



**STATE OF INDIANA**



Eric J. Holcomb, Governor  
Devon McDonald, Executive Director

## **2020-2021 Sexual Assault Victims Assistance Fund (SAVAF)**

### **Request for Proposals**

The Indiana Criminal Justice Institute (ICJI) is now accepting applications for the 2020-2021 SAVAF Program. This grant is being released through the IntelliGrants system at [www.intelligrants.in.gov](http://www.intelligrants.in.gov). All applications must be submitted online through this system.

Applicants must be registered in IntelliGrants in order to access the electronic application.

Applications must be submitted via IntelliGrants on or before

**11:59 P.M. (ET) on Tuesday, September 3, 2019**

Applicants are strongly encouraged to submit applications 72 hours prior to the deadline.

**Award Period: January 1, 2020 – December 31, 2021**

**Approximately \$3,000,000.00 funding available for two years**

**With 10-20 expected awards.**

For technical assistance with submitting an application, contact the Helpdesk at [CJIHelpDesk@cji.in.gov](mailto:CJIHelpDesk@cji.in.gov). Helpdesk hours are Monday – Friday 8:00 am to 4:30 pm ET, except State holidays.

*ICJI is not responsible for technical issues with grant submission within 48 hours of grant deadline.*

For assistance with any other requirements of this solicitation, please contact the Victims Services Division of the Indiana Criminal Justice Institute.

## **PROGRAM PURPOSE AND BACKGROUND**

The purpose of the Sexual Assault Victim Assistance Fund (SAVAF) is to (1) establish and maintain rape crisis centers, (2) enhance services provided by existing rape crisis centers, and (3) develop, implement, and expand trauma informed sexual assault services. The SAVAF was established pursuant to *Indiana Code 5-2-6-23* and is funded by the collection fees assessed under *IC 33-37-5-23*. Sexual violence has been identified as an emerging public health issue, and addressing the issue from birth and throughout the life span through comprehensive, trauma-informed, sexual assault services has been an area of need within the state, particularly in areas of the state where minimal sexual assault services are provided. Please be aware that newly developed programs must be operational, or show substantial progress towards becoming operational within 90 days.

## **ELIGIBILITY**

Nonprofit, nongovernmental rape crisis centers; other state, local public, and nonprofit agencies such as mental health or counseling centers or other programs that have staff specifically trained to serve victims of sexual assault and Governmental entity rape crisis centers. In the case of a governmental entity, the entity may not be part of the criminal justice system (such as a law enforcement agency) and must be able to offer a comparable level of confidentiality as a nonprofit entity that provides similar victim services.

## **FUNDING REQUIREMENTS**

- Applicants are required to provide programs and services consistent with the statute in Indiana Code 5-2-6-23
- Applicants are required to comply with best practice standards and provide services to victims in strength-based and trauma informed manners.
- Applicants are encouraged to follow the Rape Crisis Center Service Standards set forth by the Indiana Coalition to End Sexual Assault.
- Applicants are required to be in good standing with the Indiana Secretary of State, the Indiana Department of Revenue and Indiana Department of Workforce Development.
- All applications must include a Data Universal Numbering System (DUNS) number in their application.
- Applicants are required to be an active registrant on <https://www.sam.gov/SAM/>
- Applicants are required to submit all progress reports, fiscal claims, and supporting documentation in order to be reimbursed for funds spent.
- Applicants must be aware that they may be subject to audit by the Indiana State Board of Accounts and monitoring visits by ICJI staff.

## DEFINITION

For purposes of this solicitation please be cognizant of the following definition:

- **Rape Crisis Center:** An organization that provides a full continuum of services, including hotlines, victim advocacy, and support services from the onset of the need for services through the completion of healing, to victims of sexual assault.
- The core components of a Rape Crisis Center include:
  - **24-Hour Rape Crisis Hotline:** a telephone service available on a 24-hour basis to connect victim/secondary victims of sexual violence to a trained advocate;
  - **24 hour On-Call Advocate** who will go on-site to the hospital for victims of sexual assault: an immediately available 24-hour personal response provided by a trained advocate with the goal of helping victims/secondary victims navigate the medical/healthcare system by ensuring that they receive appropriate and accurate information and resources to make decisions about their healthcare needs
  - **Criminal Justice/ Legal Advocacy** for victims of sexual assault: individuals acting on behalf of and in support of the victim/secondary victim navigating the legal system by ensuring that the victim's questions are answered, interests are represented, and rights upheld. This includes attending court with the victim for support if requested by the victim, attending meetings/appointments, etc.;
  - **Information and Referrals** for victims of sexual assault: providing timely, relevant contact information to a victim/ secondary victim for community resources that address the need(s) of the victims that your agency is not equipped to effectively address, which may include professional therapy, legal services, or services indirectly related to sexual violence;
  - **System Coordination, Collaboration, and Case Management** for victims of sexual assault: developing and maintaining professional partnerships with service providers, organizations, and groups in the community that serve or otherwise impact victims Partnerships may be formal , or informal and are necessary to ensure a victim's access to the variety of both core and enhanced services available in the community
  - **Community Awareness and Outreach** for sexual assault: providing accurate information about sexual violence, and individual, organizational, and societal strategies that promote the elimination of sexual violence in the community; and ensuring the community is aware of your agency, its services, and how to access those services.
  - **Support Groups** for victims of sexual assault: victim and/or secondary victims meeting in a safe, supportive, non-judgmental environment on a regularly scheduled basis to share information, relate personal experiences, share coping strategies and techniques for problem solving, listen to and accept others' experiences and feelings resulting from sexual violence victimization, and provide support through the healing process.
  - **Professional Counseling or Therapy** for victims of sexual assault (recommended and encouraged but may be referred out): a professional relationship between a qualified, licensed professional and a client (individual, family, or group) that utilizes therapeutic modalities to aid in the healing process.

- **Prevention Education** (recommended and encouraged): culturally appropriate, structured activities/strategies implemented in a variety of settings that promote primary prevention and address the root causes of sexual violence.
- **Trauma Informed Sexual Assault Services:** victim centered care, acute medical care, or forensic medical services that address the physical, psychological and emotional needs of sexual assault victims for the duration of their life span.
- **Victim Advocacy:** The practice of supporting and assisting a victim to define needs, explore options, and ensure rights are respected within any system with which the victim interacts.

## PROGRAM GOAL

To provide a comprehensive statewide network of providers to respond to the needs of victims of sexual assault.

## OBJECTIVES OF THE PROGRAM

To establish, expand, improve, services and responses to victims of sexual assault.

To establish, implement, expand, and maintain trauma informed sexual assault services.

## AVAILABILITY OF FUNDS

Awards for 2020-2021 are available through this solicitation for a **(24) twenty-four month period** of funding from January 1, 2020 through December 31, 2021. State appropriations are used to support these grant activities. If the Indiana legislature makes modifications to the fund that information will be communicated to sub-recipients pursuant to the laws and rules of the State of Indiana.

## PROGRAM BUDGET REQUIREMENTS

- **Organizational management and infrastructure support:** No more than twenty percent (20%) of an applicant's total requested grant funds may be allocated toward providing organizational management and infrastructure support. Activities may include, but are not limited to: governance, internal controls and policies, compliance and monitoring, fiscal management, and human resources.
- **Overtime:** If you plan to request that staff overtime costs be reimbursed with SAVAF grant funds, you must include that request in a separate line item in the budget detail section with a computation that includes the overtime rate and approximate number of hours to be reimbursed throughout each year of the grant for each direct service position that overtime is anticipated. Programs who choose to request funds for staff overtime must also inform their ICJI grant manager in writing prior to the start of their grant of their intention to do so.
- **Two years of funding:** Due to the grant utilizing two years of State funding, the budget needs to separate year 1 (2020) and year 2 (2021) by line item if the cost is being requested for both years.

- **MATCH:** is not required for this application.

## **APPLICATION REVIEW PROCESS**

All applications will be reviewed on the basis of the following criteria:

- Eligibility;
- Quality of proposal;
- Applicant's assessed risk level;
- History of agency's grant management and financial management;
- Compliance with past ICJI reporting requirements

If your program has previously received funds from the Victims' Services Division, your program's past performance, particularly in terms of financial management, reporting, and compliance with prior year grant requirements, will be given consideration in the review process.

