

**Project Safe Neighborhood (PSN)
Anti-Gang Initiative and
Community Prosecution/Reducing Gun Violence and Crime**

General Application Guidelines

The Nevada Department of Public Safety, Office of Criminal Justice Assistance (OCJA), is the fiscal agent for the Project Safe Neighborhood (PSN). Please review these guidelines carefully to apply for funding. The Catalog of Federal Domestic Assistance (CFDA) number for the Anti-Gang Initiative solicitation is **16.744**. The CFDA number for the PSN Reducing Gun Violence and Crime solicitation is **16.609**.

The hyperlinks in the document will assist you in your application process. Save your documents regularly to prevent losing data. At any time you can jump through the document by using CTRL G, going to Bookmarks and selecting the area to jump to from the dropdown menu.

If you haven't done so, save this document to your hard drive before continuing.

PSN GRANT APPLICATION DEADLINE 4:00 p.m., JUNE 8, 2007

Eligible Applicants

This program provides financial assistance to state and local units of government, educational institutions, faith-based and other community organizations.

Funding Areas

Department of Justice has dedicated PSN to fund current and expanded comprehensive anti-gang prevention and Community Prosecution/Gun Control efforts. The Anti-Gang Initiative funds will enhance PSN task force efforts to combat gangs by building on the effective strategies and partnerships developed under PSN. The Community Prosecution/Gun Control projects must target gun crime and violent offenders. PSN's five essential elements: 1) partnerships, 2) strategic planning, 3) training, 4) outreach, and 5) accountability. For more on these elements, visit www.ncjrs.org/html/bja/205263/. Additional guidance may be found at <http://www.ojp.usdoj.gov/BJA/psngrants/>

Grant Commencement and Duration

Grants will be awarded for a twenty-four month period. Grant award period will be 10/01/2007 thru 09/30/2009 or as determined by OCJA.

Match Requirements

There is no match requirement.

Grant Review and Selection Process

Eligible applications will be reviewed and evaluated by an independent review committee selected by the U.S. Attorney's Office. The committee will carefully review all sections of your Application. To avoid disqualification all areas must be concise and complete; certifications must be signed and dated; objectives must be measurable. If you have any questions, contact an OCJA Program Manager for guidance. ([contacts](#))

Reporting Requirements for Successful Applicants

Fiscal Reports: A Fiscal Report of grant expenditures is required monthly whether or not there were expenditures for the grant. The report is due by the **15th of each month**. Failure to submit **monthly fiscal reports** will prevent reimbursement of grant expenses and may jeopardize grant continuation. This form is available on the OCJA web page at <http://www.ocj.nv.gov>.

Progress Reports: Quarterly progress reports are required of subgrantees. Failure to submit progress reports will jeopardize grant continuation. Quarterly reports are due 30 days after the close of each quarter (Due Dates: January 30th, April 30th, July 30th and October 30th). **The final report is due by October 30th**. Forms are available on the OCJA web page at <http://www.ocj.nv.gov>.

Project Evaluation: Forty-five days (November 15th) after the close of the grant, subgrantees are required to supply OCJA with an evaluation of the program for which grant funds were awarded. This evaluation will be an important part of determining future funding.

Supplanting

Grant funds may not be used to replace state or local funds that would, in the absence of federal assistance, be available or forthcoming. Instead, grant funds must be used to increase the total amount of other funds available for the grantee agency's use.

A grant recipient may not use federal grant funds to defray any costs that the recipient is already obligated to pay. For example, if a grantee, **prior to** applying to participate in the grant program, had committed to purchase 10 new computers for crime analysis, then the grantee must purchase those 10 computers in addition to any computers approved in the grant budget.

INSTRUCTIONS FOR APPLICATION

This Request for Application (RFA) provides the necessary forms, instructions, and general information essential for those eligible to apply for grant funds. To receive the maximum number of points available, the application **MUST BE COMPLETED CORRECTLY**.

Mail to or Hand-deliver to:

**DEPARTMENT OF PUBLIC SAFETY
OFFICE OF CRIMINAL JUSTICE
1535 OLD HOT SPRINGS ROAD #10
CARSON CITY, NV 89711-0910**

[to: Map to OCJA - 1535 Hot Springs Road](#)

Each Application must be securely stapled in the top left-hand corner. Use 12 point font when preparing the Application.

