2019 Juvenile Services Crime Commission Grant (JS) Request for Application (RFA)

AWARD PERIOD
July 1, 2019 – June 30, 2020

AWARD AMOUNT
APPROXIMATELY
$560,000

DEADLINE
All applications are due March 15th, 2019 by 5:00 p.m. (CST)

CONTACT INFORMATION
For assistance with the requirements of this solicitation, contact:

Chris Harris Director of Office of Violence Prevention, at 402/471-3813 or
Chris.Harris@nebraska.gov

In accordance with the Americans with Disabilities Act, the State would like to provide reasonable accommodation with respect to a grant application to persons with disabilities. If you need a reasonable accommodation, please contact the Nebraska Crime Commission, (402) 471-2194 (TDD 800-833-7352).
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2019 Juvenile Services Crime Commission Grant Request for Application (RFA)

OVERVIEW

The purpose of these funds is to better the Juvenile Justice System in the State of Nebraska. The funding priorities outlined in the application instructions support the goals of the Nebraska Crime Commission and the NCJJ statewide three-year plan. This plan is developed with community and professional input and the results of the Comprehensive Juvenile Services Plans submitted by counties in Nebraska.

DEADLINE

The 2019 Juvenile Services (JS) Application must be submitted to the Nebraska Crime Commission by 5:00 p.m. (CST) on March 15th, 2019.

ELIGIBILITY

To be eligible for Juvenile Services Grant Funds, an applicant must be one of the following:

- Community-Based Agency or Organization, including Faith-Based Organizations
- Community Team
- Political Sub-Division
- School District
- Federally or State recognized Indian Tribe
- 501(c)(3) Non-Profit Organization

If an Agency without the 501(c)(3) status is interested in applying, they must seek out an eligible applicant listed above to apply on their behalf to act as the fiscal agent.

COMPREHENSIVE JUVENILE SERVICES PLANS

State statute requires eligible applicant’s County to have a Three Year Comprehensive Juvenile Services Plan. To be eligible for either grant program, the respective county must have a current Comprehensive Juvenile Services Plan on file with the Nebraska Crime Commission. The application requires applicants to document how the proposed project fits into their County’s Comprehensive Juvenile Services Plan. For information on counties with existing plans, please visit: https://ncc.nebraska.gov/community-comprehensive-juvenile-services-plans

FUNDING PURPOSE

The Juvenile Services Act was enacted to assist communities in the implementation and operation of needed programs or services for youth as identified in their Comprehensive Juvenile Services Plan, including, but not limited to programs for: assessment/evaluation; prevention of delinquent behavior; diversion and other alternatives to detention; shelter care; intensive juvenile probation services; restitution; family support services; community centers for the care and treatment of juveniles in need of services.

FUNDING REQUIREMENTS

Office of Civil Rights – Pursuant to 28 C.F.R. Section 42.302, all recipients of federal funds must be in compliance with Equal Employment Opportunity Plans (EEOP) and Civil Rights requirements. Although the Office of Violence Prevention is funded through the Nebraska State Legislature, the Nebraska Crime Commission implements best practices as responsible stewards for all grant monies within our agency.
Equal Employment Opportunity Assurance of Compliance – Compliance is required with the following federal laws which prohibit discrimination on the basis of race, color, national origin, religion, sex, age or disability. These are Title VI of the Civil Rights Act of 1964; Omnibus Crime Control and Safe Streets Act of 1968; Section 504 of the Rehabilitation Act of 1973; Title II of the Americans with Disabilities Act of 1990; Age Discrimination Act of 1975; and the Title IX of the Education Amendments of 1972.

Non-supplanting of Funds – Office of Violence Prevention funds cannot be used to supplant (replace) other existing funds. Funds presently appropriated for the project may not be deliberately decreased due to additional state funds made available through the Crime Commission. The application’s budget narratives should clearly explain requests to ensure supplanting will not occur by including how position(s) or costs were funded, why funding is no longer available, when support ends or any temporary funding agreements or arrangements.

Certified Assurances, Drug Free Workplace and Lobbying – As recipients of federal funds, the Crime Commission must sign and pass on certain Certified Assurances and requirements to sub-grantees. Certified Assurances, Drug Free Workplace, and Lobbying forms must be signed and included with the grant application.

