OREGON DEPARTMENT OF JUSTICE

2027-2028
SEXUAL ASSAULT SERVICES PROGRAM (SASP) COMPETITIVE GRANT

E-GRANTS APPLICATION INSTRUCTIONS

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FORM A: COVER PAGE

All applicants must complete this form.

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 Staff Roster: All applicants must complete the Staff Roster for ALL grant funded staff. Form A provides the applicant access to view and edit the Staff Roster page by clicking the page link "Organization Staff Roster". To navigate back to application from the Staff Roster you can click on the home tab located on the top left-hand corner, then access the application through "My Tasks".

   On the Staff Roster, be sure to complete all the required fields (marked with *) for each staff person. This is a multiple page form. Click on the "Add" button to create a new page for additional staff.

   Staff roster information for any unfilled positions, including soon to be hired, must be completed during the application process by entering "vacant" in the name field and any other known information (title, job description, funding source). The Staff Roster MUST then be updated at the time of hire.

   - **Date vacated**: For staff who are no longer employed, enter their end date. Do not delete their information.
   - **Bicultural/Bilingual**: Indicate bicultural and/or bilingual, followed by the specific cultural and language capacity.
   - **Job description**: Upload the current & dated job description for each staff funded by CVSSD grants.
   - **Funding for the position**: All funding sources supporting the entire FTE of a grant-funded position should be included in this table. E-Grants will auto-calculate the FTE on each budget page when you SAVE.
   - **Training received**: Direct service staff, volunteers, and interns MUST comply with the training requirements outlined in the SASP RFA and in the SASP Guidance. Include the total number of hours per completed training for each staff.
   - NOVA Victim Assistance Academy or State Victim Assistance Academy, and DV/SA Staff Trainings. These are trainings for both nonprofit and government-based service providers and they provide a foundation regarding victim services and advocacy. If YES, enter the date the requirement was met. If NO, identify an internal plan to meet this requirement since your CVSSD Fund Coordinator will inquire.

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 in the past two years, information required to fulfill this requirement can be found **here**. You will need to complete this requirement before signing the Grant Agreement. **If your organization is new, by checking the box you are certifying that your organization will complete the required training and upload the Certification prior to executing a Grant Agreement.**

If the Office on Civil Rights website is down, please complete the CVSSD training portion and upload the Form in E-Grants. If only the CVSSD training portion is completed on the Civil Rights Training Certification, it will become a Grant Condition on the Grant Agreement to complete the Office on Civil Rights training as soon as their website is functional.

The Whistleblower Certification: All grantees must certify that they follow 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 organization is new, by checking the box you are certifying that your organization will upload the Certification prior to executing a Grant Agreement.

Determination of Suitability to Interact with Minors: Organizations are required to have a policy for determining the suitability of their Board, staff and volunteers to interact independently with minors. By checking both boxes, the organization is declaring that it has a policy to complete a fingerprint-based search through Law Enforcement and the BCU Clearinghouse, and has completed the required searches of public sex offender and child abuse websites and registries. For further information about the policy requirements click **here.**

You will need to complete this requirement before signing the Grant Agreement. **If your organization is new, by checking both boxes you are certifying that your organization will create the required Determination of Suitability to Interact with Minors policy prior to executing a Grant Agreement.** If your organization is unable to complete the required policy prior to executing a Grant Agreement, it will become a Grant Condition on the Grant Agreement to complete the policy within the specified amount of time. Additionally, a supplemental condition will be included in the Grant Agreement that the implementation of the Determination of Suitability to Interact with Minors policy must be completed within the specified amount of time.

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 h, j and l, click "SAVE" and i, k and m 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 additional counties being served by this agency.
e. **Congressional Districts Served:** Refers to Oregon's Congressional Districts 1, 2, 3, 4, 5 or 6. 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. **Contact Person:** Refers to the name of the contact person for this grant application; <u>the contact person is the individual who will be responsible for the day-to-day management and program reporting for the grant.</u>
j. **Fiscal Contact:** Refers to the name of the fiscal contact for this grant application; <u>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</u>.
l. **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. <u>The fiscal officer is the individual who has signature authority for the agency for all financial reports submitted to CVSSD for the grant. CVSSD 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.</u>
n. **Website Address:** Refers to the applicant agency or program's website address (if applicable).