- **DO NOT** bind Applications in notebooks, plastic bindings, or specially printed covers.
- **DO NOT** attach supplemental information (i.e. reports, booklets, etc.)

Application Packet - **Original** and **four** copies (stapled) of the **complete** Request for Application must include **all** of the following on the forms provided:

Part 1.	Title Page (4 points)
Part 2.	General Overview (10 points)
Part 3.	Problem Statement (15 points)
Part 4.	Goals and Objectives (15 points)
Part 5.	Method of Accomplishment (15 points)
Part 6.	Evaluation/Internal Assessment (15 points)
Part 7.	Sustainment (5 points)
Part 8.	Statement of Coordination (4 points)
Part 9.	Budget Information (itemized and narrative) (15 points)
Part 10.	Signed Certifications (2 points)

Fiscal Responsibilities - All recipients of federal funding are required to establish and maintain accounting systems and financial records to accurately account for funds awarded to them. Accounting systems for all federal projects **must** ensure the following:

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

All grant awards are subject to audits during and within three years after the grant award period has closed.

Allowable Expenses (check with a Program Manager if you have questions)

- Project personnel salaries and benefits, including overtime pay.
- Equipment necessary for implementation of the program.
- Building rental.
- Project personnel travel/training.
- Supplies & Operating expenses directly related to project operation.
- Professional services (including contractors and consultants).

Unallowable Expenses (not limited to the following – check with a Program Manager)

- Business Cards
- Late Charges
- Audit Services
- Membership Dues
- Newspaper Subscriptions
- Indirect Costs
- Land/Building Acquisition
- Badges
- Construction
- Rental Cars - unless previously justified and approved by OCJA
- Bonuses, Commissions, Gifts and Incentives
- Military-type Equipment
- Lobbying
- Fund Raising
- Legal Fees
- Supplanting: federal funds must be used to supplement existing funds for program activities and not replace those funds which have been appropriated for the same purpose
- Any expenditure not directly related to the program
- Sales tax
- Gun locks (for details, see www.projectchildsafe.org).
- Confidential funds
- Gun buy-back programs
- Air-time to run the national public service announcements “Mothers,” “Sentenced,” and “Family Prison.”

GRANT PREPARATION INSTRUCTIONS

READ CAREFULLY

CONTACT PROGRAM MANAGER FOR ASSISTANCE

Part 1. TITLE PAGE (Mandatory Form) – (4 points)

Using Microsoft Word, tab through document and enter appropriate information. Make sure the budgeted numbers are the same as on the completed budget application pages.

DO NOT ALTER FORM

DO NOT CREATE YOUR OWN FORM OR APPLICATION WILL BE RETURNED TO YOU

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[PSN Title Page](#)

Part 2. GENERAL OVERVIEW / INTRODUCTION – (10 points)

This area is to outline the main focus of your grant program, giving overall details of your program and what your program will accomplish. Statistical information is not necessary in this section. If this is a continuation program, include past and present accomplishments and future plans. Be brief. Be specific. Avoid jargon and spell out acronyms. Keep it simple. Establish who you are and what your project will address.

To begin writing the Overview section of your application, [click here](#) ➡.
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Limit to 1 1/2 typewritten pages, single spaced, 12 point font

Part 3. PROBLEM STATEMENT – (15 points)

The problem statement is a written presentation that describes all aspects of a problem including its nature, magnitude, severity, rate of change, persons/entities affected, and geographic scope. The problem statement must clearly describe and substantiate the overall issue(s) to be addressed by the project.

The problem statement should be in narrative form and include, but not necessarily be limited to, the following:

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

The problem statement should include appropriate and most recent statistics (including sources of information) which document the problem (i.e. arrest rates, conviction rates, probation rates, incarceration rates, number of individuals receiving treatment, etc.) Demonstrate rates of increase or decrease in the problem by showing the percentage of change for a period of time covering at least two or more years. Document percentages of change with actual numbers (i.e., From 2005 to 2006, drug arrests increased 100%; 2005 - 100 arrests; 2006 - 200 arrests). **Reflect these in your objectives.** Include reference sources (footnotes) when needed.

