

Agency Name: Fannin County Children's Center
Grant/App: 2328201 **Start Date:** 9/1/2010 **End Date:** 8/31/2011
Fund Source: VX-General Victim Assistance – Direct Services Programs
Project Title: Children's Advocacy Center
Status: Application - Grant Review **Fund Block:** 2010

Eligibility Information

Introduction

The Office of the Governor (OOG) publishes funding opportunities, known as **Requests for Applications (RFA)**, through the Texas Secretary of State. Click [here](#) to visit the Secretary of State's website to locate the RFAs in the appropriate Texas Register issue. In addition, OOG requires all applicants and grantee organizations to adhere to the *Texas Administrative Code (TAC)* as adopted. Click [here](#) to view the current TAC, or click [here](#) to view the previous versions of the TAC.

Submission Process

When applying for a grant pursuant to an **RFA** published in the *Texas Register* by OOG, applicants must submit their applications according to the requirements provided in the **RFA**. OOG may also consider applications for grants that are not submitted pursuant to an **RFA**. Applicants will be selected in accordance with *1 TAC*, §3.7.

Selection Process

All applications submitted to OOG are reviewed for eligibility, reasonableness, availability of funding, and cost-effectiveness. For applications submitted pursuant to an **RFA**, the executive director will select a review group, COG, or other designee to prioritize the applications and submit a priority listing to the executive director, who will render the final funding decision. A review group may include staff members, experts in a relevant field, and members of an advisory board or council. For more information regarding the selection process, see *1 TAC*, §3.7.

Funding Decisions

All grant funding decisions rest completely within the discretionary authority of OOG. The receipt of an application for grant funding by OOG does not obligate OOG to fund the grant or to fund it at the amount requested. Neither the approval of a project nor any grant award shall commit or obligate OOG in any way to make any additional, supplemental, continuation, or other award with respect to any approved project or portion thereof. OOG makes no commitment that a grant, once funded, will receive priority consideration for subsequent funding. For more information regarding the application process, see *1 TAC*, §3.7 and 3.9.

Adoptions by Reference

All grantees receiving federal and state funds must comply with the applicable statutes, rules, regulations, and guidelines related to the funding source under which the grant is funded. In instances where both federal and state requirements apply to a grantee, the more restrictive requirement applies. For more information regarding grant funding, see *1 TAC*, §3.19.

Community Plans

Each community, consisting of a single county or a group of counties, must file with a COG a community plan that addresses the community's criminal justice priorities. A community plan should assess local trends and data; identify problems, resources, and priorities; develop effective strategies; and set goals and objectives. For more information regarding community plans, see *1 TAC*, §3.51.

Juvenile Justice and Youth Projects

Juvenile justice projects or projects serving delinquent or at-risk youth, regardless of the funding source, must address at least one of the priorities developed in coordination with the Governor's Juvenile Justice Advisory Board to be eligible for funding. For more information regarding these priorities, see *1 TAC*, §3.53.

Monitoring

OOG will monitor the activities of grantees as necessary to ensure that grant funds are used for authorized purposes in compliance with all applicable statutes, rules, regulations, guidelines, and the provisions of grant agreements, and that grantees achieve grant purposes. Grantees must make available to OOG or its agents all requested records relevant to a monitoring review. For more information regarding monitoring, see *1 TAC*, §3.2601.

Your organization's Texas Payee/Taxpayer ID Number:
17524612565001

Application Eligibility Certify:
Created on: 1/20/2010 9:14:18 AM By: Sandy Barber

Profile Information

Introduction

The **Profile Details** section collects information about your organization such as the name of your agency and project title, the geographic area your project will serve and information about your grant officials. Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct. In addition, you have a 2-

hour time limit for each tab where you will need to complete the information correctly and then click the **Save and Continue** button. There is a timestamp in the upper-right hand corner of the page that notes when you first clicked on the tab. From that point, you have 2 hours to complete the information on that tab correctly. If you do not complete the information correctly (for the required fields) and then you click on the **Save and Continue** button, you will be redirected to the eGrants Home Page. If this happens, your data will not be saved in the system. You may also choose to compose a message on this page for OOG to review. This can be done by typing in the **Notes By Grantee / OOG** message box.

Email Addresses & Grant Officials Information

Designating Grant Officials Within your Application:


Enter a valid and unique email address for each grant official and click the **Verify Email and Set Official to the Project** button. If you receive an error message regarding an email address, the grant official you are trying to assign to the project has not registered for a user account in eGrants. Please inform the agency's grant official or designee that they must log in to the [eGrants Home Page](#), and register for a user account. If you need technical assistance, please contact the [eGrants Help Desk](#) by email.

Updating Grant Officials on Active Grants:

To reassign a grant official - **Authorized Official, Financial Officer, Project Director, or Grant Writer** - to your grant project, ensure that the new official registers for a user account in eGrants *first*. Next, go to the Request.Adjustment tab and check the box indicating you would like to Designate a New Grant Official, provide a brief explanation for the change in the Grant Adjustment Justification box, and then click the 'Create Adjustment Request' button. This will open the Profile.Details tab allowing you to make the appropriate changes. After you have entered a valid email address for the new Official, go to the Certify.Adjustment tab and click on the 'Certify Adjustment' button to send your request to OOG for review. If your organization is designating a new Authorized Official, check your records to see if a revised Resolution is required. Upload the approved Resolution to your grant project on the 'Summary / Upload Files' sub-tab. If you need technical assistance, please contact the [eGrants Help Desk](#) by email.

Getting Started

On this tab you will notice a certain icon that is displayed.

-  = an **information** icon - this help icon is next to certain items that may need further explanation. Simply click and review the information provided in the pop up window.