3. Applicant Type
Choose the organization type that describes the applicant organization.

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

5. Organization Staff:
a. Indicate the <u>**total**</u> FTE of all paid staff of the organization.
b. Indicate the <u>**total**</u> FTE of all paid staff of the domestic violence/sexual assault program.
c. Indicate the <u>**total**</u> FTE of all paid staff providing sexual assault-specific services. ***FTE conversion ratio: 2080 hours per year = 1 FTE.***

6. Identified Gaps. Indicate the service gaps that the application proposes to address **(check all that apply):**
a. Advocacy Services;
b. Counseling and Support Group Services;
c. Emergency Financial Support Services;
d. Medical and Legal Accompaniment;
e. System Collaboration;
f. 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 - Means populations who face barriers in accessing and using victim services, and includes populations underserved because of geographic

location, religion, underserved racial and ethnic populations, populations underserved because of special needs (such as language barriers, disabilities, or age), and any other population determined to be underserved by the Attorney General or by the Secretary of Health and Human Services, as appropriate.

> **NOTE:** "Population specific" is used broadly and is intended to encompass "culturally specific" by the inclusion of identities of race, ethnicity, and Tribal sovereignty and the expectation of delivering culturally proficient services to these 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 communities included in the list. Click the survivor community(s) to be served with these funds. The applicant must be able to demonstrate that the organization, or a program within 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 underserved communities (check all that apply):**
   Select all that apply.

8. **Project Summary.** Provide a description of the project's major goals and activities, title and FTE of each funded position, underserved population or community(s) served, and the significant needs/challenges the project will address during the project award period.

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: In addition to the Mission Statement, if space allows, you may consider including Vision Statement and/or Values Statements if these will add relevant background or perspective.
   b. Purpose, primary activities and philosophy: 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.
   c. Management, staffing, facilities and capacity: Be sure to address each of the elements listed from an organization-wide perspective. Focus on the organization's ability to deliver the grant funded activities. More detailed questions focused on the capacity of the

organization to deliver sexual assault services are asked in other sections of the application, specifically on staff experience and expertise.

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 just 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.
   b. The Applicant should describe how they are responsive to the unique needs of providing services in rural areas.

FORM C: GOVERNING BODY ROSTER & INFORMATION

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

- Please respond to questions 1-3 as completely and concisely as possible.
- No edits can be made to the Board Roster from this page. To view the Board Roster, you may click on the blue link at the bottom of the page, “Click here to view the Roster report”.
- If changes to the Board Roster are needed, 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.

When you have completed the Board Roster in the *Organization Details* section, check the box in **question 4** to certify that the Roster is complete and accurate.

FORM D: 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 sexual violence in the community and your organization’s capacity to implement the proposed project.
   b. Indicate what proportion of any current funding streams are 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: Opening our Doors.

   There is no specific eligibility requirement that applicant organizations have integrated any or all the ten components, however, your responses to this question will provide CVSSD 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. As outlined in the report "The ten components do not form a hierarchy. Instead, all 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 your components will grow."

   Mark the radio 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 the narrative box for question 1k, by providing a brief description of how your organization has Fully integrated the 10 components into its organizational structure. If any of the 10 components are Partially integrated, describe your organizations efforts to build capacity to integrate these components in the future. *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.

FORM E: POPULATION SPECIFIC PROJECT INFORMATION

Applicants must complete each section of this form as applicable. 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 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, please indicate what progress your organization has made since the 2026 application toward fully meeting the criteria for Population Specific Services. If you are not a current recipient of SASP funding, select radio button NO and skip to question A2.

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 underserved 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. Question A3a will appear if you choose ***fully*** meets the criteria in A2. If the applicant checked the box stating that their organization or program ***fully*** meets all the Criteria for Population Specific Services, the applicant should respond to the **narrative question A3a** by describing how the applicant organization or program aligns with *each* of the criteria.