Debarment - A Debarment form which certifies the agency or individuals in the agency are not barred from doing business with the federal government must be signed and returned with the application.

Special Conditions - Awarded applicants must sign Special Conditions which include but are not limited to requirements under federal and state laws in addition to requirements for accounting, data collection and reporting. Victim assistance programs must maintain nondiscrimination information on victims (race, national origin, sex, age and handicap). This information will be forwarded to the Crime Commission as part of the program's annual statistical performance report.

Fiscal Requirements - Commingling of funds on either a program-by-program or project-by-project basis is prohibited. The sub-recipient’s accounting system must maintain a clear audit trail for each source of funding for each fiscal budget period and include the following:

- Separate accountability of receipts, expenditures, disbursements and balances.
- Itemization of all supporting records of grant receipts, expenditures and match contributions in sufficient detail to show exact nature of activity.
- Data and information for each expenditure and match contribution with proper reference to a supporting voucher or bill properly approved.
- Maintain hourly timesheets describing work activity, signed by the employee and supervisor, to document hours personnel worked on grant related activities. Mach hours must be document in same manner.
- Maintenance of payroll authorizations and vouchers.
- Maintenance of records supporting charges for fringe benefits.
- Maintenance of inventory records for equipment purchased, rented, and contributed.
- Maintenance of billing records for consumable supplies (i.e., paper, printing) purchased.
- Provisions for payment by check.
- Lease agreements and contracts for services (if applicable).
- Maintenance of travel records (i.e., mileage logs, gas receipts).

FUNDING LIMITATIONS

Funds provided under the Juvenile Services Act may be used for developing programs for youth and for acquiring, developing, or improving local facilities for juveniles if the development and use of the facilities are identified as a need in the Comprehensive Juvenile Services Plan.
- Funds may be requested for personnel, consultants/contracts, travel, supplies and operating expenses and equipment related to the proposed project.
• No funds awarded under the Act shall be used to acquire, develop, build, or improve local correctional facilities that are not specifically utilized for juveniles.
• Grants received under the Juvenile Services Commission Grant Program shall not be used for capital construction or the lease or acquisition of facilities. (Purchasing or renting space is NOT allowable under Juvenile Services Grant Funds)
• Funds received by an eligible applicant under the Juvenile Services Act shall NOT be used to replace or supplant any funds currently being used to support existing programs for juveniles.
• The Nebraska Crime Commission does not allow grant funds for indirect costs.

MATCH REQUIREMENTS

Match is not required by the grant guidelines, however, some cash and/or in-kind match is strongly encouraged to document support and long term sustainability for the project. The match for the project will need to be detailed and explained in the detailed budget narrative.

Expenditures of matching funds do not need to occur on a quarterly basis. However, by the end of the project period the total cash match must be met.

GRANT COMMENCEMENT AND DURATION

Nebraska Crime Commission requires that funded projects be implemented within 30 days from the start date listed on the Grant Award or other date specified by the grant administrator. The project period for the 2019 Juvenile Services Commission Grant is July 1st, 2019 – June 30, 2020. The project period may start on July 1st, 2019, however reimbursement takes place several weeks thereafter. The failure of a sub-grantee to implement a project within this timeframe, or timeframe agreed upon by the grant administrator, may result in the loss of grant funds.

GRANT APPROVAL TIMELINE

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>18 Dec 2018</td>
<td>Grant Announcement</td>
</tr>
<tr>
<td>15 Mar 2019</td>
<td>Application Due Date</td>
</tr>
<tr>
<td>TBD Apr 2019</td>
<td>Review by NCC Staff</td>
</tr>
<tr>
<td>TBD Apr 2019</td>
<td>Nebraska Coalition of Juvenile Justice Review</td>
</tr>
</tbody>
</table>

REPORTING REQUIREMENTS

• Applicants will be required to develop goals, objectives and performance indicators as instructed on the appropriate forms in the application kit.
• Upon awarding of funds, applicants will be required to submit quarterly activity and cash reports to the Crime Commission.