Applicant Agency Name: Fannin County Children's Center

Project Title: Children's Advocacy Center

Division or Unit to Administer the Project: Children's Advocacy Center

Address Line 1: 112 West Fifth Street

Address Line 2:

City/State/Zip: Bonham Texas 75418

Payment Address Line 1: 112 W 5th St

Payment Address Line 2:

Payment City/State/Zip: Bonham Texas 75418-4365

Start Date: 9/1/2010

End Date: 8/31/2011

Regional Council of Governments(COG) within the Project's Impact Area: Texoma Council of Governments

Headquarter County: Fannin

Counties within Project's Impact Area: Fannin

Grant Officials:

Authorized Official

User Name: Melanie Grammar

Email: mgrammar1@verizon.net

Address 1: 112 West Fifth Street

Address 1:

City: Bonham, Texas 75418

Phone: 903-583-4339 Other Phone:

Fax:

Agency:

Title: Ms.

Salutation: Captain

Project Director

User Name: Sandy Barber

Email: sandy@fanninccc.org

Address 1: 112 West Fifth Street

Address 1:

City: Bonham, Texas 75418

Phone: 903-583-4339 Other Phone:

Fax: 903-583-3074

Agency:

Title: Ms.

Salutation: Ms.

Financial Official

User Name: Nancy Young

Email: info@fanninccc.org

Address 1: 112 West Fifth Street

Address 1:

City: Bonham, Texas 75418

Phone: 903-583-7459 Other Phone: 903-583-4339

Fax: 903-583-3074

Agency:

Title: Ms.

Salutation: Ms.

Grant Writer

User Name: Sandy Barber

Email: sandy@fanninccc.org

Address 1: 112 West Fifth Street

Address 1:

City: Bonham, Texas 75418

Phone: 903-583-4339 Other Phone:

Fax: 903-583-3074

Agency:

Title: Ms.

Salutation: Ms.

Grant Vendor Information

Introduction

The **Grant Vendor** section of the application collects grant payment information for your organization. The following items will be auto-filled from previous data you supplied in eGrants: Organization Type, State Payee Identification Number, and Data Universal Numbering System (DUNS) identifier (if applicable). Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct. In addition, you have a 2-hour time limit for each tab where you will need to complete the information correctly and then click the **Save and Continue** button. There is a timestamp in the upper-right hand corner of the page that notes when you first clicked on the tab. From that point, you have 2 hours to complete the information on that tab correctly. If you do not complete the information correctly (for the required fields) and then you click on the **Save and Continue** button, you will be redirected to the eGrants Home Page. If this happens, your data will not be saved in the system. You may also choose to compose a message on this page for OOG to review. This can be done by typing in the **Notes By Grantee / OOG** message box.

Financial Management Tools

In order to receive payments from OOG, download, complete and email the following forms to the Office of the Governor, Financial Services Division ([FSD](#)). Or, you may fax completed forms to (512) 463-4114.

Note: As of March 1, 2010, these forms will no longer be accepted in hard copy format.


Texas Application for Payee Identification Number Form in [PDF](#) - 12/08/2009

* *updated* Texas Direct Deposit/Advance Payment Form in [MS Excel](#) or [PDF](#) - 03/04/2010

IRS W-9 Form in [PDF](#) - 12/08/2009

Getting Started

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Organization Type: Nonprofit Corporation (tax exempt)

Organization Option: applying to provide direct services to victims only

Applicant Agency's State Payee Identification Number (e.g., Federal Employer's Identification (FEI) Number or Vendor ID): 17524612565001

Data Universal Numbering System (DUNS): 044907512

Payment Address Line 1: 112 W 5th St

Payment Address Line 2:

Payment City/State/Zip: Bonham Texas 75418-4365

Narrative Information

Introduction


The **Narrative** section is the description of your project. It is important that the information you provide about your project is clear and as concise as possible. Note: All applicants must certify to the eligibility requirements specific to the fund source. The minimum requirements to complete this page are the **Program Requirements, Problem Statement, Supporting Data, Goal Statement,** and **Project Summary** sections. We recommend that you complete any sections applicable to your project to assist in the application review process.

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct.

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Primary Mission and Purpose

The purpose of this program is to provide services and assistance directly to victims of crime to speed their recovery and aid them through the criminal justice process. Services may include the following:

- responding to the emotional and physical needs of crime victims;
- assisting victims in stabilizing their lives after a victimization;
- assisting victims to understand and participate in the criminal justice system; and
- providing victims with safety and security.

Funding Levels

The anticipated funding levels for these programs are as follows:

- Minimum Award - \$5,000
- Maximum Award – None
- Grantees, other than Native American Tribes, must provide matching funds of at least twenty percent (20%) of total project expenditures. Native American Tribes may be required to provide a five percent (5%) match. This requirement may be met through either cash or in-kind contributions or a combination of both.

For more information regarding grantee match, please click on the **Budget** tab, and then click on the **Source of Match** tab in eGrants.

***Note:** If you voluntarily include matching funds that exceed the minimum match requirement, you will be held to that amount throughout the grant period.*

Program Requirements

Preferences - Preference will be given to applicants that promote comprehensive victim restoration while incorporating an emphasis on cultural competency in underserved populations. Applicants are also encouraged to streamline administrative and reporting processes by consolidating grant requests whenever possible in lieu of submitting multiple applications.

Program Emphasis - Applicant agrees to implement comprehensive strategies that are sensitive to the concerns and safety of the victims and hold offenders accountable for their crimes. Applicants must indicate the percentage of their project that benefits Victim Services, Law Enforcement, Prosecution, Courts or other areas. Program emphasis decisions should be made

based on the beneficiary of the funded activities. For example, a victim services coalition who provides training to police throughout the state would fall under the “law enforcement” category because the training is to benefit law enforcement.

Indicate the percentage (%) of your project that benefits:

Victim Services – any nonprofit, nongovernmental organization that assists victims.

100

Law Enforcement – any public agency charged with policing functions.

0

Prosecution – any public agency charged with direct responsibility for prosecuting criminal offenders.

0

Court – any civil or criminal court system.

0

Other – any initiative that indirectly affects victims (ex., developing protocols and procedures).

