

SFY 2027 VICTIM OF CRIMES ACT (VOCA) APPLICANT INFORMATION SESSION

March 26, 2026

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SFY 2027 VICTIM OF CRIMES ACT (VOCA) & STATE VICTIM ASSISTANCE GRANT PROGRAMS

RELEASE DATE:

- Monday, March 9, 2026

AWARD PERIOD:

- July 1, 2026 – June 30, 2027

AMOUNT TO BE AWARDED:

- approximately \$6,000,000

APPLICATION DEADLINE:

- Monday, April 13, 2026 by 5:00 PM (CDT)

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FUNDING STRATEGY

Review criteria:

- eligibility
- risk assessment
- Adherence to program requirements
- Completeness, clarity, continuity, and consistency

Include information indicating:

- grant application template items
- Potential duplication and coordination of resources
 - Reducing # of Awards – Current: 63 (58 + 5)
- Ability and capacity to make an impact
- Grant management capacity (Risk Assessment)
- Cost effectiveness

Additionally:

- Amount of funds available
 - 14% increase from SFY 2024 YR3
- Priorities described
 - Underserved Populations
 - Shelter/Housing Services
 - Direct Client Assistance
 - New Programs/Projects
- History of spend-down consistency
- History of financial and programmatic reporting requirements and deadlines
- Prior measurable performance/effectiveness of programs
- Data-based and/or evidence-informed merits
- Sustainability plans and/or match funds

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REQUEST FOR APPLICATIONS (RFA)

1. Program Overview | VOCA & Victim Assistance
2. Eligibility | VOCA & Victim Assistance
3. Program Description | VOCA & Victim Assistance
4. Application Contents & Submission Requirements
5. Application Review
6. Grant Management Requirements
7. Appendix A: Definitions
8. Appendix B: Use of Funds
9. Appendix C: Application Scoring
10. Appendix D: NCC Victim Services Grant Programs: Organization & Program Type Definitions
11. Appendix E: NCC Grant Project Problem-Solving Process

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APPLICATION MATERIALS

NCC Applicant Eligibility Screening Form

NCC Applicant Risk Assessment Form

SFY 2027 VOCA & VA Application Template

▪ Signature page

SFY 2027 VOCA & VA Application Performance Measures

SFY 2027 VOCA & VA Application Budget Request

NCC Application Certified Assurances

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ATTACHMENTS 1

SAM Registration

Organizational Chart

Job Descriptions

Evidence of Effective Services

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ATTACHMENTS 2

Conditionally Required

Non-Profit Verification
IRS Form 990 or equivalent
Memorandum of Understanding (MOU)
Agency Policies
Indirect Cost Rate Agreement

Applicant Discretion

Volunteer Waiver Request
Match Waiver Request
Other Attachments

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BASIC FORMS

NCC Applicant Eligibility Screening Form

- ***Start Here***
- Signed by Project Point of Contact (PPOC)

NCC Applicant Risk Assessment Form

- Signed by Authorized Official (AO)

NCC Application Certified Assurances

- Signed by Authorized Official (AO)

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SFY 2027 VOCA & VA APPLICATION PERFORMANCE MEASURES (SPREADSHEET)

No changes to OVC PMT

Quarterly Activity Reporting via EUNA

Upload as a spreadsheet

- No data entry into EUNA

Cross-reference with Appendix E

- Choosing your performance measures

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Baseline vs Targets

- Calculating baseline
- Balancing growth and sustainability

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SFY 2027 VOCA & VA APPLICATION TEMPLATE

Original version contained error

- Corrected copy is labeled "CORRECTED" in the file name
- Updated on website, in EUNA application, and in EUNA "documents"

NCC's Application Approach

- Minimize duplication
- Minimize EUNA entry
- Streamline review process

Applicant Approach

- Be Concise
 - NCC anticipates 60+ applications
- Be Complete, Accurate & Authentic

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OVERVIEW & SCORING

See Appendix C of RFA

Section 1 – Applicant Information

Section 2 – Organization Information (10%)

Section 3 – Victim Services Program (25%)

Section 4 – Grant Project Narrative (25%)

Section 5 – Budget Instructions and Narrative (25%)

Section 6 – Application Signature Page

Reviewer Assessment and Recommendations (15%)

- Overall impressions and recommendations of reviewers.
- Proposal is a good presentation of the project.
- Project has a high potential for success.
- Project represents a good financial investment.
- Project is consistent with the solicitation priorities.
- Proposal is innovative and/or is consistent with sound victim services principles.

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APPLICANT & ORGANIZATION INFORMATION

Section 1 – Applicant Information

- Names, Addresses, Email, Phone

Section 2 – Organization Information

- Organizational Type – NEW
- Geographic Community
 - Please alphabetize
- Underserved Populations
 - How do you reach them?
 - Is it working?