APPLICATION FORMAT

• Applications must be typewritten.
• The original must be stapled and 2-hole punched at the top and single sided.
• The completed application must also be sent in PDF format to kristy.nguyen@nebraska.gov
• If the applicant recreates the application on their computer, the application format and layout is to be exactly
APPLICATION SUBMISSION

Faxed copies will not be accepted. Submit 1 original and 1 PDF of the application. The Nebraska Crime Commission will not be held responsible for late applications due to mail service issues. The Crime Commission is located on the 5th floor of the Nebraska State Office building at 14th and M streets. In the case of severe weather, contact the Nebraska Crime Commission office prior to attempting to deliver your application.

You must submit the following by 5:00 p.m. (CST) on Friday, March 15, 2019:

1) PDF copy of your application emailed as an attachment to kristy.nguyen@nebraska.gov
2) One (1) original to the Crime Commission:

<table>
<thead>
<tr>
<th>Submit Applications to Mailing Address:</th>
<th>Personal Delivery/Overnight:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nebraska Crime Commission</td>
<td>Nebraska Crime Commission</td>
</tr>
<tr>
<td>P.O. Box 94946</td>
<td>5th Floor</td>
</tr>
<tr>
<td>Lincoln, NE 68509</td>
<td>301 Centennial Mall South</td>
</tr>
<tr>
<td></td>
<td>Lincoln, NE 68509</td>
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EVIDENCE-BASED PRACTICES

The Crime Commission shall prioritize funding to implement evidence-based strategies or standardized replicable practices that have been researched and have demonstrated positive outcomes.

Classification System for Evidence Based Programs in Nebraska

I. Model Program/ Fully Evidence Based Practice – The program satisfies the following five criteria:
   a. The program demonstrated effectiveness with a randomized experimental study (RCT) or two quasi-experimental studies in which the treatment group showed a significant difference on the target outcome as compared to the control group.
   b. The effect lasted for no less than 1 year after the intervention.
   c. There is at least one independent replication with a RCT or two more quasi-experimental evaluations.
   d. The combination of designs adequately addressed all the threats to internal validity (i.e., the design allowed for a strong inference of causality).
   e. The program has produced no compromising negative side effects.

II. Effective – One RCT or two quasi-experimental designs document the program’s effectiveness. Furthermore, an evaluator has replicated the program’s effectiveness with an RCT design or two quasi-experimental designs but the researcher was not an independent investigator.

III. Promising – There has been one successful RCT or two quasi-experiments that document the effectiveness of the program but there was no replication study available OR the program matches the dimensions of a successful meta-analysis practice.

IV. Inconclusive – There has been one successful RCT or two quasi-experimental evaluations of the program but
there are contradictory findings in these or additional studies OR the program would be promising or effective but the effects are short in duration.

V. **Ineffective** – The RCT or two quasi-experimental evaluations failed to show significant differences between the treatment and control group.

VI. **Harmful** – The RCT or two quasi-experiments showed that the control group scored higher on the targeted outcome than did the treatment group and the difference is statistically significant.

VII. **Insufficient Evidence** – There is no RCT or less than two quasi-experimental evaluations of the program to date.

**RESOURCES**

Please reference the following sites for further definition, clarification, and examples that you can relate to within your own community:

- Shared Resources from the Public: [http://www.findyouthinfo.gov/shared-resources](http://www.findyouthinfo.gov/shared-resources)
- Technical Assistance Partnership for Child and Family Mental Health: [http://www.tapartnership.org/content/juvenileJustice/publications.php?id=topic10](http://www.tapartnership.org/content/juvenileJustice/publications.php?id=topic10)
- Guidebook: Improving the Effectiveness of Juvenile Justice Programs: A New Perspective on Evidence-Based Practice: [http://www.modelsforchange.net/index.html](http://www.modelsforchange.net/index.html)
- Center for the Study and Prevention of Violence Institute of Behavioral Science, Blueprint Programs: [http://www.colorado.edu/cspv/blueprints/](http://www.colorado.edu/cspv/blueprints/)
- Search Institute: [http://www.search-institute.org/content/what-kids-need](http://www.search-institute.org/content/what-kids-need)
- New Jersey, Listing of Evidence-Based Programs: [http://www.state.nj.us/humanservices/das/prevention/curricula/EBP%20link%20page.pdf](http://www.state.nj.us/humanservices/das/prevention/curricula/EBP%20link%20page.pdf)
APPLICATION INSTRUCTIONS

Section I: Applicant Information

Applicant Name is the organization acting as the applicant. If a group of organizations are pooling their funds, only one organization can be designated as the Lead Applicant.
Federal I.D. number must be for the organization serving as the applicant or Lead Agency.
Project Director is the individual who will serve as the main point of contact and will receive all grant correspondence. It is recommended that the Project Director and Project Coordinator be different when possible.
Fiscal Officer can only be the Lead Agency’s Fiscal Officer and cannot be the Project Director or Project Coordinator.
Authorized Official is the Agency’s Board Chair or Director.