0

Culturally Competent Victim Restoration - Applicants agree to promote collaboration and coordination among local service systems that involve multiple disciplines and support a seamless delivery of a continuum of services that focus on each individuals return to full physical, mental, and emotional health while incorporating an emphasis on cultural competency in underserved populations.

Provide information in this section regarding how your organization is culturally competent when providing services to victims. Here are some guidelines to follow: Victim service providers must have the ability to blend cultural knowledge and sensitivity with victim restoration skills for a more effective and culturally appropriate recovery process. Cultural competency occurs when: (1) cultural knowledge, awareness and sensitivity are integrated into action and policy; (2) the service is relevant to the needs of the community and provided by trained staff, board members, and management; and (3) an advocate or organization recognizes each client is different with different needs, feelings, ideas and barriers.

The Fannin County Children’s Center strives to provide culturally competent services to victims of child abuse. One of our organization’s value statements is “Diversity & Teamwork - we value diversity and the strengths each person has to offer and we believe that by working together, everyone achieves more.” One way we live out this value by regularly offering training opportunities about cultural knowledge, awareness and sensitivity to our staff, volunteers, multidisciplinary team members and board. Our project staff has attended training sessions by the Children’s Advocacy Centers of Texas which specifically addresses providing forensic

interviews and family advocacy services in a culturally competent manner. Staff and board members are regularly evaluating and assessing the services we provide to ensure they are relevant to the needs of our community. Our agency also has a written Diversity Plan. This plan outlines the actions we will take to work towards having our staff, volunteers and board members be reflective of the people we serve. Furthermore, our agency and project staff recognize that each child and family is different and therefore has different needs, feelings, ideas and barriers. Care is taken to ensure that photos on the walls of the center and in agency brochures are reflective of the cultural make-up of our community. Toys in the play room and play therapy room are also carefully selected to include dolls of difference races, toys that speak in Spanish, etc. in order to demonstrate our cultural sensitivity and awareness and be reflective of our community's culture.

Services to Victims of Crime - Applicant agrees to provide services to victims of crime which include: responding to the emotional and physical needs of crime victims; assisting victims in stabilizing their lives after victimization; assisting victims to understand and participate in the criminal justice system; and providing victims with safety and security.

Effective Services - Applicant must demonstrate a record of providing effective services to crime victims. If the applicant cannot yet demonstrate a record of providing effective services, the applicant must demonstrate that at least 25 percent of its financial support comes from non-federal sources.

Volunteers - Applicant agrees to use volunteers to support either the project or agency-wide services, unless CJD determines that a compelling reason exists to waive this requirement.

Community Efforts - Applicant agrees to promote community efforts to aid crime victims. Applicants should promote, within the community, coordinated public and private efforts to aid crime victims. Coordination efforts qualify an organization to receive these funds, but are not activities that can be supported with these funds.

Crime Victims' Compensation - Applicant agrees to assist crime victims in applying for crime victims' compensation benefits.

Records - Applicant agrees to maintain daily time and attendance records specifying the time devoted to allowable victim services.

Civil Rights Information - Applicant agrees to maintain statutorily required civil rights statistics on victims served by race, national origin, sex, age, and disability of victims served, within the timeframe established by CJD. This requirement is waived when providing services, such as telephone counseling, where soliciting the information may be inappropriate or offensive to the crime victim.

Victims of Federal Crime - Applicant agrees to provide equal services to victims of federal crime. (Note: Victim of federal crime is a victim of an offense that violates a federal criminal statute or regulation; federal crimes also include crimes that occur in an area where the federal government has jurisdiction, such as Indian reservations, some national parks, some federal

buildings, and military installations.)

No Charge - Applicant agrees to provide grant-funded services at no charge to victims of crime.

Confidentiality - Applicant agrees to maintain the confidentiality of client-counselor information and research data, as required by state and federal law.

Discrimination - Applicant agrees not to discriminate against victims because they disagree with the State's prosecution of the criminal case.

Forensic Medical Examination Payments - Health care facilities shall conduct a forensic medical examination of a victim of an alleged sexual assault if the victim arrived at the facility within 96 hours after the assault occurred and the victim consented to the examination. The victim is not required to participate in the investigation or prosecution of an offence as a condition of receiving a forensic medical examination, nor pay for the forensic examination or the evidence collection kit. In addition, if a health care facility does not provide diagnosis or treatment services for sexual assault victims, the facility is required to refer the victim to a facility that provides those services. A law enforcement agency that requests a forensic medical examination of a victim of sexual assault shall pay full cost of the examination. Crime Victim Compensation funds may be used to pay for forensic medical examinations performed by trained examiners except that such funds may not be used to pay for the examinations if victims of sexual assault are required to seek reimbursement for such examinations from their insurance carriers.

Protection Orders - Victims applying for a protective order or their attorney may not bear the costs associated with the filing of an order of protections.

Nondisclosure of Confidential or Private Information - Personally identifying information or individual information collected in connection with services requested, utilized, or denied may not be disclosed; or, reveal individual client information without informed, written, reasonably time-limited consent of the person about whom information is sought. If release of information is compelled by statutory or court mandate, reasonable attempts to provide notice to victims affected by the disclosure of information will be made and steps necessary will be taken to protect the privacy and safety of the persons affected by the release of information.

Civil Rights Liaison

A civil rights liaison who will serve as the grantee's civil rights point of contact and who will be responsible for ensuring that the grantee meets all applicable civil rights requirements must be designated. The designee will act as the grantee's liaison in civil rights matters with CJD and with the federal Office of Justice Programs.

Enter the Name of the Civil Rights Liaison:

Sandy Barber

Enter the Address for the Civil Rights Liaison:

112 West Fifth Street Bonham, Texas 75418
Enter the Phone Number for the Civil Rights Liaison:
9035834339

Certification

Each applicant agency must certify to the specific criteria detailed above under **Program Requirements** to be eligible for General Victim Assistance - Direct Services Program Solicitations.