   Question A3b will appear if you choose ***substantially*** meets the criteria in A2. 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 A3b** by describing which, if any, of the criteria the applicant organization fully meets and what actions the applicant is taking to fully meet all the remaining criteria.

B. Population Specific Organization or Program

1. If your organization is a *current* recipient of SASP funds and your organization did <u>not</u> fully meet the criteria for Population Specific Organization or Population specific Program within a Larger Organization, please indicate what progress your organization has made since the 2026 application toward fully meeting the criteria. If you are <u>not</u> a current recipient of SASP funding, select radio button NO and skip to question B2.

2. To be eligible to receive SASP funding, applicants must demonstrate that their organization or program within a larger organization ***meets*** the criteria of a Population Specific Organization, or is ***developing*** as a Population Specific Organization or Program within a Larger Organization. There are six Criteria for Population Specific Organizations and seven Criteria for Population Specific Program within a Larger Organization. Carefully consider the criteria and check the appropriate box to indicate if the applicant organization or program within a larger organization ***meets*** the criteria or is ***developing*** to meet the criteria. Your next question will appear depending on what you selected.

3. Question B3a will appear if you choose ***meets the criteria*** in A2. If the applicant checked either box stating that their organization or program within a larger organization ***meets*** all the criteria for a Population Specific Organization or a Population Specific Program within a Larger Organization, then the applicant should respond to the **narrative question B3a** by describing how the applicant organization or program aligns with *each* of the criteria.

Question B2b will appear if you choose ***is developing*** in A2. If the applicant checked either box stating that their organization or program within a larger organization is ***developing*** to meet all the criteria for a Population Specific Organization or a Population Specific Program within a Larger Organization, then the applicant should respond to the **narrative question B2b** by describing which, if any, of the criteria the applicant organization fully meets and what actions the applicant is taking to fully meet all of the remaining criteria. Applicants should include a timeline.

4**. Population Specific Project Core Team.**

Applicants that <u>meet</u> the criteria of a Population Specific Organization or a Population Specific Program within a Larger Organization do <u>NOT</u> have to fill out questions 4a-4f.

Applicants that are <u>developing</u> as a Population Specific Organization or a Population Specific Program within a Larger Organization <u>NEED</u> to fill out questions 4a-4f.

Applicants must demonstrate they have a designated team of staff who have met the training requirement to provide population specific services to the underserved community(s) to be served by this project. Applicants must also demonstrate the organizational capacity to support the core team's efforts in actively engaging with underserved communities and community partners to ensure the organization's ability to meet the population specific criteria outlined above. For more information on training requirements click **here**.

a**.** List population specific project staff and their expertise providing population specific services to the underserved populations that will be served through the SASP project.

b. The Population Specific Project Core Team is ***required to attend at least 24 hours of training in the last 24 months on population and culturally specific services and practices.*** Click the + to add more rows.

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.
- **Location**: Provide the city and state where the training was conducted.
- **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.
- **Staff Attended**: Write the first and last names of the Population Specific Project Core Team staff who attended.

c. Population Specific Project Core Team members that did not meet the entire 24-hour training requirement are required to complete the remaining training hours within the first 6 months of the SASP grant. Complete the chart with future planned training. Be sure to include any training courses that will use SASP funding in the SASP Budget.

See descriptions above for detailed information. The SASP Training Requirement and Resources has information and links to training. Click the + to add more rows.

d. Demonstrate how the organization's leadership prioritizes supporting the Population Specific Project Core Team members by their actions.

e. To increase the organization's expertise, describe the internal sharing, presentations, and training to be provided to the organization by the Population Specific Project Core Team members on the needs and experiences of the underserved community. (The underserved communities and populations should match those selected on the Cover Page.)

f. Describe how the organization or program plans to engage with the underserved community to enhance the population specific criteria. (The underserved communities and populations should match those selected on the Cover Page.)

