



## STAFF REPORT

**Report To:** Board of Supervisors      **Meeting Date:** April 18, 2019

**Staff Contact:** Sheriff Ken Furlong, KFurlong@carson.org

**Agenda Title:** For Possible Action: Discussion and possible action regarding a request from the Sheriff's Office for the submission of a grant application to the Department of Justice, 2019 Edward Byrne Memorial Justice Assistance Grant Program, for the amount of \$80,059 to fund one full-time Sheriff's Office Victim Witness Coordinator position. (Sheriff Furlong, kfurlong@carson.org)

**Staff Summary:** This grant would provide funds in an effort to increase the ability for the Carson City Sheriff's Office to provide victim services and crisis intervention to victims and witnesses. The grant would also assist victims and witnesses navigate through the criminal justice process. The Sheriff's Office Victim Witness Coordinator position would be a new full-time position and would work alongside both front line officers as well as the District Attorney's office.

**Agenda Action:** Formal Action / Motion      **Time Requested:** Consent

### **Proposed Motion**

I move to authorize the Sheriff's Office to submit the grant application as described.

### **Board's Strategic Goal**

Safety

### **Previous Action**

N/A

### **Background/Issues & Analysis**

The overarching goal of the Carson City Sheriff's Office Victim Witness Coordinator position is to provide immediate services such as assistance to victims and witnesses within the criminal justice process and the provision of compassion and support to the most vulnerable during their times of need. The goal of the Victim Witness Coordinator is to bridge the gap between victims/witnesses and the District Attorney's office. The current Victim Advocate who assists the Sheriff's Office is with the Nonprofit group, Victims to End Domestic Violence, and that position will not be funded after June 30, 2019. This grant would make this position a full-time position within the Sheriff's Office. Currently, the advocate is community-based. Bringing this position under the direction of the Sheriff's Office would also transform the Victim Witness Coordinator position into a system-based advocate position. By doing this, the advocate may have more leeway in assisting law enforcement.

### **Applicable Statute, Code, Policy, Rule or Regulation**

N/A

### **Financial Information**

**Is there a fiscal impact?** Yes

**If yes, account name/number:** Grant Account TBD

**Is it currently budgeted?** No

**Explanation of Fiscal Impact:** As the grant has no match, it greatly reduces the financial impact for the city. Total expenses requested to be paid by the grant are \$80,059. This includes salary and benefits totaling \$72,838; new equipment consisting of a new laptop and printer totaling \$2,434; and training totaling \$4,787.

**Alternatives**

Do not authorize submission of the grant application.

**Attachments:**

[JAG Application FFY2019 blank.docx](#)

[FFY2019 Budget VOCA.pdf](#)

**Board Action Taken:**

Motion: _____	1) _____	Aye/Nay
	2) _____	_____
		_____
		_____
		_____

\_\_\_\_\_  
(Vote Recorded By)

# STATE OF NEVADA



# Edward Byrne Memorial Justice Assistance Grant Program (JAG)

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Federal Year 2019 Sub-Recipient Application

Department of Public Safety  
Office of Criminal Justice Assistance

3/8/2019



OFFICE OF CRIMINAL JUSTICE ASSISTANCE  
GRANT APPLICATION 2019

**~CONTACTS~**

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# Introduction And Detailed Guide



## OFFICE OF CRIMINAL JUSTICE ASSISTANCE GRANT APPLICATION 2019

In 1987 the Office of Criminal Justice Assistance (OCJA) was established to acquire, administer, and subgrant to state and local government agencies grants from the U.S. Department of Justice. OCJA became the State Administrative Agency (SAA) for **multiple** grants. OCJA's office is housed under the Department of Public Safety.

As the SAA, OCJA manages the coordination of JAG funds to support Nevada's mission to reduce violent crime and substance abuse. Given the scale and complexity of these problems, clearly one sole entity cannot address these issues alone. The SAA encourages applicants for the Justice Assistance Grant (JAG) funds to work closely with other criminal justice agencies to promote comprehensive and innovative strategies addressing violent crime and substance abuse, both at the community and state level.

The Nevada Department of Public Safety, Office of Criminal Justice Assistance (OCJA), administers the Edward Byrne Memorial Justice Assistance Grant Program (JAG). This grant provides funds to state and local units of government and tribes in an effort to prevent and reduce crime and to improve the criminal justice system within Nevada. OCJA, as the SAA, can award to private non-profit neighborhood or community – based organizations with a waiver if the agency is administering: a criminal justice project that would benefit the entire State, or local jurisdiction, or a private non-profit that is in partnership with a local law enforcement agency to provide criminal justice services to designated "units of local government". Non-profit agencies require a waiver; therefore, please contact OCJA.

Congressional funding for Nevada's FY 2019 JAG is expected to be level funding at approximately \$2,000,000. This project period will be October 1, 2019 through September 30, 2020.

JAG's eight authorized purpose areas are:

1. Law enforcement programs
2. Prosecution and court programs
3. Prevention and education programs
4. Corrections and community corrections programs
5. Drug treatment and enforcement programs
6. Planning, evaluation, and technology improvement programs
7. Crime victim and witness programs
8. Mental health programs and related law enforcement and corrections programs

The Bureau of Justice Assistance outlines the programs JAG funds are able to address; however, OCJA's Statewide Strategic priorities will receive higher points in evaluation scoring and a review committee will determine the merits of the programs based upon the grant application. Applicants may apply for funding for a program which is not in the priority areas listed, but addresses an identified public safety problem area within the seven JAG purpose areas listed above.

OCJA's Strategic Plan identifies the following areas as priorities – in no particular order:

- Statewide communications, technology, information sharing and records management systems
- Addressing mental health offender issues – including law enforcement handling of these offenders
- Alternative sentencing projects
- Specialty courts
- Corrections transition programs, reentry/residential programs
- Training
- Prevention and Education



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# General Information



## OFFICE OF CRIMINAL JUSTICE ASSISTANCE GRANT APPLICATION 2019

### Reimbursement Notice

OCJA grants and programs are **reimbursement funded only**. This means sub-recipient agencies front expenses from their budget. OCJA staff reviews and approves the sub-recipient's monthly expense report (claim) and its corresponding backup for eligible expenses, then OCJA staff will process the reimbursement.

### Fiscal Responsibilities

Federal mandates require all sub-recipients of federal funding to establish and maintain accounting systems and financial records that accurately account for awarded funds. Accounting systems for all awards **must** ensure the following:

- Federal and program funds are **NOT** commingled with funds from other federal grant sources.
- The accounting system presents and classifies historical cost of the grant/program as required for budgetary and auditing purposes.
- Funds specifically budgeted and/or received for one project cannot be used to support another.

NOTE: All awards are subject to audits during the performance period and within three years after the end of the performance period.

### Reporting Requirements

OCJA requires:

1. a *Monthly* Financial Report (claim) requesting reimbursement of expenditures even if no financial activity occurred during the month,
2. a written Quarterly Progress Report (narrative) documenting the project's progress in meeting its goals and objectives,
3. the quarterly on-line Performance Measurement Tools (PMT) report on the Bureau of Justice portal.

**All quarterly reports are due by the 20<sup>th</sup> calendar day following each calendar quarter.** Not meeting the reporting requirements in a timely and efficient manner jeopardizes reimbursement of claims and the continuation of the award.

### Project Evaluation

In addition to the above listed reporting requirements, the sub-recipient is responsible for submitting a final "Project Evaluation" within forty-five (45) calendar after the closing of the performance period. The evaluation provides the results of the funded project and follows the design submitted in the application. OCJA considers this Project Evaluation an important criterion for allocation of future funding.

### Accountability and Transparency - DUNS and SAM

The implementation of the Federal Funding Accountability and Transparency Act, effective January 1, 2009, requires all potential OCJA sub-recipients to provide a Dun & Bradstreet Data Universal Numbering System (DUNS) number, and the registration of the DUNS number with the System for Award Management (SAM previously known as CCR database). The DUNS number is a unique number identifying an organization





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which helps track the distribution of grant money. **If your agency does not have a DUNS number, and /or is not currently registered in SAM, begin these processes now. The process for the SAM registration can take several weeks.** The first page of the application requires the entry of a *correct* DUNS number. Submitting an incomplete application is grounds for its disqualification.

The DUNS number is necessary prior to registering with SAM.

To receive a DUNS number, go online to <http://fedgov.dnb.com/webform/displayHomePage.do>, or call the Dun & Bradstreet hotline at 1-866-705-5711. The hotline provides a DUNS number at the conclusion of the call at no cost.

Once the applying agency has a DUNS number, register the number with SAM at <https://www.sam.gov/portal/public/SAM> . If the applying agency previously had a CCR number, the account automatically merged with the new SAM system, it is not necessary to re-register the number with SAM, unless your business information has changed.

### **Additional Information**

When determined to be in the best interest of the State of Nevada, OCJA reserves the right to reject applications, waive informalities and minor irregularities in the applications received, or to accept any partial applications. OCJA may hold applications with merit, not funded during the current cycle, for future consideration. Future consideration is dependent on the availability of funds.

Financial obligations of the State payable after the current fiscal year are contingent upon funds for that purpose being appropriate, budgeted and otherwise made available. In the event funds are not appropriate, any resulting contracts (grant or program awards) will become null and void without penalty to the State of Nevada.

All documents submitted with an application requesting federal or state program funds become the property of the State of Nevada. Upon the awarding of funds to an application, its contents turn into a contractual obligation.

### **Submittal Instructions**

These instructions are general for most of the OCJA applications.

1. Mail or hand-deliver one original application and three hard copies (4 copies total; postmark on due date is acceptable) to:

NEVADA DEPARTMENT OF PUBLIC SAFETY  
OFFICE OF CRIMINAL JUSTICE ASSISTANCE (OCJA)  
1535 OLD HOT SPRINGS ROAD #10  
CARSON CITY, NV 89706



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2. Submit electronic version of the application in Word and Excel format to [ocja@dps.state.nv.us](mailto:ocja@dps.state.nv.us) by the due date. **PDF is not acceptable.** (OCJA does not require original signatures on the electronic copies.)
3. The entire application package consists of four sections and a checklist. Your agency must submit the following for the application review:
  - a. One original copy of the application with all sections completed plus original signatures. (Single sided preferred; please just provide the application: pages 30-59.)
  - b. Three hard copies of the completed original application. (Double sided preferred; please just provide the application: pages 30-59.)
  - c. A completed electronic copy which must be in either Word or Excel, **PDF not accepted.** (OCJA does not require original signatures on the electronic copies.)
  - d. The electronic copy must be e-mailed to [ocja@dps.state.nv.us](mailto:ocja@dps.state.nv.us).

**The Grant Application Deadline is 5:00 p.m., May 10, 2019.**

[http://ocj.nv.gov/programs/ALL/Grant\\_Applications/](http://ocj.nv.gov/programs/ALL/Grant_Applications/) OCJA web-site

Contact OCJA at (775) 687-1500 or [ocja@dps.state.nv.us](mailto:ocja@dps.state.nv.us), with any questions.