X I certify to **all** of the above eligibility requirements.

Problem Statement:

Please provide a detailed account in the Problem Statement section of the existing issues your project will target.

Enter your problem statement:

This project will address several problems facing abused children. Child abuse victims and their protective caregivers often have limited understanding of and participation in the criminal justice system. Child abuse cases and the systems designed to respond to them are numerous and complex. The cases are challenging, in part, because of the young age and the developmental ability of the victim, the frequent lack of physical evidence or witnesses and the multiple agencies and service providers involved. CPS and law enforcement are mandated to conduct coordinated investigations and local prosecutors are charged with prosecuting crimes against children. Without careful coordination, the investigators and prosecutors can inadvertently re-traumatize the child victims and their protective caregivers by subjecting them to multiple interviews concerning the abuse. Due to limited resources and staff, CPS can only provide services to a small number of children who are suspected victims of abuse or neglect. Child victims often require medical attention and counseling services to address the physical and mental health issues caused by their abuse. The discovery of abuse often means a change in the living arrangements for the child in order to stabilize their life after victimization and to ensure their safety and protection. In some cases, the child must leave home to go to another relative, a foster home or an emergency shelter. In other cases, the alleged perpetrator is forced to leave the home. With so many agencies and service providers involved in each case and without a constant, central point of contact for their case, victims and their protective caregivers can easily feel overwhelmed and confused by the criminal justice system and how they can or should participate in it.

Supporting Data:

Provide as much supporting data, to include baseline statistics and the sources of your data, which are pertinent to where the grant project is located and/or targeted. Do not use statewide data for a local problem or national data for a statewide problem.

Enter your supporting data:

According to the 2009 Data Book of the Texas Department of Family and Protective Services (<http://www.dfps.state.tx.us>) in Fannin County there were: 409 alleged victims of child abuse & neglect; 232 CPS investigations completed; 29 confirmed CPS investigations; 47 confirmed

victims of child abuse and neglect; 50 alleged victims provided services by Fannin County CPS; 359 alleged victims NOT provided services by Fannin County CPS. From the records of the Fannin County Children's Advocacy Center, 96 new cases were referred to the Center and a total of 223 primary and secondary victims received services at the Center in 2009.

Community Plan:

For projects that have a local or regional impact target area, provide information regarding the community plan need(s) that your project will address.

Enter your community planning needs:

The Fannin County Children's Center participates in the local community planning process. The proposed project directly addresses the priority that there is a high rate of child abuse and neglect because the target group of the project is abused and neglected children. Furthermore, the proposed project also addresses the concern that service organizations may not know what other services are available. One of the activities of project staff is the multidisciplinary team and case coordination in order to coordinate the efforts of several organizations for the benefit of victims.

Goal Statement:

Provide a brief description of the overall goals and objectives for this project.

Enter a description for the overall goals and objectives:

The project goal is to respond to the multiple needs of child abuse victims and their non-offending family members in a comprehensive and culturally competent manner. Objectives will include responding to the emotional and physical needs of victims and their non-offending family members, assisting them in securing safety and stabilizing their lives after victimization and in understanding and participating in the criminal justice system.

Cooperative Working Agreement (CWA):

When a grantee intends to carry out a grant project through cooperating or participating with one or more outside organizations, the grantee must obtain authorized approval signatures on the cooperative working agreement (CWA) from each participating organization. Grantees must maintain on file a signed copy of all cooperative working agreements, and they must submit to CJD a list of each participating organization and a description of the purpose of each CWA. Cooperative working agreements do not involve an exchange of funds.

For this project, provide the name of the participating organization(s) and a brief description of the purpose(s) for the CWA(s). You should only provide information here that this project's successful operation is contingent on for the named service or participation from the outside organization.

Note: A **Sample CWA** is available [here](#) for your convenience.

Enter your cooperating working agreement(s):

Working protocols which outline the roles and responsibilities of each agency involved in the project are signed by the head of each of the following agencies: Fannin County & District Attorney's Office - responsible for prosecuting cases of crimes against children; Fannin County Child Protective Services, Fannin County Sheriff's Office, Bonham Police Department, Ector Police Department, Honey Grove Police Department, Leonard Police Department, Savoy Police Department & Trenton Police Department - responsible for investigating child abuse cases;

CASA of Fannin County - responsible for serving as the Guardian ad litem for abused children in foster care; Fannin County Juvenile Probation - provides updates to project staff about the status of juvenile offenders so that the information can be relayed to the victim; Fannin County Family Crisis Center - provides support services for families who experience domestic violence; Private Therapists: Jan Snow, LPC, Faye Wedell, LPC, John Kasper, LPC, Michelle Griffith, LPC, and Jeannie Goodner, LPC - provide counseling services to victims.

Continuation Projects:

For continuation projects only, if your current or previous year's project is NOT on schedule in accomplishing the stated objectives, briefly describe the major obstacles preventing your organization from successfully reaching the project objectives as stated within your previous grant application. (Data may be calculated on a pro-rated basis depending on how long the current or previous year's project has been operating.)

Enter your current grant's progress:

not applicable

Project Summary:

Briefly summarize the entire application, including the project's problem statement, supporting data, goal, target group, activities, and objectives. Be sure that the summary is easy to understand by a person not familiar with your project and that you are confident and comfortable with the information if it were to be released under a public information request.