To begin writing the Problem Statement section of your application, [click here](#) ➡.

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Limit your problem statement to 2 typewritten pages, single spaced, 12 pt. Font

Part 4. GOALS AND OBJECTIVES – (15 points)

Project Goals: This section should contain a separate discussion of each of the program goals and its accompanying objectives. The goals are general statements of the desired results or anticipated outcome of the program. They should address the problem identified in the problem statement. The goals should be generic enough to encompass more than one project and be both realistic and achievable. Goals should NOT be stated in measurable terms.

- What do you want to achieve?
- Explain the goal(s) of the project in simple, straightforward terms. **One or two** overall goals are sufficient.
- The goal(s) should identify intended impacts or outcomes and the results the program has been established to achieve.
- Each goal should have one or more **measurable** objective describing how you intend to reach that goal.
- Be realistic.
- State your goals in such a way a determination of whether or not they are being achieved is possible.
- Your goals MUST tie into your problem statement and outcome evaluation.

Project Objectives: Each goal should have no more than four objectives. The objectives are the specific approaches to achieving each of the goals. Objectives focus on the methods/activities to be used to address the problem; they MUST be clearly stated, realistic, and **measurable**. Use the statistics from the Problem Statement. The measurements will be used in the evaluation of the project. The accomplishment of objectives should result in the achievement of the goals they support. **OBJECTIVES THAT ARE NOT MEASUREABLE WILL BE CAUSE FOR REJECTION OF YOUR APPLICATION.**

Answer these questions in each objective:

- C WHAT you will do?
- C WHO will do the tasks?
- C WHEN will the activity be implemented?
- C HOW will they do it and HOW will they measure it?
- C INCLUDE a timetable; it demonstrates you have thought your program through.
- C AVOID the words might, if, could, should, would.
- C AVOID the words "To Provide". This is always a method to achieve the objective.

Objectives describe:

- How you will achieve your goal(s)?
- The activities necessary to accomplish your goals.
- The objective in terms that can be **measured, qualified, quantified and evaluated**.
- A timetable, where applicable, of when each objective will be met.

To see an example of a measurable objective, [click here](#) ➡

Tip: *Your goals and objectives MUST tie into the evaluation process. Both of these sections will connect with your quarterly progress reports. Don't have too many objectives, i.e. more than four is too many. Remember you must report on the progress of every objective quarterly.*

To begin writing the Goals & Objectives section of your application, [click here](#) ➡.

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Part 5. METHODS OF ACCOMPLISHMENT – (15 points)

You **MUST** reference your goals and objectives and statistics from the Problem Statement. This section should describe the activities you will use to accomplish the objectives. Include the performance measures required by BJA. Use the following guidelines:

- Read your Problem Statement
- Read the required Performance Measures.
- How do you intend to solve the problem or improve the situation?
- Discuss how your approach method will improve the situation and explain why this activity is being pursued.
- Provide a narrative showing how PSN funding will impact or solve the stated problem.
- A specific need for training must be identified.
- What activities will you implement to reach an objective?
- These must tie to each goal and objective.

Limit your Methods of Accomplishment to 2 typewritten pages, single spaced, 12 pt. font

Tip: *There should be no surprises in your methods. Objectives fully disclose your intentions and your methods are simply an extension of your objectives.*

To begin writing the Methods section of your application, [click here](#) ➡.

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Part 6. PROJECT EVALUATION/INTERNAL ASSESSMENT – (15 points)

The evaluation must tie to the objectives and the BJA established performance measures. If you have difficulty in determining what criteria to use in evaluating your program, better take another look at your objectives and how you plan to measure them.

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

Every project design must include an evaluation plan to determine whether the project is accomplishing its objectives. The evaluation should be designed to provide an objective and independent assessment of the effectiveness or usefulness of the program.

Provide a plan to determine whether the project accomplished the goals and objectives it was designed to meet. The plan should present the qualifications of the evaluator. Describe the criteria used to evaluate the project's effectiveness. Consider using an outside evaluator if at all possible. This will make your results more credible.

When submitting a final report, you must also submit your evaluation of the project. Both are due 45 days after the end of the project period.