**Application Outlay**

- The application must be stapled in the top left-hand corner.
- Do not bind applications in notebooks, plastic bindings, or printed covers.
- Use 12 point font when preparing the application.
- Do not alter the order of the sections.
- Double sided printing is preferred for all copies.
- Ensure budget figures are mathematically correct, and the total of the budget summary matches the total on the title page; have financial staff review the budget.
- Use only whole dollar amounts. No cents.
- Observe page limitations;
- Respond to all sections of the application; ensure a thread ties the application together from the Problem Statement through the evaluation. The elements should be related and make sense.
- Supplanting - grant funds cannot be used to replace state or local funds that would, in the absence of federal assistance, be available or forthcoming.
- Spell out acronyms, at least when first used. Eliminate jargon when possible.
- If this is a continuation project, explain what has/will change from the previous year. Don't assume reviewers are familiar with existing projects.
- Footnote any reference to federal, state or local laws, codes or statutes.
- Use local statistics rather than national statistics.
- Read this guide.



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- Please remove pages 1-29 from your application submission. OCJA only needs the Checklist and your entity's Application.
- OCJA doesn't limit appendices to the application; supporting information can be attached as needed.

### **Allowable Expenses**

- Project personnel salaries and benefits, including overtime pay.
- Equipment necessary for implementation of the program.
- Building rental.
- Project personnel travel/training.
- Audits.
- Supplies and operating expenses directly related to project operation.
- Professional services (including contractors and consultants). Costs must fall within federally approved policy - \$650.00 per day or \$81.25 per hour.
- Uniforms (must not be union allowance uniforms and must not be part of the normal operating budget).

### **Unallowable Expenses**

- Any expenditure not directly related to the program.
- Badges and personal items necessary for any job related duties, i.e., side arms, identification badges, etc.
- Bar charges/alcoholic beverages.
- Bonuses, commissions, gifts and incentives.
- Bomb pay.
- Business cards.
- Car wash.
- Construction.
- Conference rooms.
- Costs incurred before the project start date or after the expiration of the project period.
- Entertainment.
- Food and beverages.
- Expense of organized fund-raising.
- Fines and penalties.
- Membership Dues and Fees.
- Indirect costs unless there is proof of certification by the lead consignant agency.
- Land/building acquisitions.
- Late charges.
- Lobbying, political contributions, and legislative liaison activities.
- Military type equipment.
- Newspaper subscriptions .
- Promotional items.
- Rental cars – unless previously justified and preapproved by OCJA.



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- State and local sales taxes.
- Sporting events.
- Supplanting: federal funds must not replace those funds which have been appropriated for the same purpose in your general budget.
- Tips.
- Honoraria.
- Corporate Formation.
- Compensation for Federal Employees.
- Home office workspace and related utilities.
- Passport charges.

*Contact OCJA at (775) 687-1500 if you have questions.*

**NOTICE: All applications are subject to public review.** When sensitive procedural information is necessary in the application two options are available: 1. OCJA will accept a final redacted copy without the sensitive information. 2. The applicant agency may make note of the sensitivity in the application and request a verbal decision regarding the sensitive information.



# **INSTRUCTIONS AND GUIDE FOR FILLING OUT THE APPLICATION**



## OFFICE OF CRIMINAL JUSTICE ASSISTANCE GRANT APPLICATION 2019

### INSTRUCTIONS

For review and ranking purposes, a “point” value is assigned to each Section. The total possible score for the entire application is 100, with 10 additional points awarded for an evidenced based project. The point value is broken out as follows: Section I = 5 points, Section II = 70 points, Section III=15 points, Section IV = 10 points. Total points value 100. Evidence Based project = 10 extra points.

### ***Section I – Title (5 points)***

The letter indicated below will correspond to the field to complete in the application.

- A. Check:** The name of the grant program from which the application is requesting funds.
- B. Applicant Agency:** Enter the official name of the agency submitting the application. The address refers to the physical and mailing address of the applicant agency (9 digit Zip is required in this section). OCJA will consider the application incomplete when the DUNS and/or Federal TAX ID fields are incomplete. To comply with federal requirements for Accountability and Transparency, the DUNS number must be registered in the System for Award Management (SAM). \* **Please attach a copy of your agency’s SAM registration; attach the copy after Section I – Title.**
- C. Direct Award from US Department of Justice (DOJ):** Some agencies are eligible to receive funding directly from DOJ under the Justice Assistance Grant (JAG). If the county or city where the applying agency resides did not receive a direct award for JAG this past year, check the **Not Applicable** or **No** box as appropriate, and continue to field D. Otherwise, confirm by checking the **Yes** box and entering the amount awarded. \***Please indicate if your agency has received a different Federal Award for the same project or same type of project.**
- D. Project Title:** Succinct description of the proposed activity. If funded previously, use the title from the previous award.
- E. Project Period:** Oct 1 through Sep 30 (12 months) is the expected starting and completion dates of the proposed project, unless otherwise pre-approved by OCJA.
- F. Purpose/Program Area:** Select only ONE of the areas listed by checking the appropriate box.
- G. Project Director:** Refers to the person with direct responsibility for the administration of the proposed project, enter the information requested for contact purposes.
- H. Fiscal Officer:** Enter the name of the person who will manage the fiscal matters of the proposed project if awarded. The Fiscal Officer must be someone other than the Project Director.
- I. Project Point of Contact:** This field refers to the person OCJA will contact with questions about quarterly reports, monthly financial claim forms, etc.
- J. Agency’s Human Resources Representative:** This individual is the Civil Rights Liaison with OCJA. OCJA will contact this person with questions regarding federal civil rights compliance.
- K. All Agencies- All agencies must fill out section K regarding financial competence.**
- L. Previous Funding Received from OCJA:** If OCJA previously awarded funds, indicate the year(s) of the award(s), and the amount of federal funds received.
- M. Proposed Project Budget Summary:** Please enter the data in this field only after completing the budget pages (separate Excel spreadsheet in Section III).
- N. Certification by Authorized Official;** The sheriff, police chief, division chief, agency head or other official ultimately responsible for this project/program must sign this document in **BLUE** ink.



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**Section II – Narrative** (70 points with 10 additional possible for evidenced based programs)

This Section has nine (9) fields assigned different value in points. Make sure to link all 9 sections with a common thread. *Use a 12 point font* for the Narrative Section. Field 10 “Disclosure of Current Federal Funds and IT Statement” is required but not weighted.

<i>Field Name</i>	<i>Scoring Points</i>	<i>Page Limit</i>	<i>Narrative provides:</i>
1. Abstract	10	½ (Half)	Summary of the 8 fields below. Use key words that tie together the fields with a common thread. Make sure to state the amount requested and what is being accomplished.
2. General Overview	5	2 (two)	Establish who the applicant agency is what the agency does. Detail the expected outcome of the application.
3. Problem Statement	10	2 (two)	What issue will the federal funding solve? Use statistics and reference material to support the statement(s).
4. Goals, Objectives & Timeline	15	1 ½ (one & one-half)	How, who, where and when the project (solution to problem stated above) will be accomplished. Measurable objectives are a must! Please make sure that each objective has a corresponding timeline/deadline.
5. Methods of Accomplishment	10	2 (two)	State the plan on how the agency will complete the proposed goals and objectives.
6. Project Evaluation	10	1 (one)	Who will document and evaluate the accomplishments and/or missteps.
7. Sustainment of the Project	5	1 (one)	If necessary to continue this proposed project, how will this be accomplished without federal funding; include maintenance costs, methods and timeline.
8. Statement of Coordination	5	1 (one)	List partnerships, coordination, resources that will support the applicant agency in the completion of this project. How are tasks distributed among partners?
9. Evidence Based Program	10 EXTRA	1 (one)	Explain the similarity of the proposed project with program(s) previously approved by Bureau of Justice Assistance proven crime solutions or “Evidenced Based Programs”.
10. Disclosure of current federal funds and Technology Statement	N/A	N/A	OJP requires applicant agencies to disclose information about other applications or other sources of federal funding supporting the same project. Provide confirmation that the applicant’s Technology Director reviewed the request.





**Section II- Continued**

**NARRATIVE SECTION OF THE APPLICATION**

**Title Page** – 5 points – 2 pages

**Abstract** - 10 points – ½ page limit

The function of the abstract is to describe succinctly every major aspect of the proposed project and provide reviewers an idea of the scope of the work. The abstract is a concise summary of the proposed project written after the entire narrative is complete. Pulling the most significant sentences from each key section in the grant narrative will help describe the proposed project, the broad goals, planned actions used to meet those goals, expected result, evaluation method, and how the project will change the problem. Please do not summarize past accomplishments in this section.

**GENERAL OVERVIEW** – 5 points - Limit 2 pages

**Describe what the proposed project intends to accomplish with the federal grant funds.** The purpose of this section is to:

1. establish the applicant agency
2. define the proposed project
3. describe how federal funds will be used to make the proposal a successful project

Statistical information is not necessary in this section. Leave these specifics for the Problem Statement and Goals sections. If this is a continuation program, include past and present accomplishments and future plans.

**PROBLEM STATEMENT** – 10 points - Limit 2 pages

The Problem Statement is a written presentation that describes all aspects of a problem. It includes the nature, magnitude, severity, rate of change, persons/entities affected and geographic scope. The Problem Statement clearly describes and substantiates the overall issue(s) addressed by the proposed project. It defines the problem, provides the need for federal funding in order to address the problem/s.

The Problem Statement is in a narrative form and includes, but is not necessarily limited to, the following:

- a description of the geographic areas(s) affected;
- a description of the problem and contributing factors;
- documentation of the problem (**statistical data**);
- who the problem affects and the consequences;
- under what circumstances the problem occurs;
- other current efforts to assist in alleviating the problem (existing programs or services); and
- an explanation of how the proposed project will address the problem and work towards a solution.

**IMPORTANT**





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### Section II- Continued

The Problem Statement incorporates:

- a) Recent statistics data (include sources of information) documenting the problem (i.e. arrest rates, conviction rates, probation rates, incarceration rates, number of individuals receiving treatment, etc.);
- b) Demonstrates rates of increase or decrease in the problem by showing the percentage of change for a period of time covering at least two years, more years make a better case.);
- c) Documents percentages of change with actual numbers (i.e., from 2010 to 2011 drug arrests increased 100%; 2010 - 100 arrests; 2011 - 200 arrests). Reflect the data in your objectives. Include reference sources (footnotes).

**GOALS AND OBJECTIVES** – 15 points - Limit 1 ½ pages

**Goals and Objectives clarify the purpose of the request and help identify necessary actions.**

**Project Goals:** This section contains a separate discussion for the proposed project's goals and the accompanying objectives. The goals are general statements of the desired results or anticipated outcome of the program. Goals address the problem identified in the Problem Statement section. The goals are generic, realistic, and achievable. Goals should NOT be stated in measurable terms.

- What do you want to achieve?
- Explain the goal(s) of the proposed project in simple, straightforward terms. **One or two** overall goals are sufficient.
- The goal(s) identify intended impacts or outcomes and the results the program wants to achieve.
- Each goal should have one or more **measurable objectives** describing how the agency will reach that goal.
- Be realistic.
- State the goals as a determination of achievement.
- The goals **MUST** tie into the Problem Statement and Project Evaluation.
- Administrative goals should not be your main point.
- Goals have actions.

