that don't fall within the other budget categories. In the text boxes describe the costs, provide the computation of the cost, and how it benefits the project.