To begin writing the Evaluation section of your application, [click here](#) ➡.

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Part 7. SUSTAINMENT (5 points)

How will your project continue operation when grant funds are no longer available? There is no guarantee grant funds will be available for your project in the future. Provide a detailed summary of the plan to continue operations when these funds are not available or are significantly reduced.

To begin writing the Sustainment section of your application, [click here](#) ➡.

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Part 8. STATEMENT OF COORDINATION – (4 points)

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

Multi-jurisdictional task forces must provide a Memorandum of Understanding (MOU). MOU must contain details as to the disposition of equipment purchased with grant funds if the task force is dissolved. ***MOU must be updated and signed annually. If a State of Nevada agency, an Inter-local Agreement must be submitted in lieu of an MOU.***

Many programs succeed due to the collaborated efforts of federal, state and/or local criminal justice, education, prevention, treatment and law enforcement agencies. Describe your efforts to coordinate, cooperate, or work with other entities to ensure the success of the project activities. This will reflect favorably on your application.

To begin writing the Coordination section of your application, [click here](#) ➡.

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Part 9. BUDGET INFORMATION – (15 points)

BUDGET COVER PAGE - All project costs **MUST** relate directly to and be necessary for the tasks described in the Methods. The Budget Cover Page will be a simple line item budget identifying the following categories as they apply to your program:

1. Personnel costs (all costs related to salary, benefits, etc.)
2. Consultant/Contractual Services (costs must not exceed the federal limitation of \$450 for an 8-hour day or \$56.25 per hour)

3. Travel AND Training Costs (travel, transportation, room costs, meals, parking, etc.)
Note: State per diem rates will prevail unless local rates are less.
4. Supplies/Operating Expenses
5. Equipment

Miscellaneous and Other are not considered costs. If these terms are used in any category, the corresponding cost will be deducted.

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

MAKE SURE THE NUMBERS ADD UP CORRECTLY AND MATCH THE TITLE PAGE.

The budget form contains space for the budget justification (use additional sheet if necessary). This justification should include the details of how the amounts presented in the budget were determined. Specific instructions for completing each section of the budget are included on the budget pages. If you have questions or concerns related to how to complete the budget pages, please call (775) 687-3700 or an OCJA Program Manager for assistance ([contacts](#)).

When reviewing your budget, ask “Is this budget reasonable? Are these items necessary to the success of our program?” If you previously had a PSN grant, look at the budget for the last 2 years versus this requested budget. Are you duplicating purchases from previous years?

Each Budget Category must be addressed separately as follows:

Category A - PERSONNEL COSTS

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

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

Instructions for Completing Budget Forms

1. **Direct Salaries and Overtime** - Write in the title or position of each new employee or each existing employee who will earn overtime for grant-related activities or will be compensated with grant funds during training sessions. Across from each position/job title listed, write in the annual salary for employee or the overtime wage (dollar/hour) for the position, percent of time to be devoted to the project (for a new employee) or number of overtime hours and the total cost for the position. At the bottom of Section I, write in the total of the funds requested.
2. **Fringe Benefits** - All fringe benefits are to be listed on the budget pages and will be included in the total personnel costs. For fringes not listed, add under “other” and describe, i.e. uniform allowance, etc.
3. **Total Personnel** – The total should auto-calculate; however, if it doesn’t, write in the total requested or call OCJA for assistance.
4. **Personnel Budget Narrative** - A brief statement explaining the cost basis for each position. Explain how each position is related to and essential to the project. Explain why the grant should pay for the personnel requested. Are they essential to the success of the project?

To begin typing Personnel Budget Narrative, [click here](#) ➡

Category B - CONSULTANT/CONTRACTUAL SERVICES

1. **Individuals** - Complete Section 1 for individuals not on the regular payroll who will be reimbursed for professional services.
 - a. **Consultant Fees** - For each individual consultant, enter the name, if known, service to be provided, hourly fee and estimated time on the project in hours. Fees must not exceed federal guidelines (\$450 per 8 hr. day or \$56.25/hour).
 - b. **Consultant Expenses** - List all expenses to be paid from the grant to individual consultants in addition to fees on the line number which corresponds to the line number of each consultant listed in subsection (a). List the rates used to calculate travel, meal and other expenses. Cost may not exceed the state rate.
 - c. **Total Consultant Costs** - The total should auto-calculate; however, if it doesn’t, write in the total requested.

