CHECKLIST

Prior to application due date:

- Obtain a Data Universal Numbering System (DUNS) number.
- Register with the <u>System for Award Management (SAM)</u>.
- Apply for, update or verify the <u>Employer Identification Number (EIN)</u>.
- Create a Grants.gov account with username and password.
- Complete registration in the <u>Grantee GATA Portal</u>.

Submission Checklist:

- Uniform Application for State Grant Assistance Submitted in PDF (signed, and scanned) AND Word file
- Program Narrative –Do not change the format of this document. Submitted in Word File
- Budget/Budget Narrative –Excel format (no signatures required for this document at this time)
- United States Internal Revenue Service 501(c)(3) determination letter PDF (Non-Profit Agency Required)
- Letters of Commitment for all minimum members -PDF (for track one only)

Uniform Notice for Funding Opportunity (NOFO) (REVISED) Violence Prevention Planning and One-Time Supports

	Data Field	
1.	Awarding Agency Name:	Illinois Criminal Justice Information Authority (ICJIA)
2.	Agency Contact:	Reshma Desai
		Illinois HEALS Project Director
		Illinois Criminal Justice Information Authority
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		Chicago, Illinois 60606
		Reshma.desai@Illinois.gov
2	A	312.793.7057
3.	Announcement Type:	X Initial announcement
4.	Type of Assistance Instrument:	☐ Modification of a previous announcement Grant
	Type of Assistance Instrument:	
5.	Funding Opportunity Number:	2179-1255
6.	Funding Opportunity Title:	Violence Prevention and Street Intervention Programs
		(VP-SIP)
7.	CSFA Number:	546-00-2179
8.	CSFA Popular Name:	Violence Prevention and Street Intervention Programs (VP-SIP)
9.	CFDA Number(s):	NA
10.	Anticipated Number of Awards:	60
11.	Estimated Total Program Funding:	\$8,336,326
12.		See Background section
13.	Source of Funding:	☐ Federal or Federal pass-through
	_	X State
		□ Private / other funding
14.	Cost Sharing or Matching Requirement:	□ Yes X No
15.	Indirect Costs Allowed	X Yes □ No
		□ Yes X No
	Restrictions on Indirect Costs	
16.	Posted Date:	September 30, 2019
17.	Application Range:	September 30, 2019 – October 31, 2019 December 2, 2019
18.	Technical Assistance Session:	Session Offered: X Yes □ No Session Mandatory: □ Yes X No
		It is recommended that applicants view the recorded technical assistance, which will be available beginning on October 2, 2019.

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Notice of Funding Opportunity Violence Prevention Planning and One-Time Supports

A. Program Description

The Illinois Criminal Justice Information Authority (ICJIA) is a state agency dedicated to improving the administration of criminal justice. ICJIA brings together key leaders from the justice system and the public to identify critical issues facing the criminal justice system in Illinois, and to propose and evaluate policies, programs, and legislation that address those issues. The statutory responsibilities of ICJIA fit into four areas: grants administration; research and analysis; policy and planning; and information systems and technology.

Section 7 of the Illinois Criminal Justice Information Act grants ICJIA authority "to apply for, receive, establish priorities for, allocate, disburse, and spend grants of funds that are made available by and received on or after January 1, 1983 from private sources or from the United States pursuant to the federal Crime Control Act of 1973, as amended, and similar federal legislation, and to enter into agreements with the United States government to further the purposes of this Act, or as may be required as a condition of obtaining federal funds" and "to receive, expend, and account for such funds of the State of Illinois as may be made available to further the purposes of this Act." (20 ILCS 3930/7(k), (l))

ICJIA must comply with all applicable provisions of state and federal laws and regulations pertaining to nondiscrimination, sexual harassment and equal employment opportunity, including, but not limited to: The Illinois Human Rights Act (775 ILCS 5/1-101 et seq.), The Public Works Employment Discrimination Act (775 ILCS 10/1 et seq.), The United States Civil Rights Act of 1964 (as amended) (42 USC 2000a-and 2000H-6), Section 504 of the Rehabilitation Act of 1973 (29 USC 794), The Americans with Disabilities Act of 1990 (42 USC 12101 et seq.), and The Age Discrimination Act (42 USC 6101 et seq.).

1. Purpose

In state fiscal year 2020, \$12 million was appropriated to ICJIA for Violence Prevention and Street Intervention grants and administration. \$8,336,326 is available under this solicitation to provide funding for violence prevention¹ planning grants for communities, as well as funding for one-time costs to support and/or enhance existing violence prevention programs across Illinois.

This Notice of Funding Opportunity (NOFO) offers two tracks: Track 1 is for violence prevention planning and Track 2 is for one-time supports for existing violence prevention programs. Applicants can apply to both tracks. If an applicant applies for both tracks, the

Version 3.6.19 Page **4** of **35** applicant must submit a separate application, narrative, and budget for each proposal. The projected grant period will be January 1 February 1 to June 30, 2020.

For the purposes of this NOFO, the term *violence prevention* will include street intervention as it is an approach used with selected and indicated populations. These terms will be defined in the Background section below.

For Track Two, we employ a broad definition of "violence prevention program" which may consist of any programming that addresses the protective factors and/or risk factors for children, youth, adults, families and communities at risk for being harmed by, or using, violence. Activities may include early childhood, parent engagement, and afterschool and recreational programming that supports participants' development of pro-social and conflict resolution skills. It may also include additional activities such as mentoring, tutoring, and group activities that support participants' success in educational and social domains.