**Project Objectives:** Each goal contains no more than four objectives. The objectives are the specific step or action taken to reach or achieve each goal. Objectives focus on the methods/activities used to address the problem; they **MUST** be clearly stated, realistic, and **measurable**. Use the statistics from the Problem Statement section to help determine measures. The Evaluation section of the application incorporates the measures from the objectives. The accomplishment of objectives result in the achievement of the goals they support. **OCJA WILL REJECT APPLICATIONS WITHOUT MEASUREABLE OBJECTIVES.**



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### **Section II- Continued**

Answer these questions for each objective:

1. *WHAT* will be done? Or, what will change?
2. *WHO* will complete the tasks? Or, who will change?
3. *WHEN* will the activity be implemented? Or, when will the change occur?
4. *HOW* will they do it and *HOW* will they measure it?
5. *INCLUDE* a timeline; this demonstrates you have thought through your program.
6. *AVOID* the words might, if, could, should, would.
7. *AVOID* the words "To provide". This is always a method to achieve the objective.

How you will achieve your goal(s):

- The activities necessary to accomplish your goals.
- The objective in terms that can be measured, qualified, quantified and evaluated.
- A timetable, where applicable, of when each objective will be met.

**Tip:** *Goals and Objectives MUST tie into the evaluation process. Both of these sections will connect with your quarterly progress reports. More than four objectives are too many. Remember, quarterly reports require the written progress of every objective.*

### **Examples of Goals and Objectives and Methods**

**Goal:** To maximize Court resources and reduce recidivism in each Court jurisdiction.

**Problem Statement:** Document the number of recidivists in each Court, and compare that number to existing and meaningful data, i.e., historical recidivism rates for that Court or, to statewide and national averages or, averages for similarly sized jurisdictions. If your jurisdiction's numbers are right-on with others (not notably higher), then you *don't have a problem* and the use of grant funds here is not advised since recidivism will always exist and yours is "as good as it gets."

The sample goal above actually contains two problems: the first is recidivism, the second is Court resources. The reader cannot make the assumption that recidivism, alone, is the reason for the court being overwhelmed.

To support the goal, find a method to measure the impact recidivists have on the court. The Problem Statement for this element should demonstrate that, of the total man-hours (account for Judges, prosecutors and support staff) per week/month/year the Court expends, certain percentage (xx%) is spent dealing with recidivists. Compare that percentage to data from other Courts as suggested above.



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**Section II- Continued**

Objective 1: Now that you've measured the number of recidivists, you can measure the impact the proposed program will have on that statistical problem. Your measurable objective should answer these five important questions:

1. Who
2. Will do what
3. When
4. How much
5. As measured by . . .

So, an objective for this program might look like this:

The number of recidivists appearing before the Court [*who*] will be reduced [*will do what*] by 8% [*how much*] in fiscal year 2010 [*when*], as measured by an ongoing analysis of Court records [*as measured by*].

In order for this objective to have merit:

- The applicant must have measured the number of recidivists historically.
- The applicant must forecast impact (a reduction of recidivism) based on real-world research of similar programs' impacts, (not to be confused with fantasy and "I think I can" assertions.)
- The applicant must track, on an ongoing basis, incidents of recidivism during the period of grant funding.

The end result is an objective in which the definition of success is agreed to in advance. Oversimplified, it reads like this: "The Court sees 1,800 cases per year of which 400 are recidivists. The proposed program will reduce this number to 300 for a total annual recidivist case load of 1,400, and we're going to prove it by counting the number of recidivists seen by the Courts next year."

It is important you distinguish between "process objectives" and "outcome objectives." We MUST have measurable "outcome objectives" to see what progress is being made in your program. Process objectives may be very useful but should only appear in the Methods section of your proposal so they are not confused with the results of your proposed.

**Example of an Outcome Objective** (acceptable in your application)

Ten Narcotic officers [who] will increase their grant writing skills [what] by 20% [how much] by the end of the 2012 fiscal year [when] as measured by pre and post program test scores [as measured by].



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### Example of a Process Objective

Ten Narcotic officers will complete a 5 week training program by the end of the 2010 academic year, measured by program attendance records.

If you can't answer all five questions, then you have a Process Objective which will cause your application to be rejected.

### METHODS OF ACCOMPLISHMENTS – 10 points - Limit 2 pages

This section **MUST** reference the goals, objectives and statistics from the Problem Statement section. This section describes the activities used to accomplish the objectives. Here are several guidelines:

- Read the Problem Statement
- How does the proposed project solve the problem or improve the situation?
- Discuss how the method of approach will improve the situation, and explain why this activity was chosen.
- Explain how federal funding will impact or solve the stated problem.
- Specify any training needs.
- Describe the means/activities implemented to reach an objective.
- Each objective must include a timeline for accomplishment.
- *Methods must tie to each goal and objective and to the Problem Statement.*



### PROJECT EVALUATION –10 points - Limit 1 page

The evaluation must tie to the objectives. If you have difficulty in determining what criteria to use in evaluating the proposed project, better take another look at the objectives presented and how these will be measured.

- How will you know the project is working?
- How will you determine if you are meeting your objectives?
- Who will perform the evaluation?

All proposed projects must include a plan for evaluation to track the accomplishment of the stated objectives. Therefore, OCJA recommends designing the evaluation to provide an unbiased and independent assessment of the effectiveness or value of the proposed project. Provide a plan to determine whether the proposed project accomplished the Goals and Objectives it was designed to meet. The Evaluation Plan presents: a) the qualifications of the evaluator and b) a description of the criteria used to evaluate the project's effectiveness.

**IMPORTANT:** The award's final report is an overall evaluation of the project. The evaluation is due 45 days after the end of the award's performance period.



OFFICE OF CRIMINAL JUSTICE ASSISTANCE  
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**Section II- Continued**

**SUSTAINMENT OF THE PROJECT - 5 points - Limit 1 page**

How will the proposed project continue operation when grant funds are no longer available? There is no guarantee grant funds will be available for the proposed project year to year. Proposed projects need to demonstrate self-sustainment as early as possible, even within one year's time when applicable. Provide a detailed summary and a time line of the plan to continue operations when these funds are either not available or significantly reduced.

Eligibility for continued funding of projects taking longer than one year to become self-sustaining is based on a) performance, b) meeting reporting requirements, and c) the availability of funds. These projects may be funded on a decreased basis for four years. The first two years, funding may be at 100% federal monies; the third year federal monies are decreased to 75%; and the fourth year federal monies are decreased to 50%. Keep this in mind when planning the proposed project's sustainment.

**STATEMENT OF COORDINATION - 5 points - Limit 1 page**

Will other agencies be involved or have an interest in the requested program? Who are they and what are their roles?

Multi-jurisdictional task forces must provide a current Memorandum of Understanding (MOU). The MOU must contain details about the disposition of equipment purchased with awarded funds if the task force is dissolved. For a State of Nevada agency, a current Inter-local Agreement must be submitted in lieu of an MOU.

Collaborative efforts of federal, state and/or local criminal justice, education, prevention, treatment and law enforcement agencies is key to the success of many programs. Describe and document efforts to coordinate, cooperate, or work with other entities to ensure the success of the project's activities. Demonstrating collaboration will reflect favorably on the submitted application.

**EVIDENCE BASED PROGRAM - 10 Extra points. Above the 100 – limit 1 page**

The Bureau of Justice Assistance (BJA) encourages states to prioritize evidence-based practices/programs (EBP) to maximize the use of federal assistance for criminal justice system enhancements. OCJA will credit a maximum of ten extra points on this year's scoring to applications demonstrating use of evidence-based practices. Scoring in future years will, most likely, increase the extra scoring points for using an EBP.

Evidence-based practices and programs are based on sound theory and deemed to be effective based on rigorous scientific evaluation.

These programs use a decision-making approach that relies on the best available evidence about what does and does not work. For more information or examples of evidence-based programs related to the criminal justice system, please log onto the Office of Justice Programs' (OJP) website: [www.crimesolutions.gov](http://www.crimesolutions.gov).



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**Section II- Continued**

A second source of information about EBP definitions and tool assessments is the National Center for Justice Planning website: [www.ncjp.org](http://www.ncjp.org).

If your agency will be following an evidence-based plan, please describe how and by which agency the program was deemed “evidence-based” along with any other information validating the title of “evidence-based”.

**DISCLOSURE OF PENDING APPLICATIONS** – No points assigned, but required.

**Disclosure of Current Federal Funds**

**Example Sample Language:**

No other funds are allocated for this project and no other applications to fund this project are pending at this time.

This agency received funding from U.S. Department of \_\_\_\_\_ in the amount of \$\_\_\_\_\_ complementing this funding request to OCJA.

This agency submitted application(s) to U.S. Department of \_\_\_\_\_ in the amount of \$\_\_\_\_\_ If received, those funds will complete this funding request to OCJA.

**Technology Statement**

If your application has no technology components then please state “Not applicable, this request does not contain funding for technology purchases or components.”

If your application has a technology component and/or purchase you must include in the application a signed statement from the Information Technology Director, approving the project.

**Example Sample Language:**

The Information Technology Director, Jane Doe, certifies with her signature that the technology requested is necessary, feasible and compatible with the agencies software and hardware systems and that the Technology Director supports the purchase and/or program.



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# BUDGET





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**Section III – Budget (15 points)**

**NOTE: Please download the Excel budget spreadsheet from the OCJA website or attachment in your e-mail. The budget form is posted separately from the application form.**

**Be sure to incorporate detailed narrative in each budget section applicable to the proposed project. Expenses must be justified, reasonable, related to and necessary for the success of the proposed project. Check the math. The total will be automatically calculated on the budget “Cover Page.”**

BUDGET COVER PAGE - All requested project costs MUST relate directly to and be necessary for the tasks described in the Methods section. The budget cover page is a simple line item budget identifying the following categories as they apply to the submitted application:

1. Personnel costs (all costs related to salary, benefits, etc.)
2. Consultant Services (costs must not exceed the current federal limitation of \$650 for an 8-hour day or \$81.25 per hour)
3. Travel costs (travel, transportation, room costs, meals, parking, etc.)  
Place costs for training registration under the category Supplies/Operating expenses, not travel.

*Note: Federal per diem rate will prevail unless local rates are less. For the current federal rates see <http://www.gsa.gov/>. Click on per diem rates.*

4. Supplies/Operating Expenses
5. Confidential Funds
6. Equipment (\$1,000 for JAG grants and \$5,000 for other grants – ask a Grant Manager)

*Miscellaneous and Other, are not considered costs. OCJA will deduct costs corresponding to these terms in any category, when not justified and detailed.*

Round off budget figures - do not use cents. (Example: \$170.57 will be \$171.00) All budgets are subject to OCJA modifications and approval. Fill out ALL pages completely. Estimate ALL costs to the nearest dollar.