2. Consultants and Contractors Budget Narrative A narrative is required explaining the basis or criteria for selection of each consultant and describing how the service to be provided is essential to the project. Detail costs and necessity to the project in the budget narrative section.

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

To begin typing Consultant Budget Narrative, [click here](#) ➡

Category C - Travel Expenses

- 1. In-State Travel** - List each anticipated in-state trip outside the local jurisdiction stating the purpose of the trip, destination, and total. Breakdown of per diem costs must be included.
- 2. Out-of-State Travel** - List each anticipated out-of-state trip stating the purpose of the trip, destination, and total cost (e.g. training, interview, operations, etc.) A breakdown of per diem costs must be included. Three persons maximum allowed per trip.
- 3. Total Travel Budget** - The total should auto-calculate; however, if it doesn't, write in the total requested or call OCJA for assistance.
- 4. Travel Budget Narrative** - A narrative explaining the purpose of the travel and how it relates to the project.

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

Per diem *	In-State Travel	Out-Of-State Travel
Breakfast - Breakfast may be claimed if travel begins at 6:30 AM or before.	\$ 5.50	\$ 5.50
Lunch - Lunch may be claimed if travel is between 11:30 AM-1:00 PM.	\$ 6.50	\$ 6.50
Dinner - Dinner may be claimed if travel status is 6:30 PM or later.	\$ 14.00	\$ 14.00
Incidental Expense (gratuities, tolls, etc.)	\$ 2.00 per day	\$ 2.00 per day
Lodging:	\$ 58.00	Training and/or conference hotel rate (Receipt must be submitted) **
<p>* Meals included in conference or meeting registration fees, or meals on airlines will not be reimbursed. Employees must be at least 15 miles from work station to claim reimbursement. (A copy of the agenda must be attached to claims for reimbursement.)</p> <p>** Excessive lodging rates must be justified and have prior OCJA approval.</p> <p>Current State mileage rates for personal vehicle usage will apply. Check with OCJA for the current rate.</p>		

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

Travel/Training not approved in budget will require justification and pre-approval by the OCJA program manager.

5. **Training** must be necessary for the success of the project and be for a project employee. (No more than three persons may attend an out-of-state training without prior approval.) Reimbursement for training costs may not be submitted until training has been completed and paid for by the agency.

To begin typing Training Budget Narrative, [click here](#) ➡

Category D - Supplies and operating expenses

1. **Supplies/Operating** - This Section includes office supplies, forms, project supplies, repairs or maintenance supplies, and equipment items costing under \$500; essentially, material which is expendable or consumed during the course of the project.

List items such as postage, forms, office supplies, training materials, etc. along with the quantity, unit cost, and total cost. Explain how you came up with the amount you are requesting.

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

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

2. **Total Supplies and Operating Expense Budget** - The total should auto-calculate; however, if it doesn't, write in the total requested or call OCJA for assistance.
3. **Supplies and Operating Expenses Budget Narrative** - A narrative that describes the basis for arriving at the cost of items listed is required. If you rent or lease equipment or facilities, explain in the narrative. Include the rate for each rental in the budget. For Maintenance Agreements, detail each item covered under the contract. **Items without narrative will be deducted.**

Example 1: \$200/year for computer maintenance agreement for x number of computers.

Example 2: \$1,008/year for Office Supplies = 2 employees @ \$42/each per month.

To begin typing Supplies & Operating Budget Narrative, [click here](#) ➡

Category E – Equipment

List only those items that are to be purchased with PSN funds. **Do not include expendable items costing less than \$500 per unit.** Do not include rental or lease equipment. Do not list brand names, rather, use the generic description of the item you are requesting.

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

OCJA requests equipment purchases go through the 1122 Program. This will be outlined further in the "Special Conditions" form attached to your grant award.

1. **Total Equipment Costs** - Total should auto-calculate; if not, enter the total cost of equipment for the project.

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2. **Equipment Budget Narrative** - A narrative describing how the equipment will benefit the project, why it is necessary to the project and consequences of not purchasing the equipment.