Future funding for grants to implement planned programming will be dependent upon funds availability and will require completion of a separate competitive NOFO process.

Total Available Funding

Geographic Area	Track One: Violence Prevention Planning Allocation*	Track Two: Violence Prevention One- Time Support Allocation*	Total Available
Chicago	\$750,000	\$1,316,326	\$2,066,326
Suburban Cook, DuPage, Kane, Lake, McHenry and Will Counties	\$1,800,000	\$1,800,000	\$3,600,000
Balance of the state	\$1,350,000	\$1,350,000	\$2,700,000

^{*}Any available funding not used in one track can be applied to the other.

Range of Grant Award Amounts

The amounts below represent the minimum and maximum grant award amounts that applicants can request.

Geographic	Track One: Violence	Track Two: One-time
area	Prevention Planning	Supports for Existing
		<u>Violence Prevention</u>
		Programming
Chicago	\$25,000 - \$500,000	\$25,000 - \$1,000,000
Suburban Cook,	\$50,000 - \$200,000	\$25,000 - \$1,000,000
DuPage, Kane,		
Lake, McHenry		
and Will		
Counties		
Balance of the	\$25,000 - \$200,000	\$25,000 - \$1,000,000
state		

The geographic areas above reflect the language used to appropriate funds by geographic areas; however, applicants need not submit a proposal that provides services or benefits to the entire region.

Background

Individuals can experience various types of victimization in their homes, schools, and communities. These victimizations may include assault and battery; sexual assault; firearm violence; emotional, physical, psychological, or sexual abuse; neglect; bullying; dating and domestic violence or exposure to violence. Some experience multiple forms of victimization and exposure that contribute to more complex trauma symptoms. In 2017, there were 120,828 claims of child abuse and neglect (25 percent of which were indicated) and 7,743 claims of child sexual abuse (25 percent of which were indicated) reported to the Illinois Department of Children and Family Services. In addition, 12,424 children and youth were served by Child Advocacy Centers.

A total of 54,771 reports of violent index crimes, including 984 murders and 5,330 sexual assaults,⁴ and 115,362 domestic offenses were made to Illinois law enforcement.⁵

⁴ Illinois Criminal Justice Information Authority analysis of Illinois State Police 2017 Uniform Crime Report data.

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² Illinois Department of Children and Family Services (2018). *Executive statistical summary*. Available at: https://www2.illinois.gov/dcfs/aboutus/newsandreports/Documents/ExecStat.pdf.

³ Child Advocacy Centers of Illinois (2018). Retrieved from: https://www.childrensadvocacycentersofillinois.org/learn/illinois-statistics.

⁵ Illinois Criminal Justice Information Authority analysis of Illinois State Police 2017 Uniform Crime Report, Supplemental Domestic Offenses data. Data on specific types of victimization children and youth are exposed to in Illinois are limited. Data collected through the Illinois Uniform Crime Report program entails police agencies reporting aggregate crime data to the State Police on a monthly or quarterly basis. The aggregate data are not reported in a manner that would allow for analysis by victim age or other characteristics. Thus, while not all of these incidents involved children and youth direct or indirect victimization, they do illustrate the extent to which violent crime is occurring in Illinois.

Additionally, in a 2017 Center for Disease Control national study, 21 percent of Illinois high school students stated they were bullied on school property and 17 percent said they were electronically bullied.⁶ Finally, 16,507 reports of abuse, neglect, and financial exploitation were received by Illinois' Adult Protective Services program, including 2,971 reports involving adults between the ages of 18 and 59 with a disability. Most were living at home or with a relative.⁷

The volume of violent incidents, however, does not speak to the profound impact both direct and indirect exposure to victimization can have on individuals, families, and communities. Victimization experiences can cause post-traumatic stress disorder, depression, and anxiety, negatively impact healthy development and decrease academic achievement, and increase future victimization risk. These experiences inform the ability to interact with others and may be passed on to subsequent generations through both environmental and possibly genetic pathways.

Research also has demonstrated that people living in communities with high rates of violence retreat from public spaces for their own safety, which may lead to reduced supports and opportunities for positive social-emotional development. Additionally, public spaces in these communities are often neglected, which can leave residents feeling unsafe. This negative cycle can be partially reversed by an even modest reinvestment in public spaces. Reactive cycle can be partially reversed by an even modest reinvestment in public spaces. Reactive cycle can be partially reversed by an even modest reinvestment in public spaces. Reactive cycle can be partially reversed by an even modest reinvestment in public spaces. Reactive cycle can be partially reversed by an even modest reinvestment in public spaces. Reactive cycle can be partially reversed by an even modest reinvestment in public spaces. This negative cycle can be partially reversed by an even modest reinvestment in public spaces. This negative cycle can be partially reversed by an even modest reinvestment in public spaces. This negative cycle can be partially reversed by an even modest reinvestment in public spaces. This negative cycle can be partially reversed by an even modest reinvestment in public spaces. This negative cycle can be partially reversed by an even modest reinvestment in public spaces. This negative cycle can be partially reversed by an even modest reinvestment in public spaces. This negative cycle can be partially reversed by an even modest reinvestment in public spaces. This negative cycle can be partially public spaces in these communities are often neglected, which can leave residents feeling unsafe. This negative cycle can be partially public spaces. This negative cycle can be partially pu

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⁶ Center for Disease Control. (2017). *Youth risky behaviors survey*. Retrieved from https://www.cdc.gov/healthyyouth/data/yrbs/results.htm.