FORM F: MEANINGFUL ACCESS TO EFFECTIVE SERVICES

Effective services are survivor centered, trauma informed and culturally responsive. Survivors have the right to self-determination and to make informed decisions about the services they receive. This means offering services that are accessible and responsive to survivors' culture, age and other intersecting identities. Services may include but are not limited to answering crisis calls (for non-profit organizations this includes operating 24-hour crisis lines), emergency housing or shelter, secure and stable housing, emergency assistance, co-advocacy for when more than one provider serves the same survivor, safety planning, sexual assault services and culturally specific or culturally responsive services.

In this section applicants must certify that certain services, operations, and activities are provided in accordance with the expectations outlined in the Request for Applications, Section II B Common Requirements. Applicants will also confirm that they have agreements, policies, procedures, practice standards and/or operation manuals available to describe them.

If the organization has recently (in the last three years) submitted this information as part of another CVSSD grant application **click the radio button** stating that the information has been provided to CVSSD in another application.

If you are a new to CVSSD applicant, and/or you have not submitted the information to CVSSD in the last three years please **click the radio button** stating that the information has not been provided to CVSSD in another application and will be provided to CVSSD, if funded.

FORM G: 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.

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 a minimum of 40 hours of content-specific training for 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.

Training on population- and culturally specific services and practices specific to the underserved population may substitute for a portion of the required training hours, pending CVSSD approval.

See the SASP Webpage under Additional SASP Resources for specific required *SASP Training Requirements and Resources* and Grant Guidance Documents under *Training Requirements* for the required general advocate training.

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 links for specific requirements above). Click the + if you need more rows. 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 or write virtual if applicable.

5. Complete the table with the advanced sexual assault training planned 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 links for specific requirements above). The explanation for the content

required in each column is the same as described above. If any of these trainings will utilize SASP funding, be sure to include them in the Budget. Click the + if you need more rows.

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.

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 1-4 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 Form N Project Budget - Personnel.

1. **Type of project to be supported with SASP funding**
   - Select <u>one</u> 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 <u>one</u> of the corresponding radio buttons underneath related to SASP or other funding.
   - 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 SASP project.

2. **Underserved Populations and Communities:** The Underserved Populations and Underserved Communities the applicant marked on *Form A: Cover Page* will auto populate below question 2. Question 2 is the applicant's opportunity to describe the underserved populations and community(s) 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 Challenges**: This is the applicant's opportunity to describe the specific challenges or obstacles the underserved populations and communities face 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 populations or communities' service needs. It will explain why the project is needed.

4a. Specific services to be provided and how these services will be implemented. Explain how the services to be provided will be implemented with ALL the selected underserved populations and underserved communities. Make sure all specific services selected on *Form A: Cover Page* are described in the answer. (Services selected on *Form A: Cover Page* will auto populate under question #4.) Refer to *Appendix B* 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. The following are examples of identified service gaps:

Advocacy Services

- Crisis intervention, 24-hour crisis hotline, ongoing follow-up services, and information and referral
- Additional 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 accessible and affordable 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 barriers
- 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 in hospital response
- Lack of trained SART responders

System Collaboration

- 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 challenges and obstacles: Explain how the services will address **ALL** the selected underserved populations and underserved communities' challenges /gaps in services. 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 and underserved community: Explain how the services will be provided in a culturally responsive manner to ALL the selected underserved populations and communities.

5. **Start-up and ongoing activities:** As appropriate, address both specific activities required to implement new project activities as well as ongoing activities necessary to ensure the success of a continuing project. Be sure to include timelines for implementation of new project activities.

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

All applicants must complete this form. Form I 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, Reporting and Financial Requirements* section 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 SASP services.