**DOUBLE CHECK THE MATH CALCULATIONS AND ENSURE THE NUMBERS MATCH THE TITLE PAGE. DO NOT RELY ON THE COMPUTER TO ADD FOR YOU. Reviewers are VERY strict about math when evaluating applications!**

The budget form contains space for the budget justification. This justification encompasses the method of calculation. The Excel budget form detail specific instructions for completing each section of the budget. If you have questions or concerns related to the completion of the Excel budget section, please call (775) 687-1500 or an OCJA Grant Manager for assistance.





OFFICE OF CRIMINAL JUSTICE ASSISTANCE  
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**Section III- Continued**

When reviewing the budget, ask “Is this budget reasonable? Are these items necessary to the success of the program?” If you previously had an OCJA award for the same requested project, look at the budget for the last 2 years versus this requested budget. Are you duplicating purchases and/or services from previous years?

**Address each Budget Section separately as follows:**

**PERSONNEL COSTS**

This category refers to wages and fringe benefits for regular or part-time salaried employees related to the proposal. Other persons working on the proposed project, who are not on the regular payroll, must be classified either as contractual or consultant. This category also includes overtime for approved activities related to the proposed project.

AVOID SUPPLANTING - Do not request federal funding for an employee already on the payroll unless he/she will be replaced by another person hired to augment regular agency staff during the time the existing employee spends working on project activities. A regular employee, however, may be paid overtime for time worked on the project. Salaries may not exceed those normally paid for comparable positions in the community and/or the unit of government associated with the project.

**Instructions - Completing Budget Forms**

- 1. Direct Salaries and Overtime** - Write in the title or position of each new employee or each existing employee who will earn overtime for grant-related activities. Across from each position/job title listed, place the annual salary or the overtime wage (dollar/hour) for the position, the percent of time expected to be devoted to the project (for a new employee) or number of overtime hours and the total cost for the position.
- 2. Fringe Benefits & Payroll Taxes** – List all fringe benefits and payroll taxes on the corresponding Excel budget section. Include fringe in the total personnel costs.
- 3. Total Personnel** – Complete the total requested.
- 4. Personnel Budget Narrative** - A brief statement explaining the cost basis for each position, is required. Explain how each position is related to, and essential for the completion of the proposed project. Explain why federal funds should pay for the personnel requested. Are they essential to the success of the project?

**For sub-recipients that have received funding for personnel costs in past years, please note for any increase in personnel funding, you must contact your Grants Manager.**



## OFFICE OF CRIMINAL JUSTICE ASSISTANCE GRANT APPLICATION 2019

### Section III- Continued

#### CONSULTANT/CONTRACTUAL SERVICES

1. **Individuals** - Complete Section 1 for individuals not on the regular payroll who will be reimbursed for professional services.
  - a. **Consultant Fees** - For each individual consultant, enter the name, service to be provided, hourly fee and estimated time on the project in hours. Fees must not exceed federal guidelines (\$650 per 8 day or \$81.25/hour).
  - b. **Consultant Expenses** - List the rates used to calculate travel, meals and other expenses. Remember, travel costs cannot exceed the federal GSA rate.
  - c. **Total Consultant Costs** – Complete the total requested.
2. **Consultants and Contractors Budget Narrative** - explain the basis or criteria for selection of each consultant. Describe how the service provided is essential to the project. In the budget narrative section, detail the costs and how it is a necessity to the proposed project.

**Note:** All procurement transactions, whether negotiated or competitively bid, and without regard to dollar value, require administration in a manner that allows maximum open and free competition. *Sole source contracts/consultant services must be approved by the Office of Criminal Justice Assistance.*

#### TRAVEL COSTS

*Note: See <http://gsa.gov> for current federal travel rates. Note: No more than three (3) persons may travel to any one conference or training. Travel for additional staff requires prior approval from OCJA.*

1. **In-State Travel** - List each anticipated in-state trip outside the local jurisdiction stating the purpose of the trip, destination, number of individuals traveling, airfare, hotel, per diem, mileage, days in travel status and total cost.
2. **Out-of-State Travel** - List each anticipated out-of-state trip stating the purpose of the trip (e.g. training, interview, operations, etc.), destination, number of individuals traveling, airfare, hotel, per diem, mileage, days in travel status and total cost.
3. **Total Travel Budget** - Complete total requested.
4. **Travel Budget Narrative** – Complete a narrative explaining the purpose of the travel and its connection to the project.
5. **Registration Costs** – please list under the category Supplies/Operating. OCJA will pay for registration fees related to training events on a reimbursement basis. That is after the responsible agency provides proof of attendance and payment.

Break out the costs of each in-state and out-of-state trip separately to show the specific costs of transportation, food, lodging, and other expenses. Remember, costs may not exceed the federal rates. Indicate how/why the in-state and/or out-of-state trips are essential to the success of the project.

Travel begins from the time a person leaves their home/work station (not the time your flight leaves/arrives) and ends upon arrival at home/work station.

Travel not approved in the budget requires justification and pre-approval by the OCJA Grant Manager.



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**Section III- Continued**

**SUPPLIES /OPERATING EXPENSES**

**1. Supplies/Operating** - This section includes office supplies, forms, project supplies, supplies for repairs or maintenance, and equipment items costing under \$1,000; essentially, expendable or consumable materials for use during the duration of the requested project.

List items here such as postage, forms, office supplies, training materials, etc. Enter the quantity, unit cost, and total cost. Explain the methodology for determining the quantity requested.

This section also includes all operating expenses involving rental/lease arrangements and purchase of non-consultant type services.

For each item listed, enter the rate and/or unit cost.

**2. Supplies and Operating Expenses Budget Narrative** - A required narrative describing the basis for arriving at the cost of items listed. If you rent or lease equipment or facilities, explain in the narrative. Include the rate for each rental in the budget. For maintenance agreements, detail each item covered under the contract. **OCJA will deduct items without a narrative.**

Example 1: \$ 200/year for computer maintenance agreement for x number of computers. Example 2: \$1,008/year for basic office supplies = 2 employees @ \$42/each per month.

**EQUIPMENT**

List only those items that are to be purchased with grant funds. **Do not include expendable items costing less than \$ 1,000 per unit.** (\$1,000 for JAG grants and \$5,000 for other grants) Do not include rental or lease equipment. Do not list brand name, use the generic description of the requested item.

NOTE: OCJA requests equipment purchases through the 1122 Program. This process is outlined in detail in the "Special Conditions" form attached to the award package provided when funding is approved. Additional information can be found in the OCJA Administrative Manual.

After each item listed enter the quantity, unit costs and total cost.

- 1. Total Equipment Costs** - Enter the total cost of equipment for the proposed project.
- 2. Equipment Budget Narrative** - A narrative describing how the equipment will benefit the proposed project, why it is necessary to the success of the project and the consequences of not purchasing the equipment.

Tip: After preparing the program narrative portion of the Application, consider listing the major activities/tasks required by the project. Note the individual expenses, including personnel time, related to each item. This will help ensure that costs related to each and all activities/tasks described in the Application appear in the budget and are explained correctly in the budget narrative.



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**Section III- Continued**

**CONFIDENTIAL FUNDS**

Expenditure of funding allocated for confidential informant (CI) funds require close adherence to federal regulations. Federal regulations require the agency awarded the funds to sign and keep on file a “Special Conditions” form. The form is provided by OCJA in the award package.

- Confidential funds allocated when 1) the merit of a program/investigation warrants the expenditure of these funds, and 2) funding is unavailable from other sources. The expenditure of confidential funds is subject to prior approval.
- Approval for confidential fund expenditures must be reasonable and a necessary element of the proposed project operations.
- The sub-recipient must ensure:
  - ✓ The implementation of written procedures for reconciliation and tracking of CI funds.
  - ✓ That controls over disbursement of confidential funds are adequate to safeguard against the misuse of such funds.

OCJA will confirm the above requirements are met by auditing the sub-recipient annually. For additional information please refer to the Administrative Manual, Section III, Chapter 9, Special Funds.

**NEGOTIATION OF FINAL TERMS:**

For approved applications which are based upon the recommendations of the Review Committee, OCJA personnel and the applicant negotiate conditions of the proposed project and/or its budget.



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# Certified Assurances



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**Section IV – Certifications and Assurances (10 points)**

These pages contain the required federal and state assurances and certifications necessary for applicants to qualify for federal funding. These are legal and binding documents. Read these pages carefully.

**If needed, your agency can download the documents from [www.ocj.nv.gov](http://www.ocj.nv.gov), under FORMS.**

Federal regulations require a) original signatures in **BLUE** ink, and b) signature of the individual meeting the criteria of authorized official. Attach, as an appendix to the application, any documentation for temporary authority (i.e. Acting or temporary assigned personnel). Date is the day, month, and year when the authorized official signed the document.

Please complete these mandated forms with the appropriate signature, attach, and submit with the application form. OCJA considers applications INVALID when received without the signed certification documents.

1. STANDARD CERTIFIED ASSURANCES - Signed by the Governmental Unit (i.e., Mayor, County Commissioner, or City Supervisor) **and** the Applicant Agency (i.e., Police Chief, Sheriff, District Attorney, State Agency Director) for this Application to be valid. When securing both signatures proves difficult, please incorporate a written statement, as an appendix, in the application certifying the submission of the fully executed document by the requesting agency, on a mutually agreed date, prior to the beginning of the performance period for the award. Failure to submit the fully executed form by the agreed deadline will result in the prorating or cancellation of the award.
2. CERTIFICATIONS REGARDING LOBBYING; DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS; AND DRUG-FREE WORKPLACE REQUIREMENT
3. EQUAL EMPLOYMENT OPPORTUNITY PLAN FORM
4. CIVIL RIGHTS REQUIREMENTS
5. WAIVER OF PASS THROUGH (for non-profit, if applicable)



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# APPLICATION CHECKLIST

The Application Checklist is considered part of the application. Please submit the completed Checklist with the application. OCJA staff reviews the checklist to confirm all significant documents are included with your application form. Federal mandates require the submission of the **original** paper application, budget, certifications, and if applicable, appendices to OCJA by the due date.



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**CHECKLIST**

The following documentation package constitutes the OCJA application. Please submit the entire package by the deadline indicated in the instructions.

- Checklist
- Title Page - (Please sign in blue ink for signatures)
- SAM Registration
- Abstract
- General Overview
- Problem Statement
- Goals and Objectives (Must be measurable)
- Methods of Accomplishment       Timeline
- Project Evaluation/Internal Assessment
- Sustainment of the Project – including time line
- Statement of Coordination
- Evidence Based Program (extra 10 points)
- Inter-Agency Agreement or Memorandum of Understanding for current year, if applicable
- Disclosure of other federal funding sources and, when applicable, technology statement
- Budget Form **with** itemization and narratives
- Waiver of Pass Through (for non-profits, if applicable)
- Appendices – when applicable

The following assurances must be signed by the authorized official/s and considered part of this application. Please use blue ink for signatures. These forms are posted on OCJA’s website [www.ocj.nv.gov](http://www.ocj.nv.gov), under– Applications; – Assurances Forms.