⁷ Illinois Department on Aging. Retrieved from: https://www2.illinois.gov/aging/ProtectionAdvocacy/Pages/APS-Statistics.aspx

⁸ Office for Victims of Crime. (2012). *Child abuse and neglect*. Office for Victims of Crime Training and Technical Assistance Center's website:

 $[\]frac{https://www.ovcttac.gov/downloads/views/TrainingMaterials/NVAA/Documents_NVAA2011/ResourcePapers/Color_Child%20Abuse%20Resource%20paper%202012_final%20-%20508c_9_13_2012.pdf.$

⁹ Finkelhor, D., and Hashima, P. (2001). The victimization of children & youth: A comprehensive overview. In S.O. White (Ed.), *Law and Social Science Perspectives on Youth and Justice*, 49-78.

¹⁰ Finkelhor, D., Turner, H., Shattuck, A., & Hamby, S. (2015). Prevalence of childhood exposure to violence, crime, and abuse. *JAMA Pediatrics*, *169*(8), 746-754.

¹¹ Yehuda, R. and Lehrner, A (2018). Intergenerational transmission of trauma effects: putative role of epigenetic mechanisms. *World Psychiatry 17(3)*, 243–257. Published online 2018 Sep 7. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6127768/

¹² Prevention Institute + Center For Social Policy (2017). Retrieved from:

https://www.preventioninstitute.org/sites/default/files/publications/PI Cradle%20to%20Community 121317 0.pdf

13 Prevention Institute: Community safety by design: Available at:

https://www.preventioninstitute.org/publications/community-safety-design

¹⁴ Heinze, J.E., Reischl, T.M., Bai, M., Roche, J.S., Morrel-Samuels, S., Cunningham, R.M and Zimmerman. M.A. (2016).

A comprehensive prevention approach to reducing assault offenses and assault injuries among youth. *Prevention Science*. 17(2): 167–176.

¹⁵A Collection of Built Environment and Violence Prevention Resources. Retrieved from: https://www.preventioninstitute.org/collection-built-environment-and-violence-prevention-resources

Victimization can occur throughout a person's life, and the type, frequency, and impact can vary depending on their stage of lifespan development. Research indicates that young persons are at heightened risk for violent victimization, particularly during key developmental "turning points" (e.g., adolescence, young adulthood). ¹⁶ Moreover, over the past decade, a consensus has emerged that cognitive and social development is still occurring at a rapid pace for individuals in their early 20s. Trauma resulting from victimization can interrupt or alter ongoing developmental processes demonstrating that emerging adults impacted by violence could benefit from additional supports. 17

Given the prevalence and impact, a full range of responses have been developed. First responders intervene in the immediate aftermath of violent events, medical professionals attend to the physical consequences of violence, and criminal justice and mental health professionals address the various impacts of that violence. Violence prevention practitioners have developed and advocated for using a public health, four-step approach to addressing this issue 18 to identify prevention strategies that address the origins of violence. Step 1 involves identifying the problem through data collection and assessment such as statistics, surveys, community-based focus groups and other methods. Step 2 involves understanding the reasons behind the various types of violence, called risk factors, as well as positive supports, called protective factors. Both risk and protective factors exist at the individual, family, community and societal levels. Step 3 involves developing and testing various strategies, which in the past has led to catalogues such as Blueprints for Healthy Youth Development 19 and other resources that compile and share best practices. Step 4 involves implementing and continually assessing the usefulness of specific violence prevention and intervention strategies. The U.S. Centers for Disease Control (CDC) provides an-online training to better understand the public health approach.²⁰

Violence prevention can be understood in terms of when violence occurs and by the population it addresses, as outlined in the U.S. CDC's <u>Veto Violence</u> web resource.²¹ The universal approach focuses on a population without knowing its risks and would take place before violence occurs. The selected approach focuses on individuals or groups that have identified risk factors and can be implemented before or immediately after violence occurs. Finally, the indicated approach focuses on those who have used or been impacted by violence and interventions would be implemented immediately after and/or in an ongoing manner.

¹⁶ Finkelhor, D. Poly-Victimization: *Protecting children and their development* [PowerPoint slides]. Presented at the April 2018 Leadership Network meeting of the Illinois Helping Everyone Access Linked Systems.

¹⁷ National Child Traumatic Stress Network (n.d.). Complex trauma: Effects. Available at: https://www.nctsn.org/what-is-child-trauma/trauma-types/complex-trauma/effects

¹⁸ Centers for Disease Control. A public health approach to violence. Atlanta, GA: Author. Retrieved from https://www.cdc.gov/violenceprevention/pdf/PH App Violence-a.pdf

¹⁹ Blueprints for Healthy Youth Development. Available at: https://www.blueprintsprograms.org/

²⁰ Center for Disease Control. *Principles of Prevention*. Retrieved from:

https://vetoviolence.cdc.gov/apps/pop/prevention-main.html

²¹ Center For Disease Control. *Principles of Prevention*. Retrieved from https://vetoviolence.cdc.gov/apps/pop/assets/pdfs/pop_notebook.pdf