Enter your summary statement for this project:

Child abuse victims and their protective caregivers often have a limited understanding of and participation in the criminal justice system. Child abuse cases and the systems designed to respond to them are numerous and complex. Child Protective Services (CPS), law enforcement, prosecution, medical providers, mental health professionals and other social service agencies may all be involved in a child abuse case. The discovery of child abuse often results in a change in the child's living arrangement. With so many agencies and service providers involved in each case, child victims and protective caregivers can easily feel overwhelmed and confused by the criminal justice system. According to the Data Books of the Texas Department of Family and Protective Services (<http://www.dfps.state.tx.us>) there were 409 alleged victims in 2009 in Fannin County. In addition, due to limited resources and staff, CPS provided services to only 50 alleged victims, which left 359 alleged victims receiving no services. The project goal is to respond to the multiple needs of child abuse victims and their non-offending family members in a comprehensive and culturally competent manner. Project objectives include assisting victims in securing safety, stabilizing their lives after victimization and in understanding and participating in the criminal justice system. The target group is male and female children who are under the age of 18 that have been abused and their non-offending family members or caregivers of any age in Fannin County, Texas. Staff provides information, referrals, advocacy, forensic interviews, crisis support and court accompaniment as the case progresses through the criminal justice system. Staff maintains individual files on each case. They also prepare monthly reports to the Board of Directors in order to track progress towards the project goals.






Project Activities Information

Introduction

The **Project Activities** section of the application gathers information about the type of activities your project will incorporate. Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct. In addition, you have a 2-hour time limit for each tab where you will need to complete the information correctly and then click the **Save and Continue** button. There is a timestamp in the upper-right hand corner of the page that notes when you first clicked on the tab. From that point, you have 2 hours to complete the information on that tab correctly. If you do not complete the information correctly (for the required fields) and then you click on the **Save and Continue** button, you will be redirected to the eGrants Home Page. If this happens, your data will not be saved in the system. You may also choose to compose a message on this page for OOG to review. This can be done by typing in the **Notes By Grantee / OOG** message box.

Getting Started

On this tab you will notice certain icons that are displayed.

-  = a **pencil** icon - click on this icon to edit your selections.
-  = a **pencil** icon with a **red slash** through it – click on this icon to cancel your edits.
-  = a **red delete** icon – click on this icon to delete the item.
-  = a **diskette** icon - click on this icon to save your work. When this icon appears, it is your queue to save the item that you are working on; otherwise, your data will be lost.
-  = an **information** icon - this help icon is next to certain items that may need further explanation. Simply click and review the information provided in the pop up window.

Type of Crime Victim

Select the type(s) of crime victim this project targets and provide the percentage of time dedicated to serving each category of crime victim. You may select more than one type; however, the sum of the percentages may not exceed 100%.

Sexual Assault Percentage (%):

0

Domestic Abuse Percentage (%):

0

Child Abuse Percentage (%):

100

DUI / DWI Crashes Percentage (%):

0

Survivors of Homicide Percentage (%):

0

Assault Percentage (%):

0

Adults Molested as Children Percentage (%):

0

Elder Abuse Percentage (%):

0

Robbery Percentage (%):

0

Stalking Percentage (%):

0

Dating/Acquaintance Violence Percentage (%):

0

Selected Project Activities:

ACTIVITY	PERCENTAGE:	DESCRIPTION
Personal Advocacy and Support	30.00	Project staff provides victims and their protective family members with information and referrals to needed services such as housing, Medicaid, medical, counseling, etc. Staff also provides emotional support, education and information as needed by each family in a culturally competent and comprehensive manner.
Crisis Services	15.00	Project staff provides emergency services to help victims during the crisis phase. Services include crisis counseling, phone and in-person information and referrals, advocacy for necessary crisis procedures including medical, CPS and law enforcement, assistance with crime victims compensation filing and accompaniment to SANE exams.
Forensic Interviews	15.00	Project staff are trained professionals in conducting evidentiary interviews in a developmentally appropriate and culturally competent manner with children who may have been sexually or physically abused. Forensic interviews are conducted in a child-friendly environment at the Children's Advocacy Center with the involvement and input of investigators from Child Protective Services and law enforcement. Interviews are recorded and the results are used for investigation and prosecution purposes as well as social services, personal advocacy, case management and mental health purposes.
Legal Advocacy	20.00	Project staff provide victims and their protective family members with information about victim's rights as well as comprehensive crisis and follow-up support needed to keep them engaged in the investigation and prosecution process. Staff accompany victims to court when they must testify.
Multi-Disciplinary Teams and Case	20.00	Project staff meets monthly with representatives of several agencies to discuss common cases and share information to enhance and coordinate investigation,

Coordination		prosecution and victim restoration. In between meetings, staff communicates with partner agencies via phone, email and in person to further advocate for clients and share information as needed. Cases are followed through in this manner until closure. Partner agencies include Child Protective Services, law enforcement, prosecution, SANE, therapists and others.
--------------	--	---

Geographic Area:
Fannin County, Texas

Target Audience:
Children who have been sexually or physically abused and their protective family members

Gender:
males and females

Ages:
children under the age of 18 protective family members of any age

Special Characteristics:
rural area

Measures Information





Introduction

The **Project Measures** section of the application collects data to track the performance of your proposed project toward its stated objectives. Output measures demonstrate the level of activity of a project. Outcome measures demonstrate the impact of a project in a targeted area, reflecting the extent to which the goals and objectives of the project have been achieved. Output and outcome measures displayed on this page correspond to activities selected or created on the **Activities** page. Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct. In addition, you have a 2-hour time limit for each tab where you will need to complete the information correctly and then click the **Save and Continue** button. There is a timestamp in the upper-right hand corner of the page that notes when you first clicked on the tab. From that point, you have 2 hours to complete the information on that tab correctly. If you do not complete the information correctly (for the required fields) and then you click on the **Save and Continue** button, you will be redirected to the eGrants Home Page. If this happens, your data will not be saved in the system. You may also

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Getting Started

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-  = a **pencil** icon - click on this icon to edit your selections.
-  = a **pencil** icon with a **red slash** through it – click on this icon to cancel your edits.
-  = a **diskette** icon - click on this icon to save your work. When this icon appears, it is your queue to save the item that you are working on; otherwise, your data will be lost.
-  = an **information** icon - this help icon is next to certain items that may need further explanation. Simply click and review the information provided in the pop up window.