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

BUDGET NARRATIVE - This is an explanation of the line items identified for each category on the BUDGET COVER PAGE. Briefly define the relationship between the budgeted items listed within each category and the project activities. BUDGET NARRATIVES MUST BE INCLUDED FOR EACH BUDGET CATEGORY. **FOLLOW INSTRUCTIONS CAREFULLY.**

To begin writing the Budget section of your application, [click here](#) ➡.

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NEGOTIATION OF FINAL TERMS INCLUDING BUDGET: Based upon the recommendations of the Review Committee, OCJA personnel may negotiate conditions of the project or the project's budget with the applicant.

To begin typing Equipment Budget Narrative, [click here](#) ➡

Part 10. CERTIFIED ASSURANCES/SIGNATURE FORMS (2 points)

Four mandated forms must be properly signed for the Application to be valid.

1. CERTIFIED ASSURANCES - This two-page form must be signed by the Governmental Unit (i.e., Mayor, County Commissioner, City Supervisor) **and** the Applicant Agency (i.e., Police Chief, Sheriff, District Attorney, State Agency Director) for this Application to be valid. *If it is not possible to secure both signatures, a statement must be included with the Application certifying the signatures will be obtained prior to commencement of grant.* If the fully executed form is not received by OCJA by the deadline, the award may be canceled or prorated.
2. CERTIFICATIONS REGARDING LOBBYING; DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS; AND DRUG-FREE WORKPLACE REQUIREMENT - Read carefully before signing. Please call this office at (775) 687-3700 if you have any questions ([contacts](#)).
3. EQUAL EMPLOYMENT OPPORTUNITY PLAN FORM
4. IMMIGRATION AND NATURALIZATION SERVICE FORM - All applicants must submit the INS assurance form included with this Application. It is required that all law enforcement agencies be in compliance and report to the INS when a suspected alien is arrested for a felony or deportable misdemeanor.

To begin writing the Assurances section of your application, [click here](#) ➡.

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Part 11. Application CHECKLIST

The Application Checklist is included **for your use only** and should not be returned with your application forms. This checklist will ensure you have included all pertinent documents with your application form. You must submit an **original and four copies** to OCJA by the deadline.

To go to the Checklist, [click here](#) ➡

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ADDITIONAL INFORMATION

A complete Application addresses each of the sections listed above. If you should have any questions in the preparation of your Application, format or funding please call (775) 687-3700 or a program manager shown on the staff listing for assistance ([contacts](#)).

Appeals

Applicants whose requests are not funded have the right to appeal the decision. Any applicant whose Application has been filed according to the rules governing the grant process, and who is aggrieved by the awards made pursuant to these rules, may request an appeal based on showing that the rules governing the grant selection process have not been properly applied.

Requests for appeal must be filed with U.S. Attorney, District of Nevada, 333 Las Vegas Blvd South, Suite 5000, Las Vegas, NV 89101, within seven working days of the notification of denial. Requests for appeal must be in writing and clearly state how the Office of Criminal Justice Assistance or the review committee erred in following the administrative rules governing the grant process or the procedure outlined in the program RFA. The review will be conducted as expeditiously as possible so all funds can be distributed in a timely fashion. This procedure concludes the review process at the administrative level.

Avoid common pitfalls –

- *Ensure budget figures are mathematically correct, and the total of the budget summary matches the total on the title page;*
- *Observe page limitations;*
- *Use standard type size (12 point font);*
- *Respond to all sections of the Application;*
- *Remember any funds referred to as miscellaneous/other in the budget section will be disallowed;*
- *Supply the required number of copies (**one original and four (4) copies**), without binding. If all required copies are not included, your grant cannot be accepted.*

HELPFUL HINTS

To help write a successful proposal, ask yourself the following questions.