## **SELECTION PROCESS**

Applications will be reviewed by ICJI staff in conjunction with the Indiana Coalition to End Sexual Assault, the statewide Center for Disease Control (CDC) recognized Sexual Assault Coalition. Recommendations for funding will be submitted to the Victim Services Subcommittee of the ICJI Board of Trustees for consideration. The subcommittee will make recommendations for funding and present their recommendations to the ICJI Board of Trustees for final decisions.

## **AWARD NOTIFICATION**

Applicants awarded SAVAF funding will be notified electronically of the funding decision within 72 working hours of the Board of Trustees meeting.

## **INELIGIBLE ACTIVITIES AND ITEMS**

Ineligible activities and cost items include, but are not limited to the following:

- Direct monetary funds given to the client such as cash, gift cards or checks written to the client
- Food and beverages with the exception of food and beverages for the sexual assault victim on an emergency basis.
- Lobbying and/or fundraising
- Purchase of Real Estate
- Construction
- Physical Modification to buildings, including minor renovations (such as painting or carpeting)

- Calculation and reimbursement for mileage, per diem, and lodging cannot exceed state rates. Check with the Indiana Department of Administration at <https://www.in.gov/idoa/2459.htm>
- Vehicle Purchase
- Needs assessments, surveys, studies
- Perpetrator rehabilitation/counseling

## **FUNDING RESTRICTIONS– Activities that Compromise Victim Safety and Healing**

Grant funds may not be used to support activities that could compromise victim safety/healing.

The following activities have been found to jeopardize victim safety, deter or prevent physical or emotional healing for victims, or allow offenders to escape responsibility for their actions, therefore in planning a SAVAF proposal please ensure that these activities **are not included**.

- Procedures or policies that exclude victims from receiving safe shelter, advocacy services, counseling, and other assistance based on their actual or perceived age, immigration status, race, religion, sexual orientation, gender identity, mental health condition, physical health condition, criminal record, work in the sex industry, relationship to the perpetrator, or the age/gender of their children.
- Procedures or policies that compromise the confidentiality of information and privacy of persons receiving services.
- Crafting policies that deny individuals access to services based on their relationship to the perpetrator.
- Developing materials that are not tailored to the dynamics of sexual assault.
- Crafting policies or engaging in practices that impose restrictive conditions to be met by the victim in order to receive services (e.g., counseling, seeking an order for protection, requiring victim to come into shelter for services).
- Crafting policies that require the victim to report the sexual assault to law enforcement.

## **MONITORING**

All grant awards will be monitored by a grant manager using any or all of the following methods: document review, desk reviews, and programmatic site visits. Additionally, the grant manager will review all submitted reports for timeliness, accuracy, supporting documentation, and completion of project goals and objectives. The ICJI Compliance Monitoring Team may also perform a site visit to ensure ongoing compliance.

## **FISCAL AND PROGRAM REPORTING**

Reporting to the State shall be completed on a quarterly or monthly basis via IntelliGrants. Applicants must choose to submit fiscal claims on a monthly or quarterly basis. Reports must be submitted within 20 days of the end of each reporting period, with the exception of the final fiscal claim, which must be submitted within 30 days of the grant's end date. This decision must be made at the grant agreement phase.

Applicants cannot deviate from their chosen reporting schedule once the grant agreement has been executed. This is a reimbursement grant therefore funds can't be reimbursed until verification of expended funds is provided.

Failure to submit any report in a timely fashion may be considered a material breach, at the discretion of the State. A timely fashion is defined as within 20 calendar days of the end of each quarter/month or as extenuating circumstances allow.

Delinquent, inaccurate, incomplete, or fraudulent reports will be addressed by ICJI. ICJI's remedies include, but are not limited to: identifying the Grantee as high risk, de-obligated funding, disqualification from future funding and/or referral to the State Office of Inspector General. The recipient agrees to comply with any additional requirements that may be imposed during the grant performance period if the State determines that the recipient is a high-risk Applicant or Grantee.

## PERFORMANCE MEASURES

Below is a list of the performance measures that will be included in SAVAF reports at the end of each reporting period:

### All programs need to provide the following information:

Type of services provided this period (selected from checklist including: legal advocacy, information and referral, case management, community awareness and outreach, support groups, therapy, prevention education or victim advocacy.