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

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 plans to accomplish. Ensure that there is a clear connection between the goal and the problem (challenges/obstacles faced by underserved populations), service 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 to accomplish the project objective. These proposed activities, which address the problem, 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 you are 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 Numbe	f. Outcomes	g. Outcome Percentage
Increase healthy interactions and ongoing recovery for survivors of sexual assault during the 12-month grant period.	Organize outreach, logistics, materials, and trained facilitators for SA specific support groups.	Convene 36 weekly SA specific support groups during the 12-month grant period.	36	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 recovery for survivors of sexual assault during the 12-month grant period.	Organize outreach, logistics, materials, and trained facilitators for SA specific support groups.	20 unduplicated SA survivors will attend SA specific support groups during the 12-month grant period.	20	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

A. Community Collaboration

All applicants must complete question 1.
Applicants should respond to each type of collaboration 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).

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. <u>A signed copy of the MOU will be required prior to the execution of grant award documents.</u>

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

FORM K: ADMINISTRATIVE SELF-ASSESSMENT

An Administrative Self-Assessment is required as part of the CVSSD Monitoring Process. Complete each section or select "Not Applicable" depending on the type of agency you represent. Remember to respond to each statement. When complete, SAVE the form before exiting the page. For each statement, select one of three responses.

- Unknown or Not Achieved (We don't have this practice)
- Partially Achieved (We are working on this practice)
- Fully Achieved (We have a sound practice)

CVSSD is required to review and evaluate potential risks posed by applicants prior to awarding Federal funds (2 CFR § 200.205). The self-assessment alone does not determine funding; the self-assessment gives CVSSD an update on the status of the organization, and it helps Fund Coordinators know what technical assistance to offer and helps determine when policies and procedures review and/or on-site programmatic review should be conducted.

Applicants may access printable copies of CVSSD's financial and administrative assessment questions at Grant Guidance Documents. Helpful tips and resources for successful grant administration are included in the citations and footnotes of the self-assessment documents.

FORM L: FINANICAL SELF-ASSESSMENT

A Financial Self-Assessment is required as part of the CVSSD Monitoring Process. Remember to respond to each statement. When complete, SAVE the form before exiting the page. For each statement, select one of three responses.

- Unknown or Not Achieved (Entity must implement this practice)
- Partially Achieved (Entity needs to improve)
- Fully Achieved (Entity has sound practices)

CVSSD is required to review and evaluate potential risks posed by applicants prior to awarding Federal funds (2 CFR § 200.205). The self-assessment alone does not determine funding; the self-assessment gives CVSSD an update on the status of the organization and it helps Fund Coordinators know what technical assistance to offer and helps determine when policies and procedures review and/or on-site programmatic review should be conducted.

Applicants may access printable copies of CVSSD's financial and administrative assessment questions at Grant Guidance Documents. Helpful tips and resources for successful grant administration are included in the citations and footnotes of the risk assessment documents.

FORM M: 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 an 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. A Statement of Compliance form can be found **here**.

   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 CVSSD Grant Agreement. Sample CVSSD grant agreement language is available on the SASP webpage. 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. The required form can be found **here**.

4. **Legal Documents (non-profit organizations only)**

Applicants who are NOT a nonprofit please click the box marked Not Applicable and click SAVE.

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**. CVSSD 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 N: 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 (including 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 Services and Supplies page under Administrative Costs or Indirect/De Minimis 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, 2027 – December 31, 2028;
- 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 in the Project Description form and Advanced Sexual Assault Training form.

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. If you have the same position title for more than one SASP funded person you may want to add a 1 or 2 after the position title to keep them separate.

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 the budgeted salary for **Year 1** of the award. In the second text box, provide a detailed calculation that clearly shows how the budget was determined for **Year 2** of the award.

   Example Year 1: Salary Detail: $50,000/year x 0.60 FTE (SASP funded) = $30,000. This can also be calculated using an hourly approach: $24.0385/hour x 1248 hours a year (SASP funded) = $30,000.

   Example Year 2: Salary Detail: $55,000/year x 0.60 FTE (SASP funded) = $33,000. This can also be calculated using an hourly approach: $26.4423/hour x 1248 hours a year (SASP funded) = $33,000.

4. **Total Salary:** List the total annual salary for this position funded at full-time equivalency (1 FTE) by all funding sources. 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 1.0 FTE for 2 years: In this example the yearly salary for 1 FTE would be $50,000 ($24.0385/hour x 2080 hours) in Year 1 + $55,000 ($26.4423/hour x 2080 hours) in Year 2 = $105,000 total 2 years.