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SECTION 3 – VICTIM SERVICES PROGRAM

Program Name vs Project Title

Program Type – NEW

Nebraska Priority Areas

- DCA = staff time, services, supplies

Community Collaboration & Effective Services

Demonstrating Effective Services

- Reports, Newsletters, etc.
- If none, PMT Data + Narrative
- NOT QANR

Program Funding

Funding Sources (next slide)

- Program Budget as a whole

Funding Sustainability

Supplanting

- Attach evidence of budget cuts

Potentially Duplicative Funding

Subaward Narrative

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VICTIM SERVICES PROGRAM BUDGET | CASH

The cash funds your program receives from...

That income could be counted as...

Source	Program Income	Meeting a Federal Match Requirement	Evidence of support from non-VOCA sources
Federal Grant: VOCA	Never	Never	Never
Federal Grant: non-VOCA	Never	Never	Yes
State Grant(s)	Never	Yes	Yes
Private Grant(s)	Never	Yes	Yes
General Donations	Never	Yes	Yes
State General Funds	Never	Yes	Yes
County General Funds	Never	Yes	Yes
State/Local Cash Funds	Possibly	Yes	Yes
Fees for Services (Therapy, Training Registration, DVIP, etc.)	Yes, if service is supported by grant	Yes, NCC requires for VOCA & STOP	Yes
Interest Income	Possibly	Yes	Yes
Rental Income	Possibly	Yes	Yes
Other Sources	Possibly	Yes	Yes

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VICTIM SERVICES PROGRAM BUDGET | IN-KIND

If your program does NOT have to pay for... That value of that item could be counted as...

Item	Program Income	Meeting a Federal Match Requirement	Evidence of support from non-VOCA sources
Volunteer Time (Unpaid Staff)	N/A	Yes	No
Office Space	N/A	Yes	Yes
Software Licensing	N/A	Yes	Yes
Utility Services (Energy, Waste Management, Water & Sewer, Communications)	N/A	Possibly*	Yes
Support Services (technology, accounting, hiring, etc.)	N/A	Possibly*	Yes
Supplies & Equipment (pens, envelopes, sticky notes, laptops, office furniture, vehicles, etc.)	N/A	Yes, if allowable (NCC prohibits some equipment items.)	Yes

*Costs that are administrative (meaning not program-specific) must be either a) prorated direct costs or b) indirect costs. If administrative costs are included in the program budget as indirect, then the project can only use indirect costs as match if they have a federally negotiated indirect costs rate agreement.

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SECTION 4 – GRANT PROJECT NARRATIVE

Question 29 - Major Aspects Statement (150 words)

Question 30 – Problem Statement (400 words)

Performance Measures

- Narratives for Write Your Own Solution/Performance Outcomes
- Narrative for Data Irregularities

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SECTION 5 — BUDGET INSTRUCTIONS AND NARRATIVE

Project & Budget Period

- 2-year cycle resuming in 2027-28/2028-29

Proration by Devotion/Allocation

- Devotion =
Hours Dedicated to VOCA ÷
Hours worked per week/month/year
 - 1040 VOCA hours per year ÷
2080 hours per year =
50% devotion
- Allocation = proration of VOCA to non-VOCA used for budgeting
 - Program Costs (DCA or Operations)
 - Personnel (Wage & Fringe)
 - Administrative Costs

Budget Spreadsheet

- Each Subgrantee completes their own

Cost-Sharing (Match)

- 20% required unless granted a full or partial waiver

Program Income

- NEW: Must use as Match

Federal Priority Areas

- AKA Federal Allocation Priorities

Budget Spreadsheet: [Specific] Tab Instructions

- VOCA Projection Section
- Federal Allocation Priorities Instructions

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BUDGET NARRATIVE

Personnel – Wages & Fringe

- Existing & New Positions
- Wages Detail
- Fringe Detail
 - Map out your numbers

Travel & Training

- Other Travel Costs Detail
 - Map out your numbers

Indirect Costs

Narratives: Necessary Cost, Reasonable and Cost Effective

1. Personnel (Wages & Fringe)
2. Travel & Training
3. Direct Client Assistance (DCA)
4. Supplies & Equipment
5. Contracts
6. Other
7. Administrative Costs (Direct or Indirect)

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SECTION 6 — APPLICATION SIGNATURE PAGE

Section 6 - Application Signature Page

Applicant Information

Organization:	Name
	Address
	Including City, State & Zip
	Phone

Instructions

The Official who signs this document agrees to adhere to all terms and conditions relating to this application. Duplication of responsibility by one individual for two positions listed herein is NOT acceptable. Check all appropriate boxes on appropriate.

Authorized Official

Must be a person with sufficient authority:
 (i.e. City/County Commissioners, Mayor, Department Head, or President of Board/Directors)

Confirm the information in this application is accurate and as the Authorized Official for this project, hereby agree to comply with all provisions of the grant program, especially subsections of the Request for Application, requirements of the Narrative Check, Deliverables and all other applicable federal and state laws.

Authorizing the grantee project contact, secondary project contact, and financial contact to act on behalf of the Authorized Official for grant management purposes and fulfillment of the grant program.