- Type of work your agency has done with the Indiana Coalition to End Sexual Assault this period (selected from checklist) including: technical assistance, webinar or in-person training.
- The number victims of sexual violence served (not the entire agency) broken out by gender and age.
- Number of sexual assault **hotline** crisis calls received.
- The number of victims provided services through **individual counseling** hours broken out by gender and age.
- Provide information on type of **support groups** provided this period.
- The number of victims provided services through **support group** broken out by gender and age.
- The number of victims provided **acute medical or forensic medical services** broken out by gender and age.
- The number of meetings held with victims for **information and referral**.
- If your agency is a residential provider, provide the number of sexual assault victims in your **shelter**.

## **GRANT ACCOUNTING SYSTEMS**

All grant sub recipients are required to establish and maintain grant accounting systems and financial records to accurately account for funds awarded. Funds must not be comingled and must be accounted for on an individual basis by the sub-grantee.

## **LINGUISTIC ACCESSIBILITY**

Subgrantees are required to take reasonable steps to provide services to persons with limited English proficiency (i.e. individuals who do not speak English as their primary language and who have a limited ability to read, write, speak, or understand English, including deaf and hard of hearing persons).

## **BACKGROUND CHECKS**

Subrecipients are required to perform background checks on all employees and volunteers who work directly with victims/survivors. At a minimum, agencies should complete background checks through the Indiana State Police. ICJI will verify background checks have been completed during on-site and/or desk review monitoring.

## **GRANT AMENDMENTS, MODIFICATION AND EXEMPTIONS**

An amendment would include any modification to the grant agreement or any of its terms or conditions. Any amendment to the grant agreement must be submitted in writing and approved by the State prior to the implementation of the amendment. Amendments include, but are not limited to, changes to the Project Budget or scope of the Project, extensions to the period of performance, changes concerning an authorized official. Amendments require strong justification and supporting documentation. Furthermore, the amendment must comply with all state laws, rules, and regulations.

If the Applicant wishes to seek an exemption to a state law, regulation, or rule, such request must be submitted in writing and approved by the State prior to the Applicant obligating or expending any grant funds related to the desired exemption.

## **STATE LAWS AND REQUIREMENTS**

Recipients of grant funds from the State are required to adhere to all state laws concerning the receipt and use of grant funds from federal and state funding sources. Those laws include, but are not limited to, the laws set forth below.

### **➤ State Ethical Requirements.**

The Applicant and its agents shall abide by all ethical requirements that apply to persons who have a business relationship with the State as set forth in IC §4-2-6, *et seq.*, IC §4-2-7, *et seq.* and the regulations promulgated thereunder. If the Applicant has knowledge, or would have acquired knowledge with reasonable inquiry, that a state officer, employee, or special state appointee, as those terms are defined in IC § 4-2-6-1, has a financial interest in the grant, the Applicant shall ensure compliance with the disclosure requirements in IC § 4-2-6-10.5 prior to the execution of this grant. If the Applicant is not familiar with these ethical requirements, the Applicant should refer any questions to the Indiana State Ethics Commission or visit the Inspector General's website at <http://www.in.gov/ig/>. If the Applicant or its agents violate any applicable ethical standards, the State may, in its sole discretion, terminate this grant

immediately upon notice to the Applicant. In addition, the Applicant may be subject to penalties under IC §§4-2-6, 4-2-7, 35-44.1-1-4, and under any other applicable laws.

➤ **Indiana Secretary of State.**

Pursuant to Indiana Code Title 23, applicant must be properly registered and owes no outstanding reports to the Indiana Secretary of State, if applicable.

➤ **Telephone Solicitation of Consumers; Automatic Dialing Solicitations.**

As required by Indiana Code §5-22-3-7,

(1) the Applicant and any principals of the Applicant certify that

(A) except for de minimis and nonsystematic violations, it has not violated the terms of:

(i) IC §24-4.7 [Telephone Solicitation Of Consumers];

(ii) IC §24-5-12 [Telephone Solicitations]; or

(iii) IC §24-5-14 [Regulation of Automatic Dialing Machines];

in the previous three hundred sixty-five (365) days, even if IC § 24-4.7 is preempted by federal law; and

(B) the Applicant will not violate the terms of IC §24-4.7 for the duration of this Grant Agreement, even if IC §24-4.7 is preempted by federal law.