Section II: Budget Summary

Budget Summary Page: On this page you will indicate the total amount of grant funds requested in each category. If the agency is providing the match directly to the program, please indicate this in the appropriate category.

Section III: Program Summary

Project Summary: Summarize the project that is to be funded in less than 250 words.

Area Served: List the areas that will be served by the program or project.

Program Description:

1. Describe how this program or service uses practices that are supported by current evidence-based research: Describe how the practices being used are supported by evidence and are effective or positively impacting youth. Examples may include, but are not limited to the following: Use of evidence-based curriculums and incorporating evidence-based practices; and Use of screening and assessment tools.

2. List the priority in your community plan that is being addressed by this program or service. Write verbatim the priority in your community plan that is being addressed by the requested funds.

3. Is this program or service listed as a strategy in your community plan? Check “yes” or “no”.

4. Indicate if your agency has been involved in your County’s Community planning team. Select “Yes” or “No”.

5. Provide a description of the program or service by answering the following:
   a.) Purpose of the program: Describe how this program or service will address the priority listed in your community plan;
   b.) Skills and knowledge to be gained by the youth participants;
   c.) Description of key activities or services; and
   d.) Expected changes that the program will likely bring to your community.

6. Describe the target population being served by this program or service. Target population refers to the group(s) of youth a program or service is designed to serve.
Applications should define the target population by answering the following:

a.) Age, Gender, and Race/Ethnicity: List the age, gender, and race/ethnicity targeted by your program. Ensure that the program request is targeting the appropriate demographics based on best practices.

b.) Juvenile Justice System Point: Use the definitions below to identify the juvenile justice system point that is being targeted with the program request.
   i.) Voluntary Services: law enforcement may or may not have contact with youth, but no citation has been issued and no referral has been made to the county/city attorney.
   ii.) Pre-filing: law enforcement citation or referral has been made to the county/city attorney, but there has not yet been a formal filing made in court.
   iii.) Pre-adjudicated: there has been a formal filing with the court that has not been adjudicated and the county is responsible for the cost of services.
   iv.) Post-adjudicated: the youth has been adjudicated in court and the state is responsible for the cost of services.

c.) List the risk and criminogenic need factors being targeted by this program: See Appendix A in the Appendices for the list of risk and criminogenic need factors to be used in the grant application to answer this question.

d.) List the protective factors and assets being strengthened that address the risk and criminogenic need factors identified above: See Appendix A in the Appendices for the list of protective factors and assets to be used in the grant application to answer this question.

7. Explain the referral process by answering the following:
   a.) List the agencies and/or individuals who refer youth to this program or service: List who your program receives referrals from on a regular basis.
   b.) Explain the process used to determine appropriateness of youth for the program: For example, explain how a youth is the right “fit” for this program and how they would come to the attention of the agency or individual making the referral. Provide a step-by-step process used to determine how the youth enters the program, ensuring the youth is appropriate for the program.
   c.) List the screening and/or assessment tools used to determine eligibility and appropriateness: List all screening and assessment tools used by the program.
   d.) Do all referrals get accepted? Check the applicable box of “yes” or “no”. If no, explain why referrals would not be accepted and under what circumstance(s) this may happen.

Section IV: Budget Breakdown

Category A – Personnel: Funds in this category should reflect positions hired directly by the Agency. Personnel refer to wages and fringe benefits for regular full-time or part-time salaried employees for the Agency. Other persons working on the project who are not on the regular payroll for the agency must be classified in the consultants/contracts category of the application. Salaries may not exceed those normally paid for comparable positions in the community and/or unit of government. Any position 100% funded through grant funds and/or match must be 100% dedicated to the grant program’s allowable activities. The percentage of funds requested through JS for a position must not exceed the percentage of time devoted to job functions related to the JS Program. For example, you are requesting that 50% of a Community Specialist’s position be paid through JS; however, the Community Specialist is devoting 25% of their time to job functions for JS – this is unallowable. Costs for wages in excess of base rate of pay are unallowable.