- Standard Certifications, Lobbying and Debarment and Drug-Free Workplace, etc.
- Standard Assurances
- Equal Employment Opportunity Plan Form –EEOP
- Civil Rights Requirements

- 
- Submit application to OCJA

*Please submit this checklist with your application.*





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***BE SURE TO MEET THE APPLICATION DUE DATE***

All necessary forms (application, budget and assurances) and resources are available at:  
[www.ocj.nv.gov](http://www.ocj.nv.gov)

***Mail or Hand-deliver the original paper application and three hard copies to:***

***DEPARTMENT OF PUBLIC SAFETY***

***OFFICE OF CRIMINAL JUSTICE ASSISTANCE***

***1535 OLD HOT SPRINGS ROAD #10***

***CARSON CITY, NV 89706***

***AND***

***Submit an electronic version (Word/Excel) to [ocja@dps.state.nv.us](mailto:ocja@dps.state.nv.us)***

***by 5:00 p.m. on May 10, 2019***

***[www.ocj.nv.gov](http://www.ocj.nv.gov) - website address***

***Please contact our office if you have any questions.***

***Main Telephone Number (775) 687-1500***

***GOOD LUCK!***



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# APPLICATION



OFFICE OF CRIMINAL JUSTICE ASSISTANCE  
GRANT APPLICATION 2019

*Application*

Section I

**A. Application for (Check only one, double click on checkboxes to check):**

- Justice Assistance Grant (JAG)     Residential Substance Abuse Treatment (RSAT)
- Paul Coverdale Forensic Science Improvement (FSI)
- Other (Name) \_\_\_\_\_

**B. Applicant Agency**

Name:		
Mailing Address		
Physical Address		
City		NV
Zip (9 digit zip required)		
Federal Tax ID #:	(xx-xxxxxxx)	
DUNS Number:	(9 digits)	
Has your agency registered with the System for Award Management (SAM) previously known as CCR data base? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>ATTACH A COPY OF YOUR AGENCY'S SAM REGISTRATION AFTER SECTION I</b>		

**C. Direct Award from US Department of Justice (DOJ)**

<p>Did the applicant agency receive a direct DOJ award last year?</p> <p><input type="checkbox"/> Not Applicable or <input type="checkbox"/> No (<i>continue to the next field</i>)</p> <p><input type="checkbox"/> Yes, what was the amount awarded? \$ _____</p> <p>Did the application agency receive a Federal award in FFY 2017 for the same project or same type of project?</p> <p><input type="checkbox"/> Not Applicable</p> <p><input type="checkbox"/> Yes, what was the amount awarded? \$ _____ and what is the name of the award received _____</p>
---

**D. Project Title**

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**E. Project Period (period of performance)**

From: (mm/dd/yyyy)	To: (mm/dd/yyyy)
--------------------	------------------



**OFFICE OF CRIMINAL JUSTICE ASSISTANCE  
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***Application***

**F. Purpose/Program Area:** (choose one by checking the corresponding box)

1.  Law enforcement programs.
2.  Prosecution, defense and court programs. (Not drug courts – see # 5)
3.  Prevention and education programs.
4.  Corrections and community corrections programs.
5.  Drug treatment and drug courts programs.
6.  Planning, evaluation, and technology improvement programs.
7.  Crime victim and witness programs.

**G. Project Director**

Name:		
Title		
Phone		
Email		
Address		
City		NV
Zip (9 digit zip required)		

**H. Fiscal Officer:**

Name:		
Title		
Phone		
Email		
Address		
City		NV
Zip (9 digit zip required)		



**OFFICE OF CRIMINAL JUSTICE ASSISTANCE  
GRANT APPLICATION 2019**

***Application***

**I. Project Point of Contact:**

Name:		
Title		
Phone		
Email		
Address		
City		NV
Zip (9 digit zip required)		

**J. Agency's Human Resource Representative**

Name:		
Title		
Phone		
Email		
Address		
City		NV
Zip (9 digit zip required)		

**K. All Agencies**

Please provide information on the agencies' financial stability and capabilities, see below.

What type of accounting system is used?	
Are revenues and expenditures tracked separately? And how?	
What other funding is received? (i.e., government general funds, grant funds, donations, etc.)	
Are there procedures in place to separate duties and approvals?	
Are funds comingled?	
Is staff familiar with the OMB Circular and Federal grant requirements?	



**OFFICE OF CRIMINAL JUSTICE ASSISTANCE  
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***Application***

**L. Previous Funding Received from OCJA:**

Year EXAMPLE: (2016)	Award Number (16-JAG-01)	Federal Amount Awarded (\$) (250,000)

**M. Proposed Project Budget Summary:**

Category	Federal Amount Requested (\$)
Personnel	
Consultant/Contract	
Travel	
Supplies/Operating	
Equipment	
Confidential Funds	
Total Federal Funding Requested (\$)	

**N. Certification by Authorized Official**

As the authorized official for the applying agency, I certify that the proposed project described in this application meets all requirements of the legislation governing the grant as indicated by the attached Certifications found in Section IV; that all the information contained in the application is correct; that the appropriate coordination with affected agencies took place; that this agency agrees to comply with all provisions of the applicable grant program, including the reporting requirements. I understand and agree that any award received as a result of this application is subject to the conditions set forth in the Statement of Grant Award, and the current applicable OCJA Administrative Manual.

To eliminate the possibility of supplanting, my signature also confirms the items requested within this application are not included in the agency's current budget.

Authorized Officials	
Name (type/print): _____	Phone: _____
Title: _____	eMail: _____
Signature: _____	Date: _____



## Section II

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Begin typing below each field header.

1. ABSTRACT (How much is the request and what are the deliverables): (½ page limit, 10 points).



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*Application – Section II, Narrative*

2. GENERAL OVERVIEW (2 page limit, 5 points).





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*Application – Section II, Narrative*

3. PROBLEM STATEMENT (2 page limit, 10 points).



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*Application – Section II, Narrative*

4. GOALS AND OBJECTIVES (1 ½ page limit, 15 points).

Tips: Please make sure to write goals that are measureable, make sure to state what it is you want to achieve, explain the goals in simple terms, **one or two overall goals are sufficient**, your goals should have one or more measureable objectives describing how the agency will reach the goals, be realistic, the goals and objectives MUST tie into the Problem Statement and outcome evaluation, goals have actions and deadlines, make sure your timeline is realistic and that you have due dates that are obtainable.

GOALS # 1 – Please insert your goal.

- e. Objective # 1- Please insert your objective and make sure to include a timeline.
- f. Objective # 2- Please insert your objective and make sure to include a timeline.
- g. Objective # 3- Please insert your objective and make sure to include a timeline.

GOALS # 2 – Please insert your goal.

- a. Objective # 1- Please insert your objective and make sure to include a timeline.
- b. Objective # 2- Please insert your objective and make sure to include a timeline.
- c. Objective # 3- Please insert your objective and make sure to include a timeline.

GOALS # 3 – Please insert your goal.

- a. Objective # 1- Please insert your objective and make sure to include a timeline.
- b. Objective # 2- Please insert your objective and make sure to include a timeline.
- c. Objective # 3- Please insert your objective and make sure to include a timeline.



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*Application – Section II, Narrative*

5. METHODS OF ACCOMPLISHMENT (2 page limit, 10 points).



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6. PROJECT EVALUATION (1 page limit, 10 points).



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7. SUSTAINMENT OF THE PROJECT (1 page limit, 5 points).



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*Application – Section II, Narrative*

8. STATEMENT OF COORDINATION (and, if applicable, interagency Agreement or Memorandum of Understanding for current year) (1 page limit, 5 points).



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*Application – Section II, Narrative*

9. EVIDENCE BASED PROGRAM (If applicable) (1 page limit, 10 extra points).



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*Application – Section II, Narrative*

10. DISCLOSURE OF CURRENT FEDERAL FUNDS AND TECHNOLOGY  
STATEMENT (if applicable, ½ page)

**Disclosure of Current Federal Funds**

**Example Sample Language:**

No other funds are allocated for this project and no other applications to fund this project are pending at this time.

This agency received funding from U.S. Department of \_\_\_\_\_ in the amount of \$ \_\_\_\_\_ complementing this funding request to OCJA.

This agency submitted application(s) to U.S. Department of \_\_\_\_\_ in the amount of \$ \_\_\_\_\_ If received, those funds will complete this funding request to OCJA.

**Technology Statement**

If your application has no technology components, then please state “Not applicable, this request does not contain funding for technology purchases or components.”

If your application has a technology component and/or purchase you must include in the application a signed statement from the Information Technology Director, approving the project.

**Example Sample Language:**

The Information Technology Director, Jane Doe, certifies with her signature that the technology requested is necessary, feasible and compatible with the agencies software and hardware systems and that the Technology Director supports the purchase and/or program.





OFFICE OF CRIMINAL JUSTICE ASSISTANCE  
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*Application – Section III, Budget – Separate Excel File*

## Section III

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# Budget Separate Excel File



OFFICE OF CRIMINAL JUSTICE ASSISTANCE  
GRANT APPLICATION 2019

*Application – Section IV Assurances and Certifications*

Section IV

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# Application And Certified Assurances

GOVERNING LEGISLATION/POLICIES FOR THIS GRANT PROGRAM:

The United States Department of Justice, Bureau of Justice and the  
Nevada State Department of Public Safety (DPS), Office of Criminal Justice Assistance (OCJA)



OFFICE OF CRIMINAL JUSTICE ASSISTANCE  
GRANT APPLICATION 2019

*Application – Section IV Assurances and Certifications*

OVERVIEW of CERTIFICATIONS and ASSURANCES

By signing the Title Section of the OCJA grant application, the applicant certifies:

1. The project described in this application meets all the requirements of the applicable governing legislation as indicated below;
2. All information contained in the application is correct;
3. The appropriate coordination with affected agencies took place; and
4. The applicant will read, understand and comply with all provisions of the governing legislation and all other applicable federal and state laws, current or future rules and regulations.
5. The applicant further understands and agrees that any subaward received as a result of this application is subject to the grant conditions set forth in the Statement of Grant Award, and in the current applicable OCJA Administrative Manual.

STANDARD PROVISIONS

1. ADMINISTRATOR'S APPROVAL: This subaward is invalid until approved by the Administrator of the Office of Criminal Justice Assistance or his/her designee.
2. AVAILABILITY OF FUNDS: Financial obligations of the State are contingent upon federal appropriations allotted to the state administering agency which are appropriately budgeted and otherwise made available.
3. FEDERAL FUNDING: This subaward is subject to and contingent upon the continuing availability of federal funds.