(2)The Applicant and any principals of the Applicant certify that an affiliate or principal of the Applicant and any agent acting on behalf of the Applicant or on behalf of an affiliate or principal of the Applicant, except for de minimis and nonsystematic violations,

(A) has not violated the terms of IC §24-4.7 in the previous three hundred sixty-five (365) days, even if IC §24-4.7 is preempted by federal law; and

(B) will not violate the terms of IC §24-4.7 for the duration of the grant agreement even if IC §24-4.7 is preempted by federal law.

➤ **Drug-Free Workplace Certification.**

Applicant hereby covenants and agrees to make a good faith effort to provide and maintain a drug- free workplace as required by Executive Order 90-5, April 12, 1990. Executive Order 90-5 applies to all individuals and private legal entities who receive grants or contracts from State agencies. This clause was modified in 2005 to apply only to Contractor's employees within the State of Indiana and cannot be further modified, altered or changed. Applicant will give written notice to the State within ten (10) days after receiving actual notice that the Applicant, or an employee of the Applicant in the State of Indiana, has been convicted of a criminal drug violation occurring in the workplace. False certification or violation of the certification may result in sanctions including, but not limited to, suspension of grant payments, termination of the grant and/or debarment of grant opportunities with the State of Indiana for up to three (3) years.

In addition to the provisions of the above paragraphs, if the total amount set forth in this Grant Agreement is in excess of \$25,000.00, the Applicant certifies and agrees that it will provide a drug- free workplace by:

- A. Publishing and providing to all of its employees a statement notifying them that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for

violations of such prohibition; and

- B. Establishing a drug-free awareness program to inform its employees of (1) the dangers of drug abuse in the workplace; (2) the Applicant's policy of maintaining a drug-free workplace; (3) any available drug counseling, rehabilitation, and employee assistance programs; and (4) the penalties that may be imposed upon an employee for drug abuse violations occurring in the workplace; and
- C. Notifying all employees in the statement required by subparagraph (A) above that as a condition of continued employment the employee will (1) abide by the terms of the statement; and (2) notify the Applicant of any criminal drug statute conviction for a violation occurring in the workplace no later than five (5) days after such conviction; and
- D. Notifying in writing the State within ten (10) days after receiving notice from an employee under subdivision (C)(2) above, or otherwise receiving actual notice of such conviction; and
- E. Within thirty (30) days after receiving notice under subdivision (C)(2) above of a conviction, imposing the following sanctions or remedial measures on any employee who is convicted of drug abuse violations occurring in the workplace: (1) take appropriate personnel action against the employee, up to and including termination; or (2) require such employee to satisfactorily participate in a drug abuse assistance or rehabilitation program approved for such purposes by a federal, state or local health, law enforcement, or other appropriate agency; and
- F. Making a good faith effort to maintain a drug-free workplace through the implementation of subparagraphs (A) through (E) above.

➤ **Employment Eligibility Verification.**

As required by IC §22-5-1.7, the Applicant hereby swears or affirms under the penalties of perjury that:

- A. The Applicant has enrolled and is participating in the E-Verify program;
- B. The Applicant has provided documentation to the State that it has enrolled and is participating in the E-Verify program;
- C. The Applicant does not knowingly employ an unauthorized alien; and
- D. The Applicant shall require its contractors who perform work under this Grant Agreement to certify to Applicant that the contractor does not knowingly employ or contract with an unauthorized alien and that the contractor has enrolled and is participating in the E-Verify program. The Applicant shall maintain this certification throughout the duration of the term of a contract with a contractor.

The State may terminate for default if the Applicant fails to cure a breach of this provision no later than thirty (30) days after being notified by the State.

## **SAVAF Application Outline (as it appears in IntelliGrants)**

Below is a general outline of the SAVAF application. The questions and information requested in this document are similar to what you will encounter in the application. In order to assist you in preparing for the online application, this outline has been provided. You may use this outline to prepare answers for some, or all, of the provided questions.