These approaches are then implemented at the individual, family, community and societal levels. See the <u>CDC's STRYVE Foundational Resource</u> for examples of prevention strategies at the individual, relationship, community and societal levels.²²

A key element of all strong violence prevention efforts is multi-sector coordination during planning and implementation. Violence is not an issue that one system such as education or law enforcement can exclusively address. Through a multi-sector collaboration, the perspectives of all systems including community residents can be brought to the table to develop shared vision and build relationships. The Prevention Institute's Collaboration Multiplier Guide provides direction on this essential step in developing a violence prevention plan. ²³

The Prevention Institute's UNITY RoadMap tutorial is one tool that helps communities 1) "understand the current status of their efforts as a starting point, 2) describes the core elements necessary to prevent violence before it occurs, and 3) provides information, resources, and examples to support cities in planning, implementation, and evaluation." Much of the Program Design identified in Track 1 of this NOFO is adapted from this tutorial.

Lastly, it is important to emphasis the interconnectedness of all forms of violence. Many forms of violence share root causes, or risk factors, as well as shared protective factors. For example, both domestic and community violence have been found to be rooted in harmful norms regarding masculinity and femininity. ²⁴ To address this, advocates from both fields could collaborate to develop a universal prevention campaign that promotes healthy relationships, implements selected prevention approaches with at risk young people to learn and practice solving conflicts non-violently and finally an indicated approach could hold community violence program participants' accountable if they are disrespectful of the women in their lives.

In a recent research article outlining a framework for community violence prevention, Abt suggests that "policymakers cannot afford to focus on only one type of violence to the exclusion of all others. Community violence prevention practitioners should therefore meet semi-regularly with their colleagues working to prevent other forms of violence, maintaining situational awareness and seizing opportunities to collaborate when possible." ²⁵ The Prevention Institute's 2014 publication entitled *Connecting the Dots* provides an accessible

²² David-Ferdon C, Simon TR. Striving to Reduce Youth Violence Everywhere (STRYVE): The Centers for Disease Control and Prevention's national initiative to prevent youth violence foundational resource. Atlanta, GA: Centers for Disease Control and Prevention; 2012.

²³ Prevention Institute. *Multi-sector approach to preventing violence*. Retrieved from: https://www.preventioninstitute.org/unity/multi-sector-collaboration

²⁴ Wilkins, N., Tsao, B., Hertz, M., Davis, R., & Klevens, J. (2014). *Connecting the dots: An overview of the links among multiple forms of violence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention Oakland, CA: Prevention Institute.

²⁵ Abt, T. P. (2017) Towards a framework for preventing community violence among youth, *Psychology, Health & Medicine*, 22, 266-285. DOI: 10.1080/13548506.2016.1257815

overview of risk and protective factors as well as outlining how these risk and protective factors are shared across multiple forms of violence.²⁶

It is highly recommended that potential applicants review the citations included in this solicitation.

2. Program Design

Track 1: Violence Prevention Planning

Successful violence prevention planning will include active, multi-sector partnerships that support the identification of data-driven strategies to address specific risk factors for violence in the community. The purpose of a violence prevention plan is multifaceted, but, in summary, the plan will facilitate the engagement of many sectors including community residents; require the development of a unified vision and approach; utilize data to understand the community's violence related issues; and create concrete goals, objectives and performance measures to track progress. The resulting violence prevention plan should help the community prioritize violence prevention programming and funding. The plan may also be used to apply for any appropriate funding source, and therefore, it should not be developed for any specific funding source. The plan must include individual, family, and community strategies for addressing at least two forms of violence²⁷ at each of the three levels: universal, selected and indicated. The required elements of the planning process are detailed below.

A. Partnership

a. High-level leadership: The planning group must include representation from an elected official's office with the ability to engage many governmental agencies.

- b. Cross system representatives: The planning group representatives must cover, at minimum, one representative from each of the following: representative from elected officials' office, senior official from public health, senior official from police/sheriff, senior official from human services, educational institutions; victim serving organizations; child/youth serving organizations; grassroots and faith based groups; individuals with lived experience of violence; and community residents (if not already represented in other sectors). Possible additional sectors to include are community businesses and other law enforcement agencies such as state's attorney's, parole, and probation offices
- c. Collaboration: An essential initial task is developing a shared vision, mission and language.
- d. Community engagement: The proposal must minimally include community resident engagement in the cross system group meetings and community forums.

²⁷ Examples of "types of violence" include, but are not limited to: Bullying, Child Abuse, Dating and/or Domestic Violence, Gun/Street Violence, Suicide, and Sexual Violence.

²⁶ Wilkins, N., Tsao, B., Hertz, M., Davis, R., Klevens, J. (2014). Connecting the dots: an overview of the links among multiple forms of violence. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention Oakland, CA: Prevention Institute.

e. Staffing: The proposal must include sufficient staff allocated to accomplish the plan. It can include contractual employees or consultants with expertise in the planning processes.

B. Information Gathering

- a. Data collection on violence: quantitative and qualitative
- b. Gap analysis of current violence prevention programming: describes the difference between what is currently being done in violence prevention and what is desired to be done.
- c. Community forums: two or more events in the community to share information on the planning process and gather public feedback and comment

C. Develop the Plan

- a. Cross system group listens to results of information gathering; agrees upon the forms of violence to be addressed
- b. Cross system group develops concrete violence prevention goals and recommendations relevant to the problems and identifies viable strategies and indicators of success (such as action steps) based on past research evidence and the data collected during information gathering.
- c. Produce a completed plan that includes individual, family, and community strategies for addressing at least two forms of violence (e.g. domestic violence and gun/street violence), at each of the three levels: universal, selected and indicated.