GRANT REQUIREMENTS

1. FINANCIAL & ADMINISTRATIVE MANAGEMENT:
  - a. The Sub-recipient guarantees it will maintain adequate accounting principles such as fund accounting, auditing, monitoring, evaluation procedures and the records necessary to ensure sufficient internal fiscal controls, proper financial management, and efficient disbursement of funds received, and maintenance of required source documentation for all costs incurred. These principles must be applied for all costs incurred, whether charged on a direct or indirect basis.
  - b. All expenditures must be supported by appropriate source documentation. OCJA will reimburse only actual, approved, and allowable expenditures.
  - c. The Sub-recipient assures that it will comply with the provisions of the current applicable OCJA Project Director's Manual. However, such a guide cannot cover every foreseeable contingency; the Sub-recipient is ultimately responsible for compliance with applicable state and federal laws, rules and regulations.
2. PAYMENT & REPORTING
  - a. OCJA will reimburse the Sub-recipient the reasonable and allowable costs of performance, in accordance with current OCJA Office Policies and Nevada State Fiscal Rules, not to exceed the amount specified as the Total Award Amount.
  - b. The Sub-recipient assures that it shall maintain data and information to provide accurate quarterly program and monthly financial reports to OCJA. Said reports shall be provided in such form, at such times, and containing such data and information as OCJA reasonably requires for proper administration of the program.



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- c. The Sub-recipient assures the submission of current monthly financial reports; and quarterly performance measure and progress reports within 20 calendar days of the end of each calendar quarter.
- d. The Sub-recipient further assures that final financial and narrative reports shall be submitted on the forms provided by OCJA within 45 days of the performance period end date.
- e. OCJA reserves the right to make and authorize modifications, adjustments, and/or revisions to the Grant Award for the purpose of making changes in budget categories, extensions of grant award dates, changes in goals and objectives.
- f. OCJA will withhold payment in the event the Sub-recipient fails to comply with conditions and certifications contained in this grant award.

FEDERAL CERTIFIED ASSURANCES

1. FEDERAL PUBLIC POLICY ASSURANCES.

- a. The Sub-recipient hereby agrees that it, and all of its contractors, will comply with the applicable provisions of:
  - i. Title I of the Omnibus Crime Control and Safe Streets Act of 1968, as amended;
  - ii. The Juvenile Justice and Delinquency Prevention Act and/or the Victims of Crime Act, as appropriate;
  - iii. All other applicable Federal laws, orders, circulars, regulations or guidelines.
- b. The Sub-recipient agency hereby agrees that it will comply, and all of its contractors will comply with the provisions of 28 CFR applicable to grants and cooperative agreements including:
  - i. Part 18, Administrative Review Procedure;
  - ii. Part 22, Confidentiality of Identifiable Research and Statistical Information;
  - iii. Part 23, Criminal Intelligence Systems Operating Policies;
  - iv. Part 30, Intergovernmental Review of Department of Justice Programs and Activities;
  - v. Part 35, Nondiscrimination on the Basis of Disability in State and Local Government Services;
  - vi. Part, 38, Equal Treatment for Faith Based Organizations;
  - vii. Part 42 Nondiscrimination/Equal Employment Opportunity Policies and Procedure;
  - viii. Part 61 Procedures of Implementing the National Environmental Policy Act;
  - ix. Part 63 Floodplain Management and Wetland Protection Procedures; and,
  - x. Federal Laws or regulations applicable to Federal Assistance Programs.
- c. Sub-recipient agrees to comply with the requirements of 28 CFR Part 46 and all Office of Justice Programs policies and procedures regarding the protection of human research subjects, including obtainment of Institutional Review Board approval, if appropriate, and subject informed consent.
- d. Sub-recipient agrees to comply with all confidentiality requirements of 42 U. S. C. section 3789g and C. F. R. Part 22 that are applicable to collection, use, and revelation of data or information. Sub-recipient further agrees, as a condition of grant approval, to submit a Privacy Certificate that is in accord with requirements of 28 CFR Part 22 and, in particular, section 22.23.

2. FINANCIAL & ADMINISTRATIVE MANAGEMENT

- a. Sub-recipient assures that it will comply with appropriate federal cost principles and administrative requirements applicable to grants as follows:
  - i. For state, local or Indian tribal government entities;
    - 1. 2 CFR Part 200 Subparts A through F and all appendices.
  - ii. For non-profit organizations;
    - 1. 2 CFR Part 200 Subparts A through F and all appendices.
  - iii. For colleges and universities;
    - 1. 2 CFR Part 200 Subparts A through F and all appendices.



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- iv. For each agency spending more than \$500,000 per year in federal funds from all sources;
    - 1. 2 CFR Part 200 Subparts A through F and all appendices
  - b. Special Provisions and Certified Assurances
3. NON-SUPPLANTING OF FUNDS
- a. The Sub-recipient certifies that any required matching funds used to pay the non-federal portion of the cost of this subaward are in addition to funds that would have otherwise been made available for the purposes of this project.
  - b. The Sub-recipient certifies that federal funds made available under this grant:
    - i. Will not be used to supplant state or local funds;
    - ii. Where there is a reduced or unchanged local investment, then the Sub-recipient shall give a written explanation demonstrating that the Sub-recipient's reduced or unchanged commitment was necessary even without the availability of the federal financial support under this federal grant program.
4. WHO SIGNS THE ASSURANCES and CERTIFICATION FORMS SUBMITTED WITH APPLICATION?
- a) STANDARD ASSURANCES –Must be signed by BOTH the Governmental Unit (i.e., Mayor, County Commissioner, City Supervisor etc.) AND the Applicant Agency (i.e., Police Chief, Sheriff, District Attorney, State Agency Director)
  - b) CERTIFICATIONS REGARDING LOBBYING; DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS AND DRUG-FREE WORKPLACE REQUIREMENTS – Applicant agency's authorized representative
  - c) EQUAL EMPLOYMENT OPPORTUNITY PLAN (EEO) - Applicant agency's authorized representative
  - d) CIVIL RIGHTS REQUIREMENTS - Applicant agency's authorized representative

For more information, visit the Office of Justice Programs, Office for Civil Rights website at:  
<http://www.ojp.usdoj.gov/about/offices/ocr.htm>.



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**Civil Rights Requirements**

The following civil rights requirements apply to all units of local governments, state agencies, for profit and non-profit organizations accepting federal grant funds. Compliance requirements apply to the entire jurisdiction/organization, and not just to the funded activities. In an effort to assist with compliance, OCJA provides a list of the requirements along with their individual references below.

1. Training programs on civil rights compliance.  
<http://www.ojp.usdoj.gov/about/ocr/assistance.htm>.
2. Victims of Crime Act  
<http://www.da.state.nm.us/Victims%20of%20Crime%20Act.pdf>
3. Title VI of the Civil Rights Act of 1964  
<https://www.epa.gov/ocr/facts-title-vi-civil-rights-act-1964>
4. Section 503 of the Rehabilitation Act of 1973  
<https://www.dol.gov/ofccp/regs/compliance/section503.htm>
5. Title II of the Americans with Disabilities Act of 1990
  - a. The Americans with Disabilities Act – [www.ada.gov/pubs/ada.htm](http://www.ada.gov/pubs/ada.htm)
  - b. Title II Highlights – [www.ada.gov/t2hlt95.htm](http://www.ada.gov/t2hlt95.htm)
  - c. Title II Technical Assistance Manual – [www.ada.gov/taman2.html](http://www.ada.gov/taman2.html)
  - d. Commonly Asked Questions ADA and Law Enforcement – [www.ada.gov/q&a\\_law.htm](http://www.ada.gov/q&a_law.htm)
  - e. Commonly Asked Questions ADA and Hiring Police Officers - [www.ada.gov/copsq7a.htm](http://www.ada.gov/copsq7a.htm)
  - f. Self Evaluation and Transition Plan Worksheets –  
<http://adaptenv.org/index.php?option=Resource&articleid=185&topicid=25>
6. Title IX of the Education Amendments of 1972  
<https://www.dol.gov/oasam/regs/statutes/titleix.htm>
7. Age Discrimination Act of 1975  
[https://www.dol.gov/oasam/regs/statutes/age\\_act.htm](https://www.dol.gov/oasam/regs/statutes/age_act.htm)
8. USDOJ Non-Discrimination Regulations (28 CFR 42, Subparts C, D, E and G)  
[http://www.access.gpo.gov/nara/cfr/waisidx\\_00/28cfr42\\_00.html](http://www.access.gpo.gov/nara/cfr/waisidx_00/28cfr42_00.html)
9. USDO Regulations on Disability Discrimination (28 CFR Part 35)  
[http://www.access.gpo.gov/nara/cfr/waisidx\\_00/28cfr35\\_00.html](http://www.access.gpo.gov/nara/cfr/waisidx_00/28cfr35_00.html)

By signing below, the authorized representative assures and certifies the applicant organization will implement federal, state, and any local equal opportunity and non-discrimination statutes. The applicant will, without delay, bring any finding of an equal opportunity or non-discrimination violation to the attention of the USDOJ's Office of Civil Rights, <http://www.ojp.usdoj.gov/about/offices/ocr.htm>, and the Nevada Office of Criminal Justice Assistance, <http://ocj.nv.gov>.

Signature of Authorized Representative - acknowledgement of Civil Rights Requirements:

\_\_\_\_\_  
Name (print/type)

\_\_\_\_\_  
Title:

\_\_\_\_\_  
Signature:

\_\_\_\_\_  
Date:



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**Certification of Compliance with Equal Employment Opportunity Plan**

The purpose of an Equal Employment Opportunity Plan (EEOP) is to insure full and equal participation of men and women in the workforce regardless of race or national origin. Federal regulations require recipients of financial assistance of the Office of Justice Programs (OJP) to prepare, maintain on file, submit for review, and implement an EEOP in accordance with 28CFR 42.301-308. The regulations exempt some recipients from all of the EEOP requirements. Other recipients, must prepare, maintain on file and implement an EEOP, but they do not need to submit the EEOP for review. Recipients must certify that they comply with, or are not covered by EEOP regulations. It is the responsibility of the Nevada Office of Criminal Justice Assistance to monitor compliance of these requirements by the recipients.

Recipients must prepare, implement, and maintain an EEOP related to employment practices affecting minority persons and women if all of the following are true;

1. Have 50 or more employees; **and**
2. Received \$25,000 or more in Federal grant funds, **and**
3. Have a service population with a minority representation of 3 percent or more (if less than 3 percent minority representation in service population, an EEOP must still be prepared, but related to employment practices affecting women only).

If a recipient meets criteria 1 and 3 and received a single award of \$500,000 (or \$1 million within an 18-month period) an EEOP must be filed with the Office for Civil Rights, Office of Justice Programs for review.

*Please check only the **one** box that applies to the appropriate certification for the receiving agency over the performance period of this specific award (CERTIFICATION A, B, C1, or C2).*

**CERTIFICATION A: NO EEOP IS REQUIRED** if (1), (2) or (3) below apply. Check (1), (2) and/or (3) as applicable to your entity. More than one may apply.

This funded entity has not been awarded more than \$1 million cumulatively from *all* programs administered by the U.S. Department of Justice, including this grant from the Office of Criminal Justice Assistance, over the period of time that includes the above program period and

- (1) is an education, medical or non-profit organization institution or an Indian tribe; and/or
- (2) has less than 50 employees; and/or
- (3) was awarded less than \$25,000 in Federal U.S. Department of Justice funds through the grant referenced above

Therefore, I hereby certify that this funded entity is not required to maintain an EEOP, pursuant to 28 CFR 42.301, et seq.