### **I. Contact Information**

- a. Program Location
- b. Program Director
- c. Fiscal Agent
- d. Contact

### **II. Project Information**

- a. Enter the project title
- b. Enter a short project summary
- c. Enter the amount of funding requested
- d. Enter the Agency's SAM expiration date
- e. Answer whether the applicant organization has been audited

### **III. Programmatic Information**

- a. Current Award Amount
- b. Who is responsible for completing this application? (Name, email address)
- c. Identify your type of Agency below. Please mark all that apply.
  1. Sexual Assault Service Provider
  2. Community Mental Health Organization
  3. Domestic Violence Shelter
  4. Dual- Multi-Service Organization
  5. Rape Crisis Center
  6. Other
- d. SAVAF Grant funds must be used to address specific purpose areas. These purpose areas are listed below in no particular order. Review the information and mark the box(es) next to the purpose area(s) that most appropriately matches the activities/ services for which you are requesting funding.
  1. Crisis Intervention: direct service to victims, 24 hour on-call response to the hospitals, 24 hour crisis line
  2. Advocacy services for victims of sexual violence, offering assistance in developing safety plans, supporting efforts of victims to make decisions related to their ongoing safety and well-being.
  3. Counseling services for victims of sexual violence provided by a licensed and/or Master's level counselor or therapist.
  4. Offering individual and group counseling, support groups and referral to community-based services to assist in recovering from the effects of sexual assault.
  5. Expand, develop or implement trauma informed services for sexual assault victims.

- e. Is your organization Faith Based?
- f. Identify which county or counties your proposed program will serve.
- g. If grant or match funds will be used to provide staff located in an office(s) in other counties (ex. Satellite offices), identify each county and the services to be provided in each county. If staff will not be located in other counties, enter N/A.
- h. If you are currently receiving SAVAF funds, how many victims did your program (not your entire agency) serve from January 1, 2018 through December 31, 2018? If you are not currently receiving SAVAF funds, please enter 0.
- i. How many victims do you anticipate your proposed program (not your entire agency) will serve January 1, 2020 to December 31, 2021?
- j. If your program already exists, provide a detailed description of the source(s) of the current dollars the agency is receiving to support the program.
- k. If the proposed program was established due to a recognized need in the community or to fill a gap in services, identify the need or gap.
- l. If the services of the proposed program are currently being offered at your agency, indicated the number of years your proposed program has been in existence.
- m. Please select whether this application is for a "Continuation" or "New" program.
- n. If continuation, give an overview of how your proposed program has met its goals and objectives during the current grant period and describe the resulting impact.
- o. If continuation, explain any challenges that prevented the successful completion of any goal or objective.

#### IV. Problem Statement and Analysis

- a. Please provide a clear and succinct summary of the problem to be addressed by this program. Your Problem Statement should be no more than one or two sentences.
- b. Please document the severity of the problem. Describe how the problem was discovered and the impact the problem has on the community. You must include any data as it is related to the nature of the local problem, compare to the problem statewide, include local trend data, and how the proposed program will assist in meeting community goals.
- c. How will the proposed program alleviate the stated problem?

#### V. Goals, Objectives, & Outcomes

- a. Provide the program's goal. The goal should be general, realistic, focused on what we will ultimately achieve, consistent with overall mission/purpose of agency.
  - i. **Hint** – The goals should directly address the problem identified in the Problem Statement.
  - ii. **Example** – The goal of the project is to trauma informed services to victims of sexual assault.
- b. Provide objectives that measure progress toward achieving the goal.
  - i. **Example** – By the end of the grant, we will provide trauma informed services to 90 victims of sexual assault.
- c. Provide at least 1 Outcome for EACH stated objective (outcomes

quantitatively measure program impact).

- i. **Example-** 90% of the victims served will report feeling supported through a satisfaction survey.

## **VI. Program Description**

- a. Please provide a detailed description of the full program to be implemented (what, who, where, why, when, and how)
  - i. What? – Describe the nature of the proposed program.
  - ii. Who? – Please specify and describe the target population(s), the parties responsible for implementing/administrating the proposed program, and any partners involved.
  - iii. Where? – Describe the location(s) where the program is to be administered as well as the geographical area served.
  - iv. Why? – Explain the rationale for the selection of the proposed program. Explain how the program will or has been incorporated into the ongoing operations of the agency/organization.
  - v. When? – Provide a detailed monthly program timeline for the proposed award period.
  - vi. How? – List all relevant resources, activities, and methodologies necessary for the implementation of the proposed program.