Progress Reporting Requirements

Outcomes Reported to Texas A&M University, Public Policy Research Institute (PPRI):

In addition to the measures listed below, all programs will be required to report the number of victims/survivors who returned to the agency as a result of a new victimization either by the same perpetrator or a new perpetrator. Note: This does not include victims returning to your agency to continue their treatment. This measure will be used to measure the efficacy of the services provided in the restoration of the victim to full mental, physical, and emotional health.

Objective Output Measures

OUTPUT MEASURE	CURRENT DATA	TARGET LEVEL
Number of times survivors are accompanied to court.	4	5
Number of forensic medical exams.	0	0
Number of meetings held by multi-disciplinary teams.	20	24
Number of safety plans developed.	0	0
Number of victims seeking services who were not served.	0	0
Number of victims / survivors seeking services who were served.	223	225
Number of survivors assisted through the legal process.	88	90
Number of survivors assisted with crime victim compensation applications.	9	10
Number of survivors interviewed for case information.	92	95
Number of survivors provided with medical advocacy.	0	0

Number of survivors receiving crisis counseling.	76	80
Number of survivors receiving information and / or referral (in person / by phone).	76	80
Number of survivors receiving advocacy for emergency services (e.g., legal assistance, shelter, law enforcement, etc.).	0	10
Number of volunteers trained to provide direct assistance to victims / survivors.	11	10
Number of cases reviewed by the multi-disciplinary team.	95	95
Number of survivors contacted regarding court ordered restitution.	0	0

Custom Objective Output Measures

CUSTOM OUTPUT MEASURE	CURRENT DATA	TARGET LEVEL

Objective Outcome Measures

OUTCOME MEASURE	CURRENT DATA	TARGET LEVEL
Number of cases resulting in charges filed.	0	0
Number of children placed with a permanent care provider (for CASA programs).	0	0
Number of felony charges filed.	0	0
Number of felony convictions.	0	0
Number of survivors receiving partial court ordered restitution.	0	0
Number of survivors receiving full court ordered restitution.	0	0

Custom Objective Outcome Measures

CUSTOM OUTCOME MEASURE	CURRENT	TARGET
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	DATA	LEVEL
Number of families who report knowing what to expect with their situation after the initial visit	0	60
Number of families who report at 60 day follow-up that services were helpful	0	60


Documents Information

Introduction

The **Supporting Documentation** section of the application contains general grantee requirements. Please select or enter the appropriate responses in the areas below. Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct. In addition, you have a 2-hour time limit for each tab where you will need to complete the information correctly and then click the **Save and Continue** button. There is a timestamp in the upper-right hand corner of the page that notes when you first clicked on the tab. From that point, you have 2 hours to complete the information on that tab correctly. If you do not complete the information correctly (for the required fields) and then you click on the **Save and Continue** button, you will be redirected to the eGrants Home Page. If this happens, your data will not be saved in the system. You may also choose to compose a message on this page for OOG to review. This can be done by typing in the **Notes By Grantee / OOG** message box.

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Certification and Assurances

Each applicant must click on this link to review the standard [Certification and Assurances](#).

Resolution from Governing Body

Except for state agencies, each applicant must provide information related to the [resolution](#) from its governing body, such as the city council, county commissioners' court, school board, or board of directors. Please ensure that the resolution approved by your governing body addresses items one through four below.

1. Authorization by your governing body for the submission of the application to CJD that clearly identifies the name of the project for which funding is requested;
2. A commitment to provide all applicable matching funds;
3. A designation of the name and/or title of an authorized official who is given the authority to apply for, accept, reject, alter, or terminate a grant (Note: If a name is provided, you must update CJD should the official change during the grant period.); and
4. A written assurance that, in the event of loss or misuse of grant funds, the governing body will return all funds to CJD.

Upon approval from your agency's governing body, upload the approved resolution to eGrants by clicking on the **Upload Files** sub-tab located in the **Summary** tab.

Contract Compliance

Will CJD grant funds be used to support any contracts for professional services?

Select the Appropriate Response:

Yes

No

For applicant agencies that selected **Yes** above, describe how you will monitor the activities of the sub-contractor(s) for compliance with the contract provisions (including equipment purchases), deliverables, and all applicable statutes, rules, regulations, and guidelines governing this project.

Enter a description for monitoring contract compliance:

Lobbying

For applicant agencies requesting grant funds in excess of \$100,000, have any federally appropriated funds been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant loan, or cooperative agreement?

Select the Appropriate Response:

Yes

No

N/A

For applicant agencies that selected either **No** or **N/A** above, have any non-federal funds been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress in connection with this federal contract, loan, or cooperative agreement?

Select the Appropriate Reponse:

- Yes
 No
 N/A

Fiscal Year

Provide the begin and end date for the applicant agency's fiscal year (e.g., 09/01/20xx to 08/31/20xx).

Enter the Begin Date [mm/dd/yyyy]:

7/1/2009

Enter the End Date [mm/dd/yyyy]:

6/30/2010

Sources of Financial Support

Each applicant must provide the amount of grant funds expended during the most recently completed fiscal year for the following sources:

Enter the amount (\$) of Federal Grant Funds:

82166

Enter the amount (\$) of State Grant Funds:

101913

Single Audit

Has the applicant agency expended federal grant funding of \$500,000 or more, or state grant funding of \$500,000 or more during the most recently completed fiscal year?

Select the Appropriate Response:

- Yes
 No

***Note:** Applicants who expend less than \$500,000 in federal grant funding or less than \$500,000 in state grant funding are exempt from the Single Audit Act and cannot charge audit costs to a CJD grant. However, CJD may require a limited scope audit as defined in OMB Circular A-133.*

Applicant agencies that selected **Yes** above, provide the date of your organization's last annual single audit, performed by an independent auditor (in accordance with the Single Audit Act Amendments of 1996 and OMB Circular A-133).

Enter the date of your last annual single audit:

6/30/2009

Equal Employment Opportunity Plan (EEOP)

Type I Entity: Defined as an applicant that meets one or more of the following criteria:

- the applicant has less than 50 employees;
- the applicant is a non-profit organization;
- the applicant is a medical institution;
- the applicant is an Indian tribe;
- the applicant is an educational institution, or
- the applicant is receiving a single award of less than \$25,000.