5. **Personnel Expenses Funded by this Grant:** Indicate the amount of personnel expenses to be funded by SASP. 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 <u>and</u> 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: $50,000 Total Salary x 0.35 personnel percentage = $17,500 X 0.60 FTE (SASP funded) = $10,500. 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: $55,000 Total Salary x 0.37 personnel percentage = $20,350 X 0.60 FTE (SASP funded) = $12,210. Personnel expenses are calculated at 37% 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 2-year costs of personnel expenses for this position funded at a full-time equivalency (1 FTE) by all funding sources. Even if the position is part-time, list the cost for 1 FTE.

   Example 1.0 FTE for 2 years: In this example the Year 1 personnel expenses for 1 FTE would be $17,500 ($50,000 Total Salary x 0.35 personnel percentage = $17,500) + Year 2 personnel expenses for 1 FTE would be $20,350 ($55,000 Total Salary x 0.37 personnel percentage = $20,350) = $37,850 total 2 years.

7. **FTE Calculation:** The FTE will auto-populate once the salary and benefits are entered. The CVSSD 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:

   Grant Funded Salary + Grant Funded Personnel Expenses (PE) / Total 1 FTE Salary + Total 1 FTE PE

   Example: using Year 1 example above**.**
   $30,000 (SASP Grant Funded Salary) + $10,500 (SASP Grant Funded PE @ 35%) = $40,500
   $50,000 (Total Salary) + $17,500 (Total PE) = $67,500
   $40,500/$67,500 = 0.60 FTE

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

FORM O: CONTRACTS AND SUBAWARDS

If you do NOT plan to use a contract or subaward to engage with a partner to provide victim services, you do not need to complete this form.

Please, do NOT attach the Contract or Subaward to the Grant Application. Contracts and Subawards will need to be approved by CVSSD prior to any expenses being incurred through an Amendment process.

A **contract** is needed when either state or federal funds will be used to obtain ancillary goods or services from an outside entity (contractor) for the applicant's own use or for project participants at the direction of the applicant (the contractor will not make participant eligibility determination and does not have the authority to make decisions regarding the delivery of services and the types of services provided).

A **subaward** is needed when federal grant funds will be awarded to an outside entity (subrecipient) to carry out one or more services of the grant-funded project (the subrecipient generally makes participant eligibility determination and has the authority to make decisions regarding the delivery of services and the types of services provided within the scope of the agreement). An organization must have Subaward Policies and Procedures in place prior to expending subaward funds. The organization is responsible for monitoring the subaward and determining that all fiscal and programmatic responsibilities are fulfilled.

Things to consider when including contracts and subawards in your funding proposals:

- 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 for the grant funds that are being requested; and
- The budget narrative should clearly explain the benefits of each grant-funded expense to the project.

Required Information:

a. Name of Provider: Enter the name of the proposed contractor or subrecipient.

b. Contract/Subaward Period. Enter the beginning and end dates for the contract or subaward period. Dates should start and end within the grant period.

c. Contract/Subaward Amount. Enter the total Contract or Subaward Amount to be funded by SASP. *Do not include contracted services for accounting or other administrative services, these costs should be included on the Services & Supplies page under Administrative Costs or Indirect Costs.*

- As a reminder, consultant fees in excess of $650 per day or $81.25 per hour require additional justification and prior approval.
- Consider all expenses to be paid on the Contract/Subaward in addition to any compensation (training costs, travel costs, mileage, meals and lodging, supplies, etc.).

d. Payment Terms: Enter the terms of payment. See examples below.

- ***Calculation Example:*** *Contract for Trainer: $300 for mileage, per diem and lodging and $50 for supplies and copies.*
- ***Calculation Examples****: Subaward for FTE: $15/hour X 1040 hours = $15,600. Contract for Trainer: $50/hour X 16 hours = $800*

e. Describe Product: Provide a complete description of the product or service the Contract or Subaward will provide.

f. Using Federal Funds: Mark *Yes* or *No* on the radio buttons if you are using federal funding. (SASP is a federal grant.)