Personnel Table (Agency Employees)

Position Title – List title of the position that is being requested. Do not list individual
names being employed by a position.

Full-time or Part-Time – Indicate whether a position is full-time by typing “F” or part-time by typing “P”.

New or Existing – Indicate whether a position is new by typing “N” or existing by typing “E”. If a position is being requested for the first time through Juvenile Services, but has been existing then that position is considered “E”.

Current Annual Salary – List the current annual salary of the corresponding position.

Projected Annual Salary – List the projected annual salary that will become effective on July 1, 2019.

Percent Time Devoted – List the percentage of time devoted to Juvenile Services for each position listed. This includes the time projected to be spent on all allowable requests listed in the grant application. (2080 hours annually = 100% or full-time)

Requested Wages – List the amount of wages being requested through the grant application.

Requested Fringe – List the amount of fringe benefits being requested through the grant application. All fringe benefits are to be based on the employer’s share only. The employee’s share is to be withheld from his/her wages. Only basic fringe benefits of insurance offered by the agency (health, life, professional liability, etc.), FICA, unemployment insurance, workers compensation, costs of leave (holidays, sick leave, vacation), and pension/retirement can be included. Vacation and leave time are included in normal working hours (FTE 2080 hours/year) and are not added benefits. Funds to support cafeteria plans are not allowed by the Nebraska Crime Commission.

Requested Total – List the sum of the “requested wages” and “requested fringe”. This will provide the amount of total funds being requested for each position to include wages and fringe benefits.

Match Wages – List the amount of funds being matched by the Agency for wages.

Match Fringe – List the amount of funds being matched by the Agency for benefits.

Total Project Cost – List the sum of the “requested wages”, “requested fringe”, “match wages”, and “match fringe”. This is the total cost of a position that is being requested and matched by the agency.

Personnel Table Budget Breakdown: A budget breakdown must be completed for each position:

Position Title: List the title of the personnel position. This will match the position listed in the Personnel Table.

Is this position new or existing: Check “new” or “existing”.

If existing, describe how this position was previously funded: Some examples of previous funding may include, but are not limited to: county funds, tribe funds, different grant source, Juvenile Services, Community-based Juvenile Services Aid, DHHS, etc.

Briefly describe how this request complies with the non-supplanting requirement:

Provide an explanation that funds being requested for this position will not be used to supplant (replace) funds that would, in the absence of Juvenile Services funds, be made available for grant purposes.

Provide job description: You must complete one of the following options:

If the position is already created and existing then attach the official job description.

If the position is new then write a summary of the anticipated job duties in the space provided for this question. If the position is new and a job description has already been created then attach the official job description to the grant application.

Provide justification for an annual salary increase: If this position is expected to obtain an annual salary increase, provide the reason and include documentation to justify the increase.

Provide a personnel budget breakdown on the following:

Breakdown of wages requested for each position.

Example 1: 1,900 hours x $20.00/hour = $38,000
Example 2: 2,080 hours x $18.75/hour = $39,000

Breakdown of fringe benefits requested for each position. In the example, note how fringe benefits are appropriately pro-rated based on the amount of state dollars requested. Only include basic fringe benefits and provide details explaining each benefit requested. Consider the following: Health Insurance @ $6,000 per year/single coverage; FICA @ .0765 of total salary, etc.

Example 1: $38,000 x .0765 (FICA) = $2,907 + $6,000 (health insurance) = $8,907
Example 2: $39,000 x .0765 (FICA) = $2,984 + $6,000 (health insurance) = $8,984

Category B – Consultants and Contracts: Funds in this category should reflect programs/services contracted out to individuals or agencies. If the agency does not directly operate the program, but relies on another entity to run the entire program, the whole budget is shown as a contract. There must be a current legal contract between the lead agency and the contractor. Only utilize one table (Contract Fee for Service or Personnel Table [Non-Agency Employees]) for each request. IMPORTANT – The Agency is fiscally responsible and must ensure all funds are spent properly by all contracted programs/services. Consultants and Contracts must adhere to the federal guidelines of the maximum rate of $81.25/hour or $650/day. The rate for independent consultants must be reasonable and consistent with that paid for similar services in the market. Lodging, meals, and travel costs should be included in the daily rate, prohibiting additional charges above the full daily rate. Subgrantees must adhere to Nebraska Revised Statute §23-3108. All other entities must follow their written procurement process and if a process is not in place, then the entity must use Nebraska’s procurement process governed by DAS.