Signature of Authorized Official	Click or tap to enter a date
	Date
Click or tap here to enter text	
Printed Name of Authorized Official	

Project Point of Contact (Primary)

Must be an employee of the applicant agency.

Signature of Project Point of Contact	Click or tap to enter a date
	Date
Click or tap here to enter text	
Printed Name of Project Point of Contact	

Financial Point of Contact

Signature of Financial Point of Contact	Click or tap to enter a date
	Date
Click or tap here to enter text	
Printed Name of Financial Point of Contact	

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SFY 2027 VOCA & VA APPLICATION BUDGET REQUEST (SPREADSHEET)

Upload as a spreadsheet

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Match

- Does not apply to federal priority areas dedications (SA/DV/CA/Underserved)
- No default waivers (may request full or partial waiver)
- Cash: Program Income (may include SAPP), State, Local, Private
- In-Kind: Volunteers (\$15/\$22.25), Materials/Equipment, Space and Facilities

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EXCEL VERSION

#NAME error

- XLOOKUP formula requires Excel 2019 or newer

Adapted Version will be available via "Documents" in EUNA

Position	FICA	Retirement	Health Care	Other 1	Other 2	Other 3	FICA	Retirement	Allow
W3	#NAME?	7.65%	\$ 6,000.00	\$ 6,600.00	\$ 1,200.00	\$ 12.00	\$ 65.04		
W11	#NAME?	7.65%		\$ 18,000.00	\$ 45.00	\$ 2,000.00			
W2	#NAME?	7.65%		\$ 18,000.00	\$ 45.00	\$ 2,000.00			
W3	#NAME?	7.65%		\$ 18,000.00	\$ 45.00	\$ 2,000.00			
W4	#NAME?	7.65%		\$ 18,000.00	\$ 45.00	\$ 2,000.00			
W5	#NAME?	7.65%	\$ 2,428.00	\$ 18,000.00	\$ 45.00	\$ 2,000.00			
W6	#NAME?	7.65%		\$ 18,000.00	\$ 45.00	\$ 2,000.00			
W7	#NAME?	7.65%							

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PERSONNEL TAB

Peach Section – Positions

- Unique positions, not people

Gray Section – Existing

- Used for identifying supplanting

White Section - Federal Allocation Priorities

- Applies to Federal ONLY
 - \$ Requested for VOCA Funding
- \$ Dedicated to Sexual Assault +
\$ Dedicated to Spousal Abuse +
\$ Dedicated to Child Abuse +
\$ Dedicated to Violent and Underserved
≤ \$ Requested for VOCA Funding

Green Section – Requested

- Dates can't be outside project period
- Only structured for 1 salary increase
- Devotion: % VOCA ≥ % DCA
- \$ Allowable for VOCA Project =
Project Period Salary Total ×
% Time Devoted to VOCA Allowable Activities
- \$ VOCA Project Total =
\$ Requested for VOCA Funding +
\$ Funded by VOCA Match
- \$ VOCA Project Total ≤ \$ Allowable for VOCA Project
- % of Salary VOCA Project Funded ≤ 100%

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FRINGE TAB

Rates are explained in Application Template

- Okay to combine like items
(i.e. "Health Care" = Health Insurance + Vision + Dental)

\$ Requested for VOCA Funding ≤ \$ Allowable for VOCA Funding

\$ Funded by VOCA Match ≤ \$ Allowable for VOCA Match

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TRAVEL & TRAINING

All Travel

Travel Plans Section

- Mileage

VOCA Project

Federal Allocation Priorities

Training/Overnight ONLY

Training Registration

Airfare

Lodging

Meals

Other

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ADDITIONAL BUDGET CATEGORY TABS

DCA

- things for clients' use

Supplies & Equipment

- tangible items

Contracts & Subawards

- things that enable the work

Administrative

- things that allow your program to function, "overhead"

Other

- things that don't fit anywhere else

Indirect

- alternate to Administrative category
- Indirect Cost Rate is a maximum, not a minimum

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REVIEW TABS

Line-Item Budget

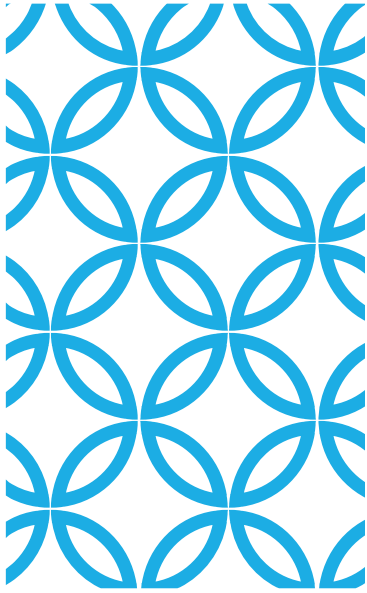
- Pulls from all other tabs
- Filter on "Line Item" (column E) to condense your view
- Will be used to upload your budget into EUNA

Overview

- Totals from Line-Item Budget

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QUESTION & ANSWERS

Slides
FAQ