**CERTIFICATION B: EEOP MUST BE ON FILE**

This funded entity, a for-profit entity or a state or local government having 50 or more employees, was awarded more than \$25,000, but less than \$500,000 in federal U.S. Department of Justice funds through the grant referenced above. Also, it has not been awarded more than \$1 million cumulatively from all programs administered by the U.S. Department of Justice, including the grant referenced above, over a period of time that includes the above program period.

Therefore, I hereby certify that the funded entity has formulated an Equal Employment Opportunity Plan in accordance with 28 CFR 42.301 et seq., Subpart E, that it has been signed into effect by the proper authority and disseminated to all employees, and that it is on file for review or audit by officials of the Office of Criminal Justice Assistance or the Office for Civil Rights, Office of Justice Programs as required by relevant laws and regulations.





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**CERTIFICATION C1: EEOP MUST BE SUBMITTED**

This funded entity, a for-profit entity or state or local government having 50 or more employees, was awarded more than \$500,000 in Federal U.S. Department of Justice funds through the grant referenced above, but it has not been awarded more than \$1 million cumulatively from *all* programs administered by the U.S. Department of Justice, including this grant from the Nevada Office of Criminal Justice Assistance over a period of time that includes the above program period.

Therefore, I hereby certify that the funded entity will submit, within 60 days of receipt of award, an EEOP or an EEOP Short Form that will include a section specifically analyzing the grantee agency

**CERTIFICATION C2: EEOP MUST BE SUBMITTED**

This funded entity, having 50 or more employees, was awarded more than \$1 million cumulatively from *all* programs administered by the U.S. Department of Justice, including this grant from the Nevada Office of Criminal Justice Assistance, over the period that includes the above grant duration period.

Therefore, I hereby certify that the funded entity will submit within 60 days of receipt of award, an EEOP or an EEOP Short Form that will include a section specifically analyzing the grantee agency. If you have already submitted an EEOP applicable to this time period, send a copy of the letter received from the Office for Civil Rights showing that your EEOP is acceptable.

**AUTHORIZED OFFICIAL’S CERTIFICATION:**

As the Authorized Official for the above grantee, I certify by my signature below that:

- I have read and am fully cognizant of our duties and responsibilities under this Certification.
- This agency will maintain and submit, when required, data to ensure our services are delivered in an equitable manner to all segments of the service population and our employment practices comply with Equal Opportunity requirements 28CFR 42.207 and 42.301 et seq.
- That the person in this entity who is responsible for reporting civil rights findings of discrimination will submit a finding to the Office of Criminal Justice Assistance within 45 days of the finding, and/or if the finding occurred prior to the beginning date of the grant award, within 60 days of receipt of award. A copy of this Certification will be provided to the person responsible for reporting civil rights findings of discrimination.

Signature of Authorized Official – acknowledgement of Equal Employment Opportunity Plan

\_\_\_\_\_  
Name (print/type)

\_\_\_\_\_  
Title:

\_\_\_\_\_  
Signature:

\_\_\_\_\_  
Date:

For more information regarding EEOP requirements, please access the Office for Justice Programs, Office for Civil Rights web page at: <https://ojp.gov/about/offices/ocr.htm>





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STANDARD ASSURANCES

The Applicant hereby assures and certifies compliance with all applicable federal statutes, regulations, policies, guidelines, and requirements, including 2 CFR 200, Executive Order 12372 (intergovernmental review of federal programs); and 28 CFR parts 66 to 70 (administrative requirements for grants and cooperative agreements). The applicant also specifically assures and certifies that:

1. It has the legal authority to apply for federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay any required non-federal share of project cost) to ensure proper planning, management, and completion of the project described in this application.
2. It will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
3. It will give the awarding agency or the General Accounting Office, through any authorized representative, access to and the right to examine all paper or electronic records related to the financial assistance.
4. It will comply with all lawful requirements imposed by the awarding agency, specifically including any applicable regulations such as 28 CFR parts 18,22,23,30,35,38,42,61, and 63, and the award term in 2CFR 175.15(b).
5. It will assist the awarding agency (if necessary) in assuring compliance with section 106 of the National Historic Preservation Act of 1966 (16 U.S.C. § 470), Executive Order 11593 (identification and protection of historic properties), the Archeological and Historical Preservation act of 1974 (16 U.S.C. §469 a-1 et seq.) and the National Environmental Policy Act of 1969 (42 U.S.C. § 4321).
6. It will comply (and will require any subgrantees or contractors to comply) with any applicable statutorily-imposed nondiscrimination requirements, which may include the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. § 3789d); the Victims of Crime Act (42 U.S.C. § 10604(e)); the Juvenile Justice and Delinquency Prevention act of 2002 (42 U.S.C. § 5672(b)); the Civil Rights Act of 1964 (42 U.S.C. § 2000d); the Rehabilitation Act of 1973 (29 U.S.C. § 794); The Americans with Disabilities Act of 1990 (42 U.S.C. § 12131-34); the Education Amendments of 1972 (20 U.S.C. §§1681. 1683, 1685-86); and the Age Discrimination Act of 1975 (42 U.S.C. §§ 6101-07); see Executive Order 13279 (equal protection of the laws for faith-based and community organizations).
7. If a governmental entity –
  - a. it will comply with the requirements of the Uniform Relocation Assistance and Real Property Acquisitions Act of 1970 (42 U.S.C. § 4601 et seq.), which govern the treatment of persons displaced as a result of federal and federally-assisted programs; and
  - b. it will comply with requirements of 5 U.S.C. §§ 1501-08 and §§ 7324-28, which limit certain political activities of State or local government employees whose principal employment is in connection with an activity financed in whole or in part by federal assistance.

Acknowledgement of Grant Standard Assurances:

\_\_\_\_\_  
Signature of Governmental Unit (County Commissioner, City Supervisor, Mayor, etc.)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant Agency (Sheriff, Chief, DA, etc.)

\_\_\_\_\_  
Date



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CERTIFICATIONS REGARDING LOBBYING, DEBARMENT, SUSPENSION, AND OTHER  
RESPONSIBILITY MATTERS, AND  
DRUG FREE WORKPLACE REQUIREMENTS

U.S. Department of Justice  
Office of Justice Programs  
Office of the Comptroller

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature of this form provides for compliance with certification requirements under 28CFR Part 69, “New Restrictions on Lobbying” and 28 CFR Part 67, “Government-wide Debarment and suspension (Non-Procurement) and Government-wide Requirements for Drug-Free Workplace (Grants).” The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Justice determines to award the covered transactions, grant or cooperative agreement.

1. LOBBYING

As required by Section 1352, title 31 of the U.S. Code, and implemented at 28 CFR Part 69, for persons entering into a grant or cooperative agreement over \$100,000, as defined at 28 CFR 69, the applicant certifies that:

- a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee or a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;
- b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form –LLL “Disclosure of Lobbying Activities,” in accordance with its instructions;
- c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontracts) and that all subrecipients shall certify and disclose accordingly.

2. DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS (DIRECT RECIPIENT)

As required by Executive Order 12549, Debarment and Suspension, and implemented 28 CFR Part 67, for prospective participants in primary covered transactions, as defined at 28 CFR Part 67 Section 67.510.



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- A. The applicant certifies that it and its principals:
  - a. Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;
  - b. Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property);
  - c. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, State, or Local) with commission of any of the offenses enumerated in paragraph (1) (b) of this certification; and
  - d. Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or Local) terminated for cause or default; and
- B. Where the applicant is unable to certify to any of the statements in this certification, h/she shall attach an explanation to this application.

3. DRUG-FREE WORKPLACE (GRANTEES OTHER THAN INDIVIDUALS)

As required by the Drug-Free Workplace Act Of 1988, and implemented at 28 CFR Part 67 Subpart F, for grantees, as defined at 28 CFR Part 67 Sections 67.615 and 67.620;

- A. The applicant certifies that it will or will continue to provide a drug-free workplace by:
  - a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
  - b. Establishing an on-going drug-free awareness program to inform employees about:
    - i. The dangers of drug abuse in the workplace;
    - ii. The grantee's policy of maintaining a drug-free workplace;
- B. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance:

Address:			
City:		State:	NV
County:		Zip:	

Check  if there are workplaces on file not identified here.

Section 67.630 of the regulations provides that a grantee that is a State may elect to make one certification in each Federal fiscal year. A copy of which should be included with each application for the Department of Justice Funding. States and State agencies may elect to use OJP Form 4061/7.

Check  if the State elected to complete OJP Form 4061/7



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4. DRUG-FREE WORKPLACE (GRANTEES WHO ARE INDIVIDUALS)

As required by the Drug-Free Workplace Act of 1988, and implemented at 28 CFR Part 67, Subpart F, for grantees, as defined at 28 CFR Part 67, Sections 67.615 and 67.620.

A. As a condition of the grant, I certify that I will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity. I will report the conviction, in writing, within 10 calendar days of the conviction, to:

Department of Justice  
Office of Justice Programs  
ATTN: Control Desk  
810 Seventh Street N.W.  
Washington, D.C. 20531

Subgrantee Name:	
Subgrantee Address	
Project Name:	

As Authorized Representative/Official of the applicant agency, I hereby certify that it will comply with the above certifications:

Signature of Authorized Representative/Official – acknowledgement of required federal certifications:

\_\_\_\_\_

Name (print/type) \_\_\_\_\_  
Title:

\_\_\_\_\_

Signature: \_\_\_\_\_  
Date:



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WAVIER of PASS-THROUGH PERCENTAGE

Edward Byrne Justice Assistance Grant Program

Name of City or County: \_\_\_\_\_

As city manager/county manager of the jurisdiction listed above and a local recipient who is eligible to receive funds from the Byrne Justice Assistance Grant Program (JAG) through the Nevada Department of Public Safety, Office of Criminal Justice Assistance (OCJA), I acknowledge that these funds to be provided to \_\_\_\_\_ (Agency requesting funding) will directly benefit this locality.

I voluntarily waive the percentage of pass-through funds for the Edward Byrne Justice Grant (JAG) to allow needed monies to support \_\_\_\_\_ (Agency requesting funding) in providing \_\_\_\_\_ (List services that will be provided. You may use bullets if needed.).

OFFICIAL REPRESENTATIVE SIGNATURE: \_\_\_\_\_

Type Name Here: \_\_\_\_\_

OFFICIAL REPRESENTATIVE TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_



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Return original signed form to:

Nevada Department of Public Safety  
Office of Criminal Justice Assistance  
1535 Old Hot Springs Road # 10  
Carson City, NV 89706

For questions call:

775-687-1501

The Waiver of Pass-Through Percentage form must be signed off by the city or county manager of the stated jurisdiction. In submitting a formal request to a city/county manager, applicant agencies should demonstrate in the request how the agency's services will directly benefit the community/locality.

The City/County Manager's Office will return the signed waiver form to the requesting agency to include in their Justice Assistance Grant (JAG) application. The requesting agency will hold a copy in their application file. The City/County Manager's office will keep a copy for their files.