Requirements for a Type I Entity:

- The applicant is not required to prepare an EEOP because it is a Type I Entity as defined above, pursuant to 28 CFR 42.302; and
- the applicant will comply with applicable federal civil rights laws that prohibit discrimination in employment and in the delivery of services.

Type II Entity: Defined as an applicant that meets the following criteria:

- the applicant has 50 or more employees, and
- the applicant is receiving a single award of \$25,000 or more, but less than \$500,000.

Requirements for a Type II Entity: Federal law requires a Type II Entity to formulate an EEOP and keep it on file.

- The applicant agency is required to formulate an EEOP in accordance with 28 CFR 42.301, et seq., subpart E;
- the EEOP is required to be formulated and signed into effect within the past two years by the proper authority;
- the EEOP is available for review by the public and employees or for review or audit by officials of CJD, CJD's designee, or the Office of Civil Rights, Office of Justice Programs, U.S. Department of Justice, as required by relevant laws and regulations;
- the applicant will comply with applicable federal civil rights laws that prohibit discrimination in employment and in the delivery of services; and
- the EEOP is required to be on file in the office of (enter the name and address where the EEOP is filed below):

Enter the name of the person responsible for the EEOP and the address of the office where the EEOP is filed:

Type III Entity: Defined as an applicant that is NOT a Type I or Type II Entity.

Requirements for a Type III Entity: Federal law requires a Type III Entity to formulate an EEOP and submit it for approval to the Office for Civil Rights, Office of Justice Programs, U.S. Department of Justice.

- The EEOP is required to be formulated and signed into effect within the past two years by the proper authority;
- the EEOP has been submitted to the Office of Civil Rights (OCR), Office of Justice Programs, U.S. Department of Justice and has been approved by the OCR, or it will be submitted to the OCR for approval upon award of the grant, as required by relevant laws and regulations; and
- the applicant will comply with applicable federal civil rights laws that prohibit discrimination in employment and in the delivery of services.

Based on the definitions and requirements above, the applicant agency certifies to the following entity type:

Select the appropriate response:

- Type I Entity
- Type II Entity
- Type III Entity

Debarment

Each applicant agency will certify that it and its principles:

- Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal Court, or voluntarily excluded from participation in this transaction by any federal department or agency;
- Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property; or
- Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any of the offenses enumerated in the above bullet; and have not within a three-year period preceding this application had one or more public transactions (federal, state, or local) terminated for cause or default.

Select the appropriate response:

- I Certify
- Unable to Certify

If you selected **Unable to Certify** above, please provide an explanation as to why the applicant agency cannot certify the statements.

Enter the debarment justification:

Fiscal Capability Information

Introduction

This **Fiscal Capability** section of the application collects information from nonprofit corporations applying for OOG grant funds.

Note: If you are NOT a nonprofit corporation, this information is not applicable; therefore, the 'Printer Friendly' version will be blank for all information collected in the Fiscal Capability section.

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct. In addition, you have a 2-hour time limit for each tab where you will need to complete the information correctly and then click the **Save and Continue** button. There is a timestamp in the upper-right hand corner of the page that notes when you first clicked on the tab. From that point, you have 2 hours to complete the information on that tab correctly. If you do not complete the information correctly (for the required fields) and then you click on the **Save and Continue** button, you will be redirected to the eGrants Home Page. If this happens, your data will not be saved in the system. You may also choose to compose a message on this page for OOG to review. This can be done by typing in the **Notes By Grantee / OOG** message box.

Organizational Information

Enter the Year in which the Corporation was Founded:

1992

Enter the Date that the IRS Letter Granted 501(c)(3) Tax Exemption Status:

2/1/1993

Enter the Employer Identification Number Assigned by the IRS:

752461256

Enter the Charter Number assigned by the Texas Secretary of State:

124969301

Accounting System

The grantee organization must incorporate an accounting system that will track direct and indirect costs for the organization (general ledger) as well as direct and indirect costs by project (project ledger). The grantee must establish a time and effort system to track personnel costs by project. This should be reported on an hourly basis, or in increments of an hour.

Is there a list of your organization's accounts identified by a specific number (i.e., a general ledger of accounts).

Select the appropriate response:

- Yes
 No

Does the accounting system include a project ledger to record expenditures for each Program by required budget cost categories?

Select the appropriate response:

- Yes
 No

Is there a timekeeping system that allows for grant personnel to identify activity and requires signatures by the employee and his or her supervisor?

Select the appropriate response:

- Yes
 No

If you answered 'No' to any question above in the Accounting System section, in the space provided below explain what action will be taken to ensure accountability.

Enter your explanation:

Financial Capability

Grant agencies should prepare annual financial statements. At a minimum, current internal balance sheet and income statements are required. A balance sheet is a statement of financial position for a grant agency disclosing assets, liabilities, and retained earnings at a given point in time. An income statement is a summary of revenue and expenses for a grant agency during a fiscal year.

Has the grant agency undergone an independent audit?

Select the appropriate response:

- Yes
 No

Does the organization prepare financial statements at least annually?

Select the appropriate response:

Yes

No

According to the organization's most recent Audit or Balance Sheet, are the current total assets greater than the liabilities?

Select the appropriate response:

Yes

No

If you selected 'No' to any question above under the Financial Capability section, in the space provided below explain what action will be taken to ensure accountability.

Enter your explanation:

Budgetary Controls

Grant agencies should establish a system to track expenditures against budget and / or funded amounts.

Are there budgetary controls in effect (e.g., comparison of budget with actual expenditures on a monthly basis) to include drawing down grant funds in excess of:

a) Total funds authorized on the Statement of Grant Award?

Yes

No

b) Total funds available for any budget category as stipulated on the Statement of Grant Award?

Yes

No

If you selected 'No' to any question above under the Budgetary Controls section, in the space provided below please explain what action will be taken to ensure accountability.