Have you:

1. Read the solicitation carefully?
2. Followed all instructions, including:
 - a. The recommended format?
 - b. The narrative content and length?
 - c. The required font, spacing, etc?
3. Provided all required information, i.e.
 - a. Completed all the forms?
 - b. Filled in all the blanks?
 - c. Obtained all official signatures?
4. Developed a proper narrative that:
 - a. Defined the problem?
 - b. Specified proposed actions?
 - c. Stated how actions will solve the problem?
 - d. Described evaluation criteria?
 - e. Included source information for factual citations?
5. Used clear English, in particular:
 - a. Avoided acronyms, unless defined?
 - b. Avoided technical jargon?
6. Developed a budget that contained the costs of the proposal? Are your costs:
 - a. Reasonable?
 - b. Allowable?
 - c. Cost effective in relation to the proposed activities?
 - d. Accurately calculated?
7. Have you created measurable objectives? Are they within the specified guidelines?
8. Made all of the required copies?
9. Finished by the deadline?

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CHECKLIST

The following items must be returned as part of the Grant Application.

- ☐ Title Page
- ☐ Overview
- ☐ Problem Statement
- ☐ Goals & Objectives (Must be measurable)
- ☐ Methods of Accomplishment
- ☐ Evaluation/Internal Assessment
- ☐ Budget Form with narratives
- ☐ Inter-Agency Agreement or Memorandum of Understanding for current year
- ☐ Certified Assurances (Must be signed by authorized official. Please use blue ink)
- ☐ Certification regarding Lobbying and Debarment and Drug-Free Workplace Requirements
- ☐ Equal Employment Opportunity Plan Form
- ☐ Immigration and Naturalization Service Form
- ☐ Return **Original** and **Four** copies stapled in upper left corner to OCJA by the deadline.

THIS FORM IS FOR CONVENIENCE ONLY
AND **SHOULD NOT BE RETURNED** WITH APPLICATION

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**Office of Criminal Justice Assistance
1535 Old Hot Springs Rd #10
Carson City NV 89706
(775) 687-3700 Fax(775) 687-4171**

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To return to a specific location in the Application Guidelines,

- CTRL G
- Select BOOKMARK
- Select location from the DROPDOWN MENU
- Click GOTO
- Click CLOSE

Another method is to go to VIEW, DOCUMENT MAP

To return to TOP of Guidelines, [click here](#)

Part 2. GENERAL OVERVIEW

*This will be a “general” synopsis of your program. **No statistics.** Tell the reviewer who you are, what you have achieved and what you hope to accomplish. Begin typing below this box.*

[Return to Guidelines](#)

[Continue to Problem Statement](#)

Part 3. PROBLEM STATEMENT

Be very specific. Tell the reviewer exactly what you want to do. Explain why you believe there is a problem. Use recent statistics and references. You must include the statistics which will drive your objectives. Begin typing below this box.

[Return to Guidelines](#)

[Continue to Goals & Objectives](#)

Part 4. GOALS & OBJECTIVES

*This is a critical component of your application process. **Read the Guidelines carefully before continuing with this section.** Errors in this section can cause your entire application to be rejected.*

Use the statistics collected for the Problem Statement.

Goal 1:

[Example of Goal & Objective](#)

[Return to Guidelines](#)

[Continue to Methods](#)

Part 5. METHODS OF ACCOMPLISHMENT

How will you plan to achieve your goals and objectives. Be specific.

[Return to Guidelines](#)

[Continue to Evaluation](#)

Part 6. EVALUATION OF PROJECT

You should consider either hiring an outside evaluator or having someone who is not affiliated with your program do an evaluation for you. The final evaluation of your program must be submitted within 90 days of the grant closing. Begin typing below this box.

[Return to Guidelines](#)

[Continue to Sustainment of Program](#)

Part 7: Sustainment of Program

Describe how your program will continue when federal funding is no longer available or is significantly reduced. Begin typing below this box.

[Return to Guidelines](#)

[Continue to Coordination of Project](#)

Part 8: Statement of Coordination

Describe what other agencies/departments/resources will be involved in your program and how they will assist in your efforts to achieve your goals. Begin typing below this box.

[Return to Guidelines](#)

Be sure to save this document.

Example One

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

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

Your goal actually contains two problems: the first is recidivism and the second, Court resources. We cannot assume that recidivism by itself is the source of the Court's overwhelm.

So, you'll also need to measure the impact that recidivists have on the Court. Your problem statement for this element should demonstrate that, of the total man-hours (account for Judges, prosecutors and support staff) per week/month/year the Court expends, **xx%** is spent dealing with recidivists. Compare that to other Courts' data as suggested above.