For Washoe County agencies: the waiver form and a formal request for signature should be sent to:

County Grants Administrator  
Office of the County Manager

## BUDGET SUMMARY

Carson City Sheriff's Office - VALE Victim Witness Coordinator

	<u>Budget Category</u>	<u>Amount</u>
A.	Personnel	\$72,838
B.	Consultants/Contracts	\$0
C.	Travel	\$2,387
D.	Supplies/Operating/Conference & Training Registrations	\$2,400
E.	Equipment	\$2,434
F.	Confidential Funds	\$0
	<b>Total Project Costs:</b>	\$80,059
	<b>Federal Request:</b>	\$80,059

*NOTES: 1. After completing the budget pages below, the totals for each category will autopopulate the spaces above. 2. Place the full justification for the requested budget categories in Section II, "Methods of Accomplishment" of the application. Include only a summary justification for each category in this Section.*

## Budget Request and Justification

May delete category(ies) not applicable to the requested project. The justification fields at the bottom of each category automatically expand to accommodate the narrative.

### A. Personnel

Detail salaries and wage expenditures required for program activities to be paid for by this request for funding. Compensation paid for employees engaged in program activities must be consistent with that paid for similar work within the applicant organization. (Work Hours Per Year = 2,080)

Position Title	Annual Salary/Hourly Rate/or OT Rate	% of time working on the grant	# of Hours	Is position a New Hire (Y/N)	Total Federal \$ Requested
Victim Witness Coordinator	\$ 22.33	100.000%	2080	Y	\$ 46,454.72
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
<b>Total Project Hours:</b>			<b>2080.00</b>		
<b>Personnel Sub-total =</b>					<b>\$46,454.72</b>

### Payroll Taxes & Fringe Benefits:

Based on actual known costs or an established formula and only for the percentage of time devoted to the project.

	Annual Cost	Hourly Rate	Rate Applied	\$ Requested
		(annual cost/2080 work hours per year)	Project Hours x Hourly Rate	
<i>Employer's FICA</i>	0.00	0	0.0000	\$0.00
<i>Medicare</i>	673.47	0.323783654	673.4700	\$673.47
<i>Retirement</i>	7,084.34	3.405932692	7084.3400	\$7,084.34
<i>Health Insurance</i>	17,881.68	8.596961538	17881.6800	\$17,881.68
<i>Workman's Compensation</i>	744.00	0.357692308	744.0000	\$744.00
<i>Unemployment Compensation</i>	0.00	0	0.0000	\$0.00
<b>Fringe Sub-total =</b>				<b>\$26,383.49</b>
<b>Total Personnel =</b>				<b>\$72,838.21</b>

**Personnel Summary of Justification:** The Sheriff's Office Victim Witness Coordinator position will increase the ability for the Carson City Sheriff's Office to provide victim services, crisis intervention to victims and witnesses, and assisting victims and witnesses through the criminal justice process. The Sheriff's Office Victim Witness Coordinator position would be a new full time position and would work along side both front line officers as well as the District Attorney's office.



<b>B Consultants/ Contracts:</b>	List consultant/contract personnel in priority order. Include consultant travel and expenses in this section. Follow federal/state GSA travel policy and per diem rates. \$650 per day or \$81.25 per hour.					
<b>Consultants:</b>		<b>Computation</b>				
Name of Consultant	Service Provided	Cost per unit	(define unit)	# Units	Cost	
					\$ -	
					\$ -	
					\$ -	
<b>Computation</b>						
Purpose of Travel	Location	# Individuals	Item	Cost	# Nights/Days or mileage	Amount Requested
			Airfare (roundtrip)			\$0.00
			Hotel (per night)			\$0.00
			Per Diem per day			\$0.00
			Round Trip Ground transportation			\$0.00
			Personal Vehicle Mileage R/T	\$0.535		\$0.00
<b>Consultant Sub-total:</b>						\$0.00
<b>Contracts:</b> Provide a description of the product or service to be procured by contract and an estimate of the cost.						
Item /Description/Vendor		Rate	Qty/hours	Sole Source Contract ?	Amount Requested	
					\$ -	
					\$0.00	
					\$0.00	
<b>Consultant Sub-total:</b>						\$ -
<b>Total Consultants/Contracts =</b>						<b>\$0.00</b>
<b>Consultant/Contracts Summary of Justification:</b>						

**C. Travel**

Itemize travel expenses of project personnel by purpose ( e.g. staff to training, advisory group meeting, etc.) Provide the location and purpose of travel. Show the basis of computation. Per diem (meals), lodging and mileage are included in travel. Per mile cost and per diem rates should not exceed the current state rates. Current state rates are: mileage .535 cents/mile, per diem is set at the federal GSA rates. Go to <http://www.gsa.gov> for current rates in each city/county. Registration fees/ conference/ training costs belong under the Operating category. **Requesting more than 1 trip? copy this category for each trip.**

In-State Travel		Computation				Amount Requested
Who is traveling and Purpose of Travel	Location	# Individuals	Item	Cost	# Nights/Days or mileage	
			Airfare (roundtrip)			\$0.00
			Hotel (per night)			\$0.00
			Per Diem per day			\$0.00
			Round Trip Ground transportation			\$0.00
			Personal Vehicle Mileage R/T	\$0.535		\$0.00
		0	0	0	\$ -	\$0.00
<b>Sub-total</b>						\$0.00
<b>In-State Travel =</b>						\$0.00

**In-State Travel Summary of Justification:**

Out of State Travel:		Computation				Amount Requested
Who is traveling and Purpose of Travel	Location	# Individuals	Item	Cost	# Nights/Days or mileage	
Vale Victim Witness Coordinator Training 2020	San Diego, CA	1.00	Airfare (roundtrip)	\$243.00		\$243.00
		1.00	Hotel (per night)	\$160.00	5.00	\$800.00
		1.00	Per Diem per day	\$71.00	5.00	\$355.00
		1.00	Round Trip Ground transportation	\$20.00		\$20.00
			Personal Vehicle Mileage R/T	\$0.535		\$0.00
		0	0	0	\$ -	\$0.00
<b>Out of State Travel Sub-total =</b>						\$1,418.00

**Out-of-State Travel Summary of Justification:** To gather in depth exchange of correct info on all facts of violence and earn CEU's for the national advocate credential

**Total Travel Costs: \$1,418.00**

**C. Travel**

Itemize travel expenses of project personnel by purpose ( e.g. staff to training, advisory group meeting, etc.) Provide the location and purpose of travel. Show the basis of computation. Per diem (meals), lodging and mileage are included in travel. Per mile cost and per diem rates should not exceed the current state rates. Current state rates are: mileage .535 cents/mile, per diem is set at the federal GSA rates. Go to <http://www.gsa.gov> for current rates in each city/county. Registration fees/ conference/ training costs belong under the Operating category. **Requesting more than 1 trip? copy this category for each trip.**

In-State Travel		Computation				Amount Requested	
Who is traveling and Purpose of Travel	Location	# Individuals	Item	Cost	# Nights/Days or mileage		
			Airfare (roundtrip)			\$0.00	
			Hotel (per night)			\$0.00	
			Per Diem per day			\$0.00	
			Round Trip Ground transportation			\$0.00	
			Personal Vehicle Mileage R/T		\$0.535		\$0.00
		0	0	0	\$ -	\$0.00	
					<b>Sub-total</b>	\$0.00	
					<b>In-State Travel =</b>	\$0.00	

**In-State Travel Summary of Justification:**

Out of State Travel:		Computation				Amount Requested	
Who is traveling and Purpose of Travel	Location	# Individuals	Item	Cost	# Nights/Days or mileage		
Vale Victim Witness Coordinator Training 2020	Phoenix, AZ	1.00	Airfare (roundtrip)	\$349.00		\$349.00	
		1.00	Hotel (per night)	\$94.00	4.00	\$376.00	
		1.00	Per Diem per day	\$56.00	4.00	\$224.00	
		1.00	Round Trip Ground transportation	\$20.00		\$20.00	
			Personal Vehicle Mileage R/T		\$0.535		\$0.00
		0	0	0	\$ -	\$0.00	
					<b>Out of State Travel Sub-total =</b>	\$969.00	

**Out-of-State Travel Summary of Justification:** To learn new skills focused on providing trauma mitigation, education and emotional first aid as well as to earn CEU's for national advocate credential

**Total Travel Costs: \$969.00**

**D Supplies/Operating/  
Conference & Training:**

Include in this section requests to support all of the following: telephone, postage, printing and copying, publication, desktop and consumable office supplies, drug testing supplies, and other. For cell phone, include the cost of monthly service and charges by minutes/plan. For printing and copying, include the cost per page and number of pages per month. For desktop and consumable supplies, include the cost per person per month. For drug testing supplies use the average cost per month. List conference and training **registration expenses**. Show computations.

**Supplies**

You may adjust this section to meet the needs of the formula.

Item /Description	Quantity (Per month / per person)	Define Unit of measure	Cost per unit	Cost per Month	Total for Year
Example: Test Kits	5	each	\$ 15.00	\$75.00	\$900.00
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00

**Supplies Sub-total = \$0.00**

**Operating**

Item /Description	Quantity (Per month per person)	Define Unit of measure	Cost per unit	Total for year	Cost
NOVA Training Registration	1	Each	\$ 475.00	\$475.00	\$475.00
IVAT Registration	1	Each	\$ 575.00	\$575.00	\$575.00
Mediation and Conflict Resolution Certificate	1	Each	\$ 1,350.00	\$1,350.00	\$1,350.00
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00

**Operating Sub-total = \$2,400.00**

**Supplies/Operating TOTAL: \$2,400.00**

**Supplies/Operating Summary of Justification:** Supplies listed are registration and class costs for training requests. The training requested would provide training in trauma mitigation, education and emotional first aid, and earn CEU's for national advocate credential

**E Equipment**

List non-consumable items with a life of one year or more and an acquisition cost of \$1,000 or more per item (excluding printers). Like items or related components must be considered as a group and may not be separated to avoid compliance with these standards. Provide a list of each item including number, manufacturer, location and price. Awarded law enforcement agencies will be required to check with the OCJA 1033/1122 Programs for equipment purchases, but need not receive an estimate for purposes of this application. **Include low-cost but high-risk equipment such as iPads, cameras, etc.**

Item /Description	Qty	Item/each	Unit cost	Cost
Dell Latitude 5591	1	Each	1459	\$1,459.00
Printer C4062FX Samsung	1	Each	975	\$975.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
<b>Equipment Total =</b>				<b>\$2,434.00</b>

**Equipment Summary of Justification:** Equipment is needed for new advocate to complete job duties and grant management. The request consists of a laptop and a printer. The advocate will often out of office or in court. A laptop gives them the ability to complete their job and tasks without being tethered to the office.

**F Confidential Funds**

Confidential funds will be considered for law enforcement agencies. For continuation grants, the balance of the previous years' grant will be considered.

Item /Description	Rate per month	Total for Year	Estimate portion to be used from forfeiture funds	Amount Requested
		0		\$0.00
		0		\$0.00
		0		\$0.00
		0		\$0.00
		0		\$0.00
<b>Confidential Funds Sub-Total:</b>				<b>\$0.00</b>

**Confidential Funds Summary of Justification:**