ICJIA will develop and give grantees a required template to complete and submit with their final prevention plan for our internal review process. However, grantees can also present their final plans in a polished, visually appealing manner. For example: Alameda County developed a comprehensive violence prevention plan as did the City of Milwaukee. It is recommended that completed plans are published and shared with the community.

Track 2: One-time Supports for Existing Violence Prevention Programming

Applicants may submit a request for one-time supports for existing violence prevention programming that will enhance or expand the current program environment.

For the purposes of this solicitation, we employ a broad definition of "violence prevention program" which may consist of any programming that addresses the protective factors and/or risk factors for children, youth, adults, families and communities at risk for being harmed by, or using, violence. Activities may include early childhood, parent engagement, afterschool and recreational programming that supports participants' development of pro-social and conflict resolution skills. It may also include additional activities such as mentoring, tutoring, and group activities that support participants' success in educational and social domains.

Using the above definition for context, some examples of allowable projects could include:

• New or replacement of playground or recreational equipment used by a violence prevention program.

- Purchase of musical instruments for an established music enrichment program for population at risk for being harmed by, or using, violence.
- Design and creation of a mural by a teen group to make an unsafe walking area feel more welcoming and safer.
- Increasing lighting and/or security cameras in areas to promote visibility and enhance safety.
- Design, purchase and implementation of community garden project by a youth serving organization that demonstrates their geographic area experiences high rates of violence, or that their participants experience high rates of violence.
- Design and printing of self-help guide for youth survivors of sexual violence.
- Purchase of needed furniture, computers and/or developmentally appropriate toys for an early childhood or afterschool program that demonstrates their geographic area experiences high rates of violence, or that their participants experience high rates of violence.

Requested funds must be pro-rated if the item(s) will also be used for other programming provided by the applicant entity. Also, it is important to note new construction is not allowed. This also includes eliminating and/or building inhabitable structures. Therefore, breaking ground on a vacant lot to install a playground is allowed but knocking down part of a building to make room for a playground is not.

3. Program Requirements

<u>Track 1: Violence Prevention Planning</u>

- Develop and maintain an active, multi-sector program planning group. Selected applicants will be required to report on the number of meetings held, number of members in attendance, and what sectors they represent.
- Create a comprehensive violent prevention plan, created through a collaborative process, that recommends specific strategies and action steps. The plan includes the required elements as outlined in the Program Design section above. Selected applicants will be required to report on ALL of the elements.
- Allocate sufficient staff to accomplish the plan, including contractual employees or consultants with expertise in planning processes.
- Submit quarterly program and monthly fiscal reports to ICJIA.
- Submit violence prevention plan using the ICJIA required template in close out report due July 31, 2020.

Track 2: One-time Supports for Existing Violence Prevention Programming

- Comply with any procurement rules (See Section D: Application and Submission Information, funding restrictions for details)
- Purchase and install approved one-time support items by May 31, 2019 June 15, 2020
- Certify that the purchased items will be utilized for violence prevention activities described in your proposal through June 30, 2021.

4. Evidence-Based Programs or Practices

Applicants are strongly urged to incorporate research-based best practices into their program design, when appropriate. Applicants should identify the evidence-based practice being proposed for implementation, identify and discuss the evidence that shows that the practice is effective, discuss the population(s) for which this practice has been shown to be effective, and show that this practice is appropriate for the proposed target population.

5. Goals, Objectives, and Performance Metrics

Funded programs will be required to submit quarterly progress reports that will minimally include the following information based on the objectives the applicant agencies propose in their response to this solicitation.

Track 1: Violence Prevention Planning

Goal: To create a comprehensive violent prevention plan, created through a		
collaborative process, that recommends specific strategies and action steps.		
Process Objectives	Performance Measures	
Form a planning group that includes <u>at least</u>	# of unique sectors represented in	
one representative from each of the	attendance sheets	
following sectors : 1) elected officials' office		
2) public health; 3) police/sheriff; 4) human		
services; 5) educational institutions; 5) victim		
service organizations; 6) child/youth serving		
organizations; 7) grassroots and faith-based		
groups; 8) people with lived experiences; and		
9) community residents, if not represented in		
the other sectors		
At least one representative from each required	# of required sectors that attended	
sector attends at least 50% of planning group	at least 50% of planning group	
meetings.	meetings	
Conduct meetings with the planning	# of meetings conducted with the	
group	planning group	
Conduct qualitative data collection	# of qualitative data collection	
activities (e.g., focus groups, systematic	activities conducted	
written observations, open-ended questions in		
a survey, interviews).		
Conduct quantitative data collection	# of quantitative data collection	
activities (frequencies/counts, descriptive	activities conducted	
statistics, close-ended questions in a survey,		
interviews).		
Complete <u>at least one</u> gap analysis of current	# of gap analyses discussed with	
VP Programming and discuss it the planning	planning group members	
group		

Conduct <u>at least two</u> community forums to collect information and inform the plan	# of community forums conducted to collect information and inform the plan
Outcome Objectives	Performance Measures
The final prevention plan targets <u>at least two</u> forms of violence at each of the following levels: universal, selected, <u>AND</u> indicated	# of forms of violence targeted by the prevention plan at each of the following levels: universal, selected, <u>AND</u> indicated
The final prevention plan includes recommendations and actions steps to achieve recommendations	# of recommendations # of action steps
Final prevention plan is completed and submitted.	Plan and ICJIA template are completed and submitted in close out report.