Contract Fee for Service Table: Use this table for independent contractors who provide service for a flat fee rate.

Service Type – List the type of service being requested such as tracker, electronic monitoring, mediation, counseling, presenter, etc.
Provider Name – List the agency or contractor responsible for providing service type.
Rate – list the dollar amount that is being requested either hourly or daily.
Number of Hours/Days – List the amount of hours or days this service is being requested. Then check the box to denote whether the rate is being charged either by the hour or day.

Amount Requested – List the amount that is being requested in this box. Multiply the rate by the number of hours/days.
Applicant’s Match – List the dollar amount being matched by the county/tribe.
Total cost – List the total project cost which is the sum of the amount requested and the applicant’s match.

Personnel Table (Non-Agency): All positions being requested that are not directly funded by the agency will be listed in this table. These positions are considered “consultants/contracts” by the Nebraska Crime Commission. This table is exactly the same as the Personnel Table in Category A; therefore, refer to those same instructions.

Personnel Table (Non-Agency) Budget Breakdown: Refer to the instructions outlined for Category A – Personnel Budget Breakdown. Expectations are the same for positions being requested in the Personnel category for agency employees and positions being requested in the Consultants/Contracts category for non-agency employees.

Travel Expenses of Consultant/Contract: All travel requests will abide by the policies and procedures of the Nebraska Crime Commission and the Nebraska Department of Administrative Services. Currently, out-of-state travel is unallowable. In-state travel is limited to mission critical initiatives. If the out-of-state travel ban is removed in the
future, subgrantees will submit an Out-of-State Travel Request form at least 6 weeks prior to travel. Copy the travel expenses form and complete it for each travel purpose. Rates for meals and lodging are listed on the General Services Administration website (GSA) and are subject to change every year on October 1. *All travel expenses listed below are reimbursed for actual expenses incurred within allowable rates only.*

Travel Purpose – List the purpose funds are being requested for travel.

Type of Travel – Check whether the travel is within your community (local) or in-state. Currently, out-of-state travel is unallowable.

Justification for Travel – Provide an explanation for this travel request and how it will benefit youth being served by programs and services in the community. If this travel request is for administration, provide an explanation for this travel request and how it will benefit the community and youth being served. Explain how this request aligns with the funding purpose listed in this Request for Application.

Position(s) which will be traveling for this purpose – List the positions that will be traveling for the purpose stated.

Cost breakdown:


Airfare – Air travel should be utilized when it is more economical than surface transportation. Reimbursement for commercial air travel will be limited to “coach” fare. Airfare that exceeds $500 must obtain written approval by the Juvenile Services Administrator.

Lodging – Available for reimbursement the night before an activity begins through the night before an activity ends. Rates must not exceed those listed for the location of travel which is found on the General Services Administration (GSA) website: http://www.gsa.gov/portal/category/100120

Meals – Rates must not exceed those listed for the location of travel which is found on the General Services Administration (GSA) website: http://www.gsa.gov/portal/category/100120. Additionally, incidentals are not reimbursable through this grant. Breakfast, lunch, and dinner are allowed based on the following set of guidelines:

Tips are not to exceed 20% of the actual allowable cost.
Receipts must be separate for each individual, with the exception of multiple youth receiving meals in the same establishment.
Receipts must be itemized.
Alcohol must not be listed on the receipt.
If meals are provided at a conference, reimbursement for additional meals or as a replacement will not be reimbursed unless there are extenuating circumstances.
Allowable timeframe to request reimbursement for meals when traveling overnight:
Breakfast: When individual leaves for overnight travel at or before 6:30 a.m.
Lunch: When individual leaves for overnight travel at or before 11:00 a.m. or returns from overnight travel at or after 2:00 p.m.
Dinner: When individual returns from overnight travel at or after 7:00 p.m.
One-day travel: Breakfast shall be reimbursed when an individual leaves before 6:30 a.m. Dinner shall be reimbursed when an individual returns after 7:00 p.m. Lunch is not reimbursed for one-day travel.