## **VII. Evidence Based/Best Practices**

- a. Indicate whether your program is evidence-based
- b. Identify the evidence-based program or best practice utilized for this program/project. (This should come from an outside source.)
- c. Name the source (website, publication, etc.) that identifies the selected model as evidence-based or a best practice.

## **VIII. Use of Volunteers**

- a. Indicate whether your funded project will utilize volunteers.
- b. Describe how volunteers will be utilized.
- c. Describe how volunteers are recruited, screened, and trained.

## **IX. Budget Forms**

- a. **Personnel**
  - i. Check the type(s) of personnel you wish to enter (salaried, hourly, pool, and volunteer).
  - ii. Complete the position title, name, fund type, employee type, annual salary, and percentage fields for each staff to be funded by this grant.

**b. Employee Benefits**

- i. Select the name of the employee, fund type, benefit type for each benefit for each employee to be funded by this grant, enter the benefit percentage, calculated annual cost of benefit, and enter the cost.

**NOTE:** Benefit Percentage is the percentage of the benefit type that the subgrantee is seeking reimbursement from grant funds or will be using as match.

**NOTE:** Calculated Annual Cost of Benefits is the annual monetary amount of the benefit type.

**c. Supplies & Operating Expenses**

**Supplies** are defined as tangible personal property having per unit acquisition threshold of less than \$500.

**Operating Expenses** are defined as daily costs that are required to support the normal everyday functioning of your program, such as utility bills, rent, or phone services.

- i. Enter each supply item requested, and select the fund type for that item. Then enter the number of units requested, as well as the price per unit and the percentage of the total cost proposed to be funded by the grant.
- ii. Enter each operating expense requested, select the fund type, and enter the total cost of that operating expense, as well as the percentage of the total cost proposed to be funded by the grant.

**d. Equipment**

Equipment is defined as tangible personal property (including information technology systems) having a useful life of more than one year, and a per unit acquisition threshold of \$500 or more.

- i. Enter each equipment item requested, select the fund type, and enter the number of units, price per item, and the percentage of the total cost proposed to be funded by the grant.

**e. Travel**

- i. Enter the number of travelers, select purpose of travel, enter location of travel, select travel expense, select fund type, enter the quantity of unit costs per traveler, enter the cost per day, item, or mile, and input the percentage proposed to be funded by the grant. **There should be one line item for each travel expense per trip.**
- ii. State approved rates must be used and can be found at <https://www.in.gov/idoa/2459.htm>

**f. Consultants and Contractors**

**Consultant** is defined as an individual or sole proprietorship who provides professional

advice or services needed to carry out the project or program.

**Contractor** is defined as a business organization that provides professional services via a contract needed to carry out the project or program.

- i. For consultants, enter the name, service provided, select the fund type, input hourly rate, enter number of hours, and enter percentage of total cost proposed to be funded by the grant.
- ii. For contractors, enter the name/position, service provided, select the fund type, enter in compensation, and percentage of total cost proposed to be funded by the grant.
- iii. Will there be travel expenses for the consultants and contractors?
  - a. If yes, is selected applicant will open a new budget form titled, Consultants and Contractors Travel form. Enter the number of consultants and contractors, select purpose of travel, enter location of travel, select travel expense, select fund type, enter the quantity of unit costs per traveler, enter the cost per day, item, or mile, and input the percentage proposed to be funded by the grant. **There should be one line item for each travel expense per trip.**

#### g. Program Income

- i. Select whether your program will generate income.
- ii. If you select yes, please answer:
  - a. The estimates amount of program income
  - b. How the program will generate income
  - c. What the program income will be used for

#### h. Budget Summary

- i. Review the requested costs by budget category and fund source.

### X. Budget Narrative

Be sure all items in the Budget Narrative are included in the Budget Detail, and be sure all items in the Budget Detail are in the Budget Narrative.