Enter your explanation:

Internal Controls

Grant agencies must safeguard cash receipts, disbursements, and ensure a segregation of duties exist. For example, one person should not have authorization to sign checks and make deposits.

Are accounting entries supported by appropriate documentation (e.g., purchase orders, vouchers, receipts, invoices)?

Select the appropriate response:

Yes

No

Is there separation of responsibility in the receipt, payment, and recording of costs?

Select the appropriate response:

Yes

No

If you selected 'No' to any question above under the Internal Controls section, in the space provided below please explain what action will be taken to ensure accountability.

Enter your explanation:

Budget Details Information






Introduction

This **Budget** section of your application details budget line items for your proposed project. To create a new budget line item, click on the icon in the **New Budget Item** column. You will be directed to a different area on this page to make selections specific to the budget category. After making your selection, write a brief description of the line item in the **Expenditure Description** box and enter the amount of OOG funds, Cash Match, and if applicable, In Kind Match in the areas provided. In the percentage box, you can enter a percentage for Personnel or number of items to be purchased for Supplies and/or Equipment. When you have finished, click on the **Add New Budget Line Item** button. Repeat this process for each budget line item needed in each budget category. If you need to edit your entries, click on the '+' icon to expand the budget grid. You will notice that a *pencil* icon will display after expanding the grid. Click on the *pencil* icon to be directed to the editing section on this page and follow the instructions in this area to complete your edits. Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct. In addition, you have a 2-hour time limit for each tab where you will need to complete the information correctly and then

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Getting Started

On this tab you will notice certain icons that are displayed.

-  = a **plus** icon – click on this icon to expand a list of items.
-  = a **minus** icon – click on this icon to collapse a list of items.
-  = a **new** icon – click on this icon to add a new item.
-  = a **pencil** icon - click on this icon to edit your selections.
-  = an **information** icon - this help icon is next to certain items that may need further explanation. Simply click and review the information provided in the pop up window.

Budget Information by Budget Line Item:

CATEGORY	SUB CATEGORY	DESCRIPTION	CJD	CASH MATCH	IN-KIND MATCH	GPI	TOTAL	UNIT/%
Supplies and Direct Operating Expenses	Cellular, Fax, Pager, and/or Office Telephone	Telephone	\$240.00	\$360.00	\$0.00	\$0.00	\$600.00	0
Supplies and Direct Operating Expenses	Electric, Gas, and/or Water / Wastewater	Utilities - portion of the costs for electricity, gas, water/wastewater	\$240.00	\$960.00	\$0.00	\$0.00	\$1,200.00	0
Personnel	Forensic Interviewer	CAC Program Director - conducts forensic interviews, provides	\$17,723.00	\$3,545.00	\$0.00	\$0.00	\$21,268.00	50

		comprehensive advocacy and support to victims and protective family members, coordinates cases with multidisciplinary team, completes required documentation and reports for project - 50% of salary and benefits						
Personnel	Forensic Interviewer	CAC Program Specialist - conducts forensic interviews, provides comprehensive advocacy and support to victims and protective family members, coordinates cases with multidisciplinary team, completes required documentation and reports for project - 50% of salary and benefits	\$16,335.00	\$3,267.00	\$0.00	\$0.00	\$19,602.00	50
Travel and Training	In-State Registratio	Registration and travel	\$222.00	\$260.00	\$0.00	\$0.00	\$482.00	0

	n Fees, Training, and/or Travel	costs for in- state training for project staff to attend trainings hosted by the Children's Advocacy Centers of Texas in order to strengthen skills in forensic interviewing and victim advocacy.						
Supplies and Direct Operating Expenses	Office Supplies (e.g., paper, postage, calculator)	office supplies - consumable offices supplies such as paper, pens, folders, binders, etc.	\$240.00	\$360.00	\$0.00	\$0.0 0	\$600.00	0

Source of Match Information



Introduction

The **Source of Match** section of your application collects information regarding the source and amount of **Cash Match** and **In Kind Match**. Please enter the description and amounts of match in the spaces provided below and select whether the item is 'Cash Match' or 'In-Kind Match'. After entering an item click on the **Add New Item** button. When an item has been added, it will appear in the 'Edit the Source(s) of Match Reported' table. You may edit each of the items added to this table by clicking on the 'pencil' icon. If you edited an item in the table, click on the 'diskette' icon to save your edited entries. For further information regarding matching funds refer to *I TAC*, §3.3; for program income refer to *I TAC*, §3.73 and §3.87. Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct. In addition, you have a 2-hour time limit for each tab where you will need

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Detail Source of Match/GPI:

DESCRIPTION	MATCH TYPE	AMOUNT
undesignated donations	Cash Match	\$8,752.00

Summary Source of Match/GPI:

Total Report	Cash Match	In Kind	GPI Federal Share	GPI State Share
\$8,752.00	\$8,752.00	\$0.00	\$0.00	\$0.00

Budget Summary Information

Budget Summary Information by Budget Category:

CATEGORY	CJD	CASH MATCH	IN-KIND MATCH	GPI	TOTAL
Personnel	\$34,058.00	\$6,812.00	\$0.00	\$0.00	\$40,870.00
Supplies and Direct Operating Expenses	\$720.00	\$1,680.00	\$0.00	\$0.00	\$2,400.00
Travel and Training	\$222.00	\$260.00	\$0.00	\$0.00	\$482.00

Budget Grand Total Information:

CJD	CASH MATCH	IN-KIND MATCH	GPI	TOTAL
\$35,000.00	\$8,752.00	\$0.00	\$0.00	\$43,752.00

Condition Of Fundings Information

DESCRIPTION	CREATED	MET	HOLD FUND
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You are logged in as **User Name:** Ryan Clinton ; **UserName:** Clinton_Ryan * INTERNALUSER

Snapshot Description: Application - Reviewed by Intake

Created: 3/18/2010 1:21:32 PM