Other – The following fees are reimbursable travel:
Luggage Fees – One checked bag is reimbursable. The Crime Commission is not
responsible for additional fees incurred for exceeding the maximum weight limitations for standard luggage fees.

Private Transport – Must be reasonable and comparable to public transportation if available. Several forms of private transport include Uber, Lyft, taxi, etc. Tips are not to exceed 20% of the bill.

Public Transport – Metro, bus, train, ferry, trolley, subway, etc.

Rental Car – Only allowable if written approval is obtained by the Administrator of Juvenile Services Program. A cost analysis will need to be submitted which details that renting a car is less expensive than utilizing public transportation from the airport to the lodging facility.

Parking – When utilizing air travel, parking costs for a vehicle are reimbursable for only the necessary days of travel. Parking costs for personal travel are the responsibility of the traveler. The parking option utilized must be economical and comparable to the other parking options surrounding the airport.

Operating Expenses of the Consultant/Contract Table: See “Funding Limitations” in this document to receive guidance on unallowable/allowable operating expenses. Complete all blanks in the table when requesting funds for operating expenses to include the rate per month, amount requested, applicant’s match, and total cost.

Operating Expenses Budget Breakdown:

If you are requesting funds for educational materials, list the name and purpose for each material: List the name or title of the educational materials being requested. Additionally, list why this specific educational material is utilized for the youth being served.

Provide research that supports the selection of the educational materials: List any information or resources that were utilized to choose the educational materials that are being listed. Grant reviewers desire to understand the reason and method used when deciding to use a specific educational material.

Explain how each operating expense listed above will benefit a program or service listed in this grant application: There are several operating expenses that are allowable and an explanation is needed for each request for this question. For example, if incentives for youth are being requested, then explain how purchasing incentives has benefited that particular service or program. What has been witnessed as a result of purchasing incentives for youth? Did their attendance increase? Did their grades increase? If so, what data or information was used to support the purchase of these incentives?

Provide a breakdown of costs for each line item above: Answer this question for all requests in the operating expenses table. For example, if incentives for youth are being requested at a rate of $500/month in the operating expenses table, this does not provide a detailed breakdown. Therefore, for this question, a breakdown would be provided such as: $50 incentives for 10 youth per month = $500/month.

Category B – Consultants and Contracts Total: Enter the total amount requested for consultants/contracts to include contract fees, personnel fees, travel fees, and operating fees. Place them in the appropriate category and provide the applicant’s match.

Category C – Operating Expenses: See “Funding Limitations” in this document to receive guidance on unallowable/allowable operating expenses. Complete all blanks in the table when requesting funds for operating expenses to include the rate per month, amount requested, applicant’s match, and total cost.
Operating Expenses Budget Breakdown: Refer to the operating expenses budget breakdown outlined in Category B – Consultants/Contracts, as this section adheres to the same set of guidelines.

Section V: Activity Timeline/Goals, Objectives, and Performance Indicators

Goals: The goal for the project is the ultimate outcome desired. These are broad based, but realistic and achievable. There is generally one goal for a specific grant project.

Measurable Objectives:

Measurable objectives reflect how your project will assist in reaching the stated goal(s). They also address the problem(s) identified and documented in the Problem Statement as well as the identified needs.

A measurable objective is something you are going to do, utilizing the grant funds, by a certain amount (measurable) within a certain time period. Objectives must be measurable.

Measurable objectives always use the words to increase, to decrease, or to maintain. Do not use words such as to provide, to train, to establish in measurable objectives. These are activity statements. Once you have written an objective, ask yourself if it allows you to measure something.

A project will normally have one to three objectives for each goal. Remember, most projects have one broad based overall goal.

To help you in developing measurable objectives, review your project’s activities and ask yourself what statistical data will you gather to prove your project is working? You don’t need to be overly detailed in statistical data, but focus on three to five things to measure which will prove your project is making a difference and works. These will be your Performance Measures or Indicators for your project and will be used as part of your project’s report to the Crime Commission. Also, check your objectives to make sure you have objectives specific to the funds requested.

EXAMPLE: To increase the number of youth participating in Life Skills training course (to do something) from 0 to 100 (by a certain amount) within a 12-month period (within a certain time frame).