Track Two: One-time Supports for Existing Violence Prevention Programming

Goal: To support existing violence prevention programs through one-time	
purchases that enhance the program.	
Outcome Objectives	Performance Measures
Procure item(s) by May 31, 2020 June 15,	Date item(s) is/are procured
2020 to support violence prevention	_
programming.	
If applicable, install item(s) by May 31, 2020	Date item(s) is/are installed
June 15, 2020.	
Begin using item(s) in current violence	Date item(s) is/are utilized.
prevention programming by June 1, 2020	
June 30, 2020.	

B. Funding Information

1. Award period

Grant awards resulting from this opportunity will have a target period of performance of January 1, 2020 February 1, 2020 to June 30, 2020.

2. Available Funds

Total Available Funding

Geographic Area	Track One: Violence Prevention Planning Allocation*	Track Two: Violence Prevention One- Time Support Allocation*	Total Available
Chicago	\$750,000	\$1,316,326	\$2,066,326
Suburban Cook, DuPage, Kane, Lake, McHenry and Will Counties	\$1,800,000	\$1,800,000	\$3,600,000
Balance of the state	\$1,350,000	\$1,350,000	\$2,700,000

^{*}Any available funding not used in one track can be applied to the other.

Agreements that result from this funding opportunity are contingent upon and subject to the availability of sufficient funds.

Range of Grant Award Amounts

The amounts below represent the minimum and maximum grant award amounts that applicants can request.

Geographic area	Track One: Violence Prevention	Track Two: One-time Supports
	<u>Planning</u>	for Existing Violence Prevention
		Programming
Chicago	\$25,000 - \$500,000	\$25,000 - \$1,000,000
Suburban Cook,	\$50,000 - \$200,000	\$25,000 - \$1,000,000
DuPage, Kane,		
Lake, McHenry		
and Will Counties		
Balance of the	\$25,000 - \$200,000	\$25,000 - \$1,000,000
state		

The geographic areas above reflect the language used to appropriate funds by geographic areas; however, applicants need not submit a proposal that provides services or benefits to the entire region.

Applications must include an Implementation Schedule that describes how the program activities will be carried out. The Implementation Schedule must include information that will allow ICJIA to assess grant activity relative to planned project performance.

C. Eligibility Information

An entity may not apply for a grant until the entity has registered and pre-qualified through the Grant Accountability and Transparency Act (GATA) Grantee Portal, www.grants.illinois.gov/portal. Registration and pre-qualification are required each state fiscal year. During pre-qualification, verifications are performed including a check of federal SAM.gov Exclusion List and status on the Illinois Stop Payment List. The Grantee Portal alerts the entity of "qualified" status or informs how to remediate a negative verification (e.g., inactive DUNS, not in good standing with the Secretary of State). Inclusion on the SAM.gov Exclusion List cannot be remediated.

Applicants are also required to submit a financial and administrative risk assessment utilizing an Internal Controls Questionnaire (ICQ) for state fiscal year 2020 and obtain approval from their cognizant agencies before execution of the grant agreement. Delay in obtaining SFY20 ICQ approval will result in a delay in grant execution.

- **1. Eligible Applicants:** Non-profits or governmental entities of the proposed community. Under Track One, ICHA intends to only fund one entity for a given geographic area. Applicants are strongly encouraged to collaborate. See Background Section for more information on multi-sector collaborations.
- **2. Cost Sharing or Matching**: Not Applicable
- **3. Indirect Cost Rate**: In order to charge indirect costs to a grant, the applicant organization must have an annually negotiated indirect cost rate agreement (NICRA). There are three types of NICRAs:
 - (a) <u>Federally Negotiated Rate</u>. Organizations that receive direct federal funding, may have an indirect cost rate that was negotiated with the Federal Cognizant Agency. Illinois will accept the federally negotiated rate. The organization must provide a copy of the federal NICRA letter at time of application.
 - (b) <u>State Negotiated Rate</u>. The organization may negotiate an indirect cost rate with the State of Illinois if they do not have a Federally Negotiated Rate. If an organization has not previously established an indirect cost rate, an indirect cost rate proposal must be submitted through the State of Illinois' centralized indirect cost rate system no later than three months after receipt of a Notice of State Award (NOSA). If an organization previously established an indirect cost rate, the organization must annually submit a new indirect cost proposal through CARS within the earlier of: six (6) months after the close of the grantee's fiscal year; and three (3) months of the notice of award.

(c) <u>De Minimis Rate</u>. An organization that has never negotiated an indirect cost rate with the Federal Government or the State of Illinois is eligible to elect a *de minimis* rate of 10% of modified total direct cost (MTDC). Once established, the *de minimis* Rate may be used indefinitely. The State of Illinois must verify the calculation of the MTDC annually in order to accept the *de minimis* rate.

All grantees must complete an indirect cost rate negotiation or elect the *de minimis* rate to claim indirect costs. Indirect costs claimed without a negotiated rate or a *de minimis* rate election on record in the State of Illinois' centralized indirect cost rate system may be subject to disallowance. It is the organization's responsibility to ensure that any indirect cost rate utilized is properly registered in the GATA Portal. Failure to register the rate properly may restrict an organization from charging indirect costs to a grant.