The Budget Narrative should include items that will be supported with **GRANT AND MATCH** funds, if match is required. Make sure your proposed items are allowable expenses. If items listed in the budget **are not** allowable, your grant funding may be reduced by that amount. Grant reviewers are not required to contact you for clarification. Any missing information in this section may disqualify that budget item for funding.

a. Please use the box provided to explain how funds will be utilized by the proposed program. If you are requesting an increase to a prior grant, please explain how the additional funds will enhance or expand the current program being funded.

**b. Personnel**

- i. Describe the roles and responsibilities for each position or attach detailed job description(s). If you attach a job description, enter "See Attached Job Description(s)" into the text box.
- ii. Describe how each position directly furthers the purpose of the program
- iii. If the position(s) funded with this grant have administrative duties, how do those duties directly impact the program?
- iv. For each position identified in the Budget Detail, please state the percentage of time each position will spend on grant funded activities.
- v. Does the positions receive funding from other sources?
  - i. If yes, identify, by position, the source and amount of other funds.

**c. Employee Benefits**

- i. Describe employee benefits that will be paid for each position(s) listed under Personnel.

**d. Travel (Including Training)**

- i. Describe why travel is necessary to the program.

**e. Equipment**

Equipment is defined as tangible personal property (including information technology systems) having a useful life of more than one year, and a per unit acquisition threshold of \$500 or more.

- i. How will purchasing equipment facilitate meeting your stated program goals and objectives?
- ii. If your agency is requesting more than one piece of equipment, please prioritize your request.

**f. Supplies & Operating Expenses**

Supplies are defined as tangible personal property having per unit acquisition threshold of less than \$500.

Operating Expenses are defined as daily costs that are required to support the normal everyday functioning of your program, such as utility bills, rent, or phone services.

How will the supplies and operating expenses facilitate meeting your stated program goals and objectives?

**g. Consultants (including contractual services)**

- i. Explain why consultant or contractual services are necessary.
- ii. Describe the nature of the contracted service(s).
- iii. What is the consultant or contractor's hourly rate?
- iv. What was the basis for the selection of the consultant or contractor?  
(ex. Open bidding, sole source, etc)
- i. Note: Any contracted services must be acquired in accordance with state procurement guidelines which may be found at: [www.in.gov/idoa/2944.htm](http://www.in.gov/idoa/2944.htm)

**h. Internal Controls**

- i. Describe your internal control system(s).
- ii. Internal controls are the policies, processes and systems implemented to provide assurances that your organization can comply with all rules, regulations, and laws governing this grant. Examples include: how does your organization account for grant funds, track programmatic achievements, maintain adequate records, or exercise control over the grant?

**XI. Certified Assurance & Special Provisions**

- a. The applicant, by selecting this checkbox, certifies that the statements in this grant are true and complete to the best of the applicant's knowledge and accepts, as to any grant awarded, the obligation to comply with any Indiana Criminal Justice Institute special conditions specified in the Grant Award.

**XII. Attachments**

**I. Total Agency Budget**

- a. If the applicant agency is a nonprofit, nongovernmental entity, please complete and upload the [Non-profit subgrantee basic budget](#). Be sure to complete both the Organizational tab and the Employee tab. This does not apply to units of government.

**II. Indirect Cost Rate**

- a. If the applicant agency has a federally approved indirect cost rate, ICJI will accept this rate. You must provide ICJI with a copy of the approval letter

showing the rate and effective date. Your detailed budget should reflect the items that the rate is to be applied to and a complete description of what your total indirect cost plan encompasses.

### III. Sustainability Plan

- a. Please attach a document detailing the Applicant's plan to maintain the program once the grant fund period expires.

### IV. Timeline

- a. Please attach a timeline for the completion of the Project and/or expenditure of the grant funds.

### V. Letters of Endorsement

- a. Please attach at least one letter of endorsement evidencing community support for the Applicant's program.

### VI. Miscellaneous

- a. **Completed and signed EEOP certification (REQUIRED)**
- b. **If applying for personnel, please include job descriptions.**
- c. Please attach other requested information if applicable.

Please reference IntelliGrant's Subgrantee User Manual for information on how to submit an application.

[https://www.in.gov/cji/files/IntelliGrants\\_User\\_Manual.pdf](https://www.in.gov/cji/files/IntelliGrants_User_Manual.pdf)