- If you mark *Yes*, **g**, **h** and **i** will populate with a Checklist (g) and a Yes/No question about the funding relationship (h), and a checkbox (i).
- If you mark *No*, **h** will indicate that the funding relationship is a Contract, and **i** is a check box.

g. Checklist: If you marked *Yes* on **f** this will prepopulate. Read through the Characteristics of Contracts and Subawards, check all that apply.

h. Funding Relationship: If you marked *Yes* on **f** this will prepopulate. The section with the greatest number of marked characteristics indicates the likely type of relationship. Mark the radio button with the relationship type- Contract or Subaward.

h. **The funding relationship is a Contract**. If you marked *No* on **f** this will prepopulate.

i. Procurement Standards Followed: If you marked *No* on **f** this will prepopulate. If you marked *Yes* on **f** and then *Yes* on Contract relationship this will prepopulate. Mark the check box that certifies that you are following your procurement standards that, at a minimum, follow the requirements put forth in the Grant Management Handbook.

i. Subaward Policies: If you marked *Yes* on **f** and then *Yes* on Subaward relationship this will prepopulate. Mark the check box that certifies that you have policies and procedures in place to manage subawards. You have reviewed the requirements regarding subawards and are prepared to meet them.

j. Final Copy: Check the box acknowledging that a final copy of the contract or subaward will need to be approved by CVSSD prior to any expenses being incurred.

To add another contract or subaward, click ***Save***, then click the ***Add*** button in the upper right corner.

FORM P: 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 discussed in the Project Description, and Goals and Objectives;
- 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. **Travel:** Indicate the amount the applicant agency is requesting for Travel to be funded in Year 1 and Year 2.

   In the text box 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. Use **GSA.gov** vehicle mile rates.

   Calculation Example: 1,000 miles X 0.76/mile = $760

2. **Training:** Complete the **Year 1 Training** table and the **Year 2** Training table by providing the title of the training and website link if available, training location, training dates, and the number of attendees. In the **Year 1** or **Year 2** cost box put the total cost of the training to be charged to the SASP grant, be sure to include any registration fee, the estimated travel, lodging, and per diem costs. The Total Cost column will auto-populate the total training costs for years 1 and 2.
   - Include any trainings needed to fulfill SASP Training Requirements for advanced sexual assault training, and/or population and culturally specific services and practices training if not previously completed in the last 24 months. Review your responses on the Advanced Sexual Assault Training form and Population Specific Project Information form for more information.
   - The Training Totals row at the bottom of the table 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 CVSSD during grant negotiation. See the most recent version of the relevant SASP Guidance for further details on training requests outside of Oregon.

NOTE: Applicants must check the box agreeing that they will base all travel cost on the organization or program's own travel policy and that Government per diem rates will be used to calculate travel and lodging costs which 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 SASP Guidance for more details around this policy.

Text Box Calculation Example: Registration fees: $250 X 2 = $500. Travel costs: 600 miles round trip X 0.70/mile GSA = $420. Lodging costs: $99/night GSA X 2 X 1.15 taxes = $227.70. Per diem costs: $66/day GSA X 2days X 2 attendees – $66 (4 lunches provided) = $198. Total cost $500 + $420 + $227.70 + $198 = $1,345.70.

3. **Office Supplies, Postal Supplies, Printing & Coping, Communication, and Equipment Rental:** Indicate the amount 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/month x 12 months = $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/month postage x 12 months) = $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/month printing x 12 months) = $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 x 12 months) + ($35/month office phone/Internet x 12 months) = $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 x 12 months = $300 (describe as either a cost directly attributable to the project or a pro-rated cost based on an agency identified allocation method).

4. **Agency Rent**: Indicate the amount 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.

   Calculation Examples:
   Rent $3,500/month x 12 months = $42,000/12.5 Total Agency FTE (not people) = $3,360 Rent per person per year x 1.5 SASP grant funded FTE = $5,040 SASP funded rent annually.