Grantees have discretion and can elect to waive payment for indirect costs. Grantees that elect to waive payments for indirect costs cannot be reimbursed for indirect costs. The organization must record an election to "Waive Indirect Costs" into the State of Illinois' centralized indirect cost rate system.

D. Application and Submission Information

1. Address to Request Application Package

Applications must be obtained at https://gata.icjia.cloud/ by clicking on the link titled "Violence Prevention Planning and One-Time Supports." Paper copies of the application materials may be requested from Reshma Desai by: calling 312.793.7057; mailing a request to 300 West Adams Street, Suite 200, Chicago, Illinois 60606; or via Telephone Device for the Deaf (TDD) (312)793-4170. Applications, however, may only be submitted via email.

2. Content and Form of Application Submission

(a). Notice of Intent.

Agencies interested in applying are strongly encouraged to complete an online Notice of Intent form by 11:59 p.m. on October 24, 2019 November 15, 2019. Submission of a Notice of Intent is nonbinding and will be used for internal planning purposes only. Upon receipt of a Notice of Intent, ICJIA will offer technical assistance to agencies which have not yet demonstrated GATA compliance.

Failure to submit a Notice of Intent by the deadline above may result in an agency not receiving technical assistance with respect to GATA compliance, therefore risking grant ineligibility.

The online Notice of Intent is available at: https://icjia.az1.qualtrics.com/jfe/form/SV_d7jZxiISYUb9wkl

(b). Forms and Formatting.

The application must be emailed to CJA.StateViolencePrevention@Illinois.gov. The applicant agency name should appear in the Subject line of the email. Each document attached to the email must be submitted in the manner and method described below. Applications will be rejected if any documents are missing or if any of the program narrative formatting is not followed. The applicant is responsible for ensuring that documents adhere to the instructions provided.

Applicants can apply to both tracks. If an applicant applies for both tracks, the applicant must submit a separate application, narrative, and budget for each proposal.

The following materials MUST be submitted by all applicants. The applicant must submit				
the documents based on the instructions provided below.				
Document	Document Name	PDF	Word	Excel
Uniform Application for State				
Grant Assistance – This form must				
be completed, signed, and scanned	"Agency Name – Application"	X	X	
(PDF), and provide a Word file as				
well				
Program Narrative – This				
document must meet the				
requirements outline in Section A.	"Agency Name – Program		X	
The narrative must be provided in	Narrative"		Λ	
this document. Do not change the				
format of this document.				
Budget/Budget Narrative – This				
document is a workbook, with				
several pages (tabs). The last tab has	"Agency Name – Budget"			X
instructions if clarification is				
needed.				
Letters of Commitment from all				
minimum members listed in the	"Agency Name-LOC"	X		
Program Design Section.				
Non-Profit Agency Required Documents				
United States Internal Revenue				
Service 501(c)(3) determination		X		
letter.				

Applications will be rejected if any documents are missing or if any of the program narrative formatting is not followed.

(c). Application Formatting

Track 1: Violence Prevention Planning

Program Narratives may not exceed 15 pages, double spaced, 1" margins and must written in Times New Roman, size 12 font. Do not delete template questions in your response. Applications must include letters of commitment from the minimum members outlined in the Program Design section of this NOFO.

Track 2: One-time Supports for Existing Violence Prevention Programming

Program Narratives may not exceed 10 pages, double spaced, 1" margins and must written in Times New Roman, size 12 font. Do not delete template questions in your response.

- 3. Dun and Bradstreet Universal Numbering System (DUNS) Number and System for Award Management (SAM) Each applicant (unless the applicant is an individual or federal or state awarding agency that is exempt from those requirements under 2 CFR § 25.110(b) or (c), or has an exception approved by the federal or state awarding agency under 2 CFR § 25.110(d)) is required to:
 - (a). Be registered in SAM before submitting its application. To establish a SAM registration, go to www.SAM.gov and/or utilize this instructional link: How to Register in SAM from the www.grants.illinois.gov Resource Links tab.
 - (b). Provide a valid DUNS number in its application. To obtain a DUNS number, visit from Dun and Bradstreet, Inc., online at www.dunandbradstreet.com or call 1-866-705-5711.; and
 - (c). Continue to maintain an active SAM registration with current information at all times during which it has an active award or an application or plan under consideration by a federal or state awarding agency. ICJIA may not make a federal pass-through or state award to an applicant until the applicant has complied with all applicable DUNS and SAM requirements and, if an applicant has not fully complied with the requirements by the time ICJIA is ready to make an award, ICJIA may determine that the applicant is not qualified to receive an award, and may use that determination as a basis for making a federal pass-through or state award to another applicant.

4. Submission Dates, Times, and Method

(a). All required application materials must be emailed to CJA.StateViolencePrevention@Illinois.gov by 11:59 p.m. on October 31, 2019

December 2, 2019 to be considered for funding. Proposals will not be accepted by mail, fax, or in-person. Incomplete applications or those sent to another email address will not be reviewed. Late submissions will not be reviewed.

(b). Applicants are encouraged to submit their applications 72 hours in advance of the deadline. Technical difficulties experienced at any point during the process should be reported immediately to ICJIA by calling Reshma Desai at 312.793.7057 or emailing CJA.StateViolencePrevention@Illinois.gov.