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

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

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

The number of recidivists appearing before the Court [*who*] will be reduced [*will do what*] by 8% [*how much*] in fiscal year 2003 [*when*], as measured by an ongoing analysis of Court records [*as measured by*].

In order for this objective to have merit:

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

The end result is an objective proposal in which the definition of success is agreed to in advance. Oversimplified, it reads like this: "The Court sees 1,800 cases per year of which 400 are recidivists.

The proposed program will reduce this number to 300 for a total annual recidivist case load of 1,400, and we're going to prove it by counting the number of recidivists seen by the Courts next year."

It is important you distinguish between "process objectives" and "outcome objectives." We MUST have measurable "outcome objectives" to see what progress is being made in your program.

Process objectives may be very useful but should only appear in the Methods section of your proposal so they are not confused with the results of your proposed.

Example of a Process Objective (not acceptable in your application)

Ten Narcotic officers will complete a 5 week training program by the end of the 2006 academic year, measured by program attendance records.

Example of an Outcome Objective (acceptable in your application)

Ten Narcotic officers [who] will increase their grant writing skills [what] by 20% [how much] by the end of the 2006 fiscal year [when] as measured by pre and post program test scores [as measured by].

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

[Continue to writing Goals & Objectives](#)

[Go to Top of Guidelines-](#)

OFFICE OF CRIMINAL JUSTICE ASSISTANCE
PROJECT SAFE NEIGHBORHOOD (PSN)
ANTI-GANG INITIATIVE AND
COMMUNITY PROSECUTION/REDUCING GUN VIOLENCE & CRIME

Tab through this document entering requested data. Do not leave spaces blank. If not applicable, enter N/A. Save the document with a new name before printing.

Applicant Agency: Enter the official title of the agency requesting the grant.

Address: Enter the mailing address of applicant agency.

Project Title: Enter a brief descriptive title. A previously funded application should have the same title it used in the past. Be sure to **check with an X, either** ANTI-GANG **or** REDUCING GUN VIOLENCE & CRIME.

Project Period: Enter the expected starting and completion dates of the project. Unless pre-approval has been given by OCJA, the dates will be October 1 through September 30.

Project Director: Enter the name, title, address, phone number, fax number, and e-mail address of the person who will have direct responsibility for administering the project.

Fiscal Officer: Enter the name, title, address, phone number, fax number, and e-mail address of the person who will be responsible for the fiscal management of the project. The fiscal officer **MUST** be someone other than the project direct.

Project Contact Person: Enter the name, title, address, phone number, fax number, and e-mail address of the person we should contact with questions regarding this grant. This should be the person actually administering the project.

Budget Summary: When you have completed the budget pages, fill in this budget summary. Double check all addition to make certain all numbers match.

The **sheriff, division chief, agency head, or other official** ultimately responsible for this program must sign this document.

OFFICE OF CRIMINAL JUSTICE ASSISTANCE
PROJECT SAFE NEIGHBORHOOD (PSN)
ANTI-GANG INITIATIVE OR REDUCING GUN VIOLENCE & CRIME

Title Page

Applicant Agency: _____

Address: _____

Project Title: Please Check with an X: ANTI-GANG OR REDUCING GUN VIOLENCE

Project Period: From: _____ To: _____

Project Director:

Name: _____ Title: _____

Address: _____ City/Zip: _____

Telephone: _____ Fax: _____

E-mail: _____

Fiscal Officer:

Name: _____ Title: _____

Address: _____ City/Zip: _____

Telephone: _____ Fax: _____

E-mail: _____

Project Contact Person :

Name: _____ Title: _____

Address: _____ City/Zip: _____

Telephone: _____ Fax: _____

E-mail: _____

Budget Summary:

	Federal \$ Requested
Personnel	
Travel/Training	
Supplies/Operating	
Equipment	
Contractor/Consultant	
TOTAL FEDERAL \$ REQUESTED	

Certification:

The signature of the authorized official of the agency making application hereby certifies the accuracy of the information application and agrees to comply with all provisions of the applicable grant program.

Name: _____

Telephone _____

Title: _____

Fax _____

Signature

Date

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