The measurable objective above relates to a new program. The baseline number is zero because the program did not exist in the previous year.

If you were applying for funds to expand or enhance an existing program, the objective may read as follows.

EXAMPLE: To increase the number of youth participating in Life Skills training course (to do something) from 100 to 120 or 20% (by a certain amount) within a 12-month period (within a certain time frame).

Baseline Statistics:

How do you know what you’re starting number or measure will be for your measurable objectives? Baseline Statistics are the statistics for the most current year stated in the Problem Statement which documents the problem(s). This is a good test to see if the statistics in the Problem Statement are relevant in documenting the stated problem or problems. If you identify something, which needs to be measured in the Performance Indicators, check your statistics in the Problem Statement to determine if you need to add statistical data. Also ask yourself if these statistics are key in
documenting the problem and will they help in showing the success of your program. There may be numerous statistics you can gather, but you need to determine which ones are the most important.

**Performance Indicators:**

Performance Indicators are the data, which will be collected during your project to measure each objective and will show if the program is successful. Performance Indicators are in direct relationship to the baseline data stated in the Problem Statement. Ask yourself what statistical data will show if your program is successful.

**Section VI: Memorandums of Understanding**

For agencies applying as a group, submit a current copy of an MOU signed by each participating board chair or director commitment to pool their Office of Violence Prevention funds to accomplish the project(s) in this application.

**Section VII: Required Forms**

Read all required forms carefully and have them signed by the authorized official (lead board chair or director) for the grant application.
# APPENDIX A

## Risk and Criminogenic Need Factors

<table>
<thead>
<tr>
<th>INDIVIDUAL</th>
<th>Protective Factors and Assets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug/Alcohol use</td>
<td>Positive attitudes, values, and beliefs</td>
</tr>
<tr>
<td>Learning disability</td>
<td>High personal drive/self-esteem</td>
</tr>
<tr>
<td>Anxiety/depression</td>
<td>Positive mental, physical, and emotional health</td>
</tr>
<tr>
<td>Mental health disorder(s)</td>
<td>Use of positive coping skills</td>
</tr>
<tr>
<td>Antisocial attitudes</td>
<td>Well-developed communication skills</td>
</tr>
<tr>
<td>Sensation seeking</td>
<td>Self-regulation/Impulse control</td>
</tr>
<tr>
<td>Defiance of authority</td>
<td>Positive attitudes/relations with authoritative figures</td>
</tr>
<tr>
<td>Lack of concern for others</td>
<td>Compassion for others</td>
</tr>
<tr>
<td>Inappropriate use of time</td>
<td>Constructive use of time (youth programs, athletics, etc.)</td>
</tr>
<tr>
<td>Previous victimization</td>
<td>Problem-solving skills</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FAMILY</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of supervision</td>
<td>Adequate parental monitoring</td>
</tr>
<tr>
<td>Lack of discipline</td>
<td>Consistent discipline</td>
</tr>
<tr>
<td>Low parental warmth</td>
<td>Positive student-parent bond</td>
</tr>
<tr>
<td>Parental hostility</td>
<td>Language-based discipline</td>
</tr>
<tr>
<td>Abusive parent(s)</td>
<td>Positive adult role models</td>
</tr>
<tr>
<td>Parental substance use</td>
<td>Clear expectations of prosocial behaviors/values</td>
</tr>
<tr>
<td>Poor prenatal and early childhood health</td>
<td>Healthy prenatal and early childhood care</td>
</tr>
<tr>
<td>Family violence</td>
<td>Supportive adult(s) within the home</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>EDUCATION/COMMUNITY</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Truancy</td>
<td>Regular attendance and engagement in school</td>
</tr>
<tr>
<td>Low achievement</td>
<td>High academic standards</td>
</tr>
<tr>
<td>Low attachment</td>
<td>Positive teacher relationships</td>
</tr>
<tr>
<td>Low literacy</td>
<td>Access to academic support</td>
</tr>
<tr>
<td>High crime neighborhood</td>
<td>Access to physical and mental healthcare</td>
</tr>
<tr>
<td>Disenfranchised neighborhood</td>
<td>Community values youth</td>
</tr>
<tr>
<td></td>
<td>Strong neighborhood attachment</td>
</tr>
</tbody>
</table>

### Positive peer relationships/safe social group

**Resources:**