   Agency Utilities: Indicate the amount the applicant agency is requesting for Utilities in Year 1 and Year 2.

   In the text boxes for Year 1 and Year 2 describe the type of utilities (water, heat, electricity, etc.), show how the cost was determined, and explain how the utility costs are necessary and beneficial to the project.

   Calculation Example:
   Water $50/month x 12 months = $600/12.5 Total Agency FTE (not people) = $48 Water per person per year x 1.5 SASP grant funded FTE = $72 SASP funded water annually.

5. **Emergency Services**: Indicate the amount the applicant is requesting for Emergency Services to be funded in Year 1 and Year 2. Emergency assistance involves costs covered on behalf of survivors to meet basic needs and provide immediate safety, like confidential housing, transportation, medical/legal advocacy, or food. Emergency assistance is <u>not</u> intended to pay for the organization's cost of serving the survivor.

   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.

Calculation Examples:
Emergency Shelter ($100 x 20 nights) + Food/Gas ($20 x 200 survivors) + Clothing ($15 x 200 survivors) = $9,000 in Emergency Services.

6. **Capital Outlay**: Indicate the amount 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.

7. **Indirect/De Minimis Costs**: If an applicant is charging indirect costs or a *de minimis* they cannot also charge Direct Administrative costs to federal awards.

   For federal grants, DOJ is required to honor an applicant's negotiated indirect cost rate, or the de minimis rate of modified total direct costs (not to exceed 15%). Select the appropriate boxes to signal the organization's intent regarding the use of indirect or de minimis costs with this two-year award.

   Indirect: A federal 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.
   - Applicants that elect to charge indirect costs must use the same indirect cost rate for all federal funding awards.

   De Minimis: Use of an established de minimis rate of the MTDC (not to exceed 15%). Eligible organizations must certify that no unallowable expenses are included in the Modified Total Direct Cost (MTDC) rate (including lobbying and fundraising) and must keep the documentation of this decision on file. Eligible entities include:
   - Nonprofit organizations that do not have a current federally negotiated 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 do not have a current federally negotiated indirect cost rate with the Federal government may use the de minimis rate of MTDC (not to exceed 15%).

Modified Total Direct Costs (MTDC) means all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and up to the first $50,000 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) more than $50,000.

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

Personnel Salary	$50,000
Personnel Expenses	$4,400
Contractual Services	$57,000
Travel	$1,000
Office Supplies	$400
Equipment	$3,000
Total Direct Costs	**$115,800**
Less amount of Contract exceeding $50,000	- $7,000
Less Equipment	- $3,000
Less Rental Costs (if part of an organization allocation plan)	$0
MTDC	**$105,800**
De minimis @ 15% of total MTDC $105,800 x 15%	$15,870
Total Project Amount $115,800 Total Direct Costs + $15,870 De Minimis	**$131,670**

8. **Administrative Costs**: If an applicant does not have an indirect cost rate and does not want to charge the 15% de minimis rate to all federal awards they can choose to direct charge administrative costs at any rate up to 5% of the budget amount.

   Indicate the amount applicant is requesting for Administrative Costs to be funded.

   In the text box 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.

   Calculation Example:
   HR Contract: $300/month x 12 months = $3,600 per year.
   IT Contract: $255/month x 12 months = $3,060 per year.
   Totals $3,600 + $3,060 = $6,660 Total Admin Costs/12.5 Total Agency FTE = $532.80 Admin cost per FTE x 1.5 SASP grant funded FTE = $799.20 SASP Admin cost annually.

9. **Other**: Indicate any amounts the applicant organization is requesting for Other Costs to be funded. In the text boxes for Year 1 and Year 2 list other items by major type (title), the basis for the computation and how these costs are necessary and beneficial to the project.

FORM Q: BUDGET SUMMARY

This page summarizes the budgets from the Personnel, Contracts and Subawards, and Services and Supplies forms. **Please click the "Save" button when opening this form** to have it pull information from the other budget forms and calculate totals. 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 there are no additional errors.