Applicants will receive an automatic reply to their email submission. Applicants that do not receive an automatic reply to their submission email should immediately contact Reshma Desai at 312.793.7057 or CJA.StateViolencePrevention@Illinois.gov.

5. Application Questions

Questions may be submitted via email at CJA.StateViolencePrevention@Illinois.gov. The deadline for submitted questions is 11:59 p.m. on Qetober 24, 2019 November 15, 2019. All substantive questions and responses will be posted on the ICJIA website at https://gata.icjia.cloud/. Due to the competitive nature of this solicitation, applicant may not discuss the opportunity directly with any ICJIA employee other than the respondent of this email address.

6. Funding Restrictions

- (a). Federal Financial Guide Applicants must follow the current edition of the Department of Justice Grants Financial Guide which details allowable and unallowable costs. This guide is available at: https://ojp.gov/financialguide/doj/pdfs/DOJ_FinancialGuide.pdf. Costs may be determined to be unallowable even if not expressly prohibited in the Federal Financial Guide.
- (b). <u>Prohibited Uses</u> The following is a non-exhaustive list of services, activities, goods, and other costs that cannot be supported through this NOFO:
 - Land acquisition
 - New construction (new construction includes eliminating and/or building structures. Therefore, breaking ground on a vacant lot or laying a foundation to install a playground is allowed but knocking down part of a building to make room for a playground is not.)
 - A renovation, lease, or any other proposed use of a building or facility that will either (a) result in a change in its basic prior use or (b) significantly change its size
 - Minor renovation or remodeling of a property either (a) listed or eligible for listing on the National Register of Historic Places or (b) located within a 100year flood plain
 - Implementation of a new program involving the use of chemicals
 - Capital expenditures
 - Fundraising activities

- Most food and beverage costs
- Lobbying
- Vehicles, including purchasing and leasing
- (c). <u>Allowable expenses</u> All expenses must reasonable, necessary, and allocable to the program. The following is a non-exhaustive list of services, activities, goods, and other costs that can be supported through this NOFO:

Track 1: Violence Prevention Planning

- Staff to accomplish the plan and can include contractual employees or consultants with expertise in planning processes
- Incentives for community residents to participate in data collection and/or focus groups (Incentive rate ranges; Minimum wage up to \$25.00/hour)
- Essential travel

Track 2: <u>One-time Supports for Existing Violence Prevention Programming</u>
These are examples of allowable costs that, in addition to being reasonable, necessary, and allocable, they are also integral to an existing violence prevention program in a community that experiences high rates of violence, or is being used by program participants that experience high rates of violence.

- Playground or recreational equipment
- Musical instruments
- Recreational supplies
- Lighting and/or security cameras
- Design and printing of materials
- Furniture, computers and/or developmentally appropriate tools
- Design and installation costs

Requested funds must be pro-rated if the item(s) will also be used for other programming provided by the applicant entity.

- (d). <u>Pre-Award Costs</u> No costs incurred before the start date of the grant agreement may be charged to awards resulting from this funding opportunity.
- (e). <u>Pre-approvals</u> Prior approvals may affect project timelines. In efforts to ensure the reasonableness, necessity and allowability of proposed uses of funds, ICJIA may require prior approval of the following, among other things:
 - Out-of-state travel
 - Certain Requests for Proposals and sub-contracts
 - Conference, meeting, and training costs for grant recipients

Submission of materials for ICJIA approval should be incorporated into the application Implementation Schedules.

- (f). <u>State Travel Guidelines</u> travel costs charged to ICJIA must conform to State Travel Guidelines, found here:
- https://www2.illinois.gov/cms/Employees/travel/Pages/TravelReimbursement.aspx. Out-of-state hotel rates are based on the General Service Administration (GSA) guidelines found here: https://www.gsa.gov/travel/plan-book/per-diem-rates. Applicant agencies with lower cost travel guidelines than the State of Illinois must use those lower rates.
- (g). <u>Supplanting</u>. Grantee certifies that grant and match funds made available under this Agreement will not be used to supplant/replace local or other governmental funds that have been appropriated for the same purpose. Grant funds must be used to supplement existing funds for program activities that would otherwise be made available to Grantee.

For purposes of this section, "appropriated" means funds from a non-state, non-federal governmental entity where Grantee is the named, listed, or intended recipient in a budget.

(h) <u>Proposed Subawards and Subcontracts</u> Applicants may propose to enter into subawards or subcontracts under this award, each of which involve different rules and applicant responsibilities. A subaward carries out a portion of the grant agreement while a contract is often for obtaining goods and services for the grantee's own use. (44 Ill. Admin Code 7000.240). If a third party will provide some of the essential services, or develop or modify a product, that the applicant has committed to provide or produce, ICJIA may consider the agreement with the third party a subaward for purposes of grant administration.

Applicants must classify each expense in the contractual budget as a subaward or subcontract. The substance of the agreement, not the title or structure of the agreement, will determine whether it is a subaward of a subcontract. Applicants are advised to use the "Checklist for Contractor/Subrecipient Determinations" available at the GATA Resource Library for guidance:

https://www.illinois.gov/sites/gata/pages/resourcelibrary.aspx.

Applicants are required to justify their use of subawards and explain their capacity to serve as "pass-through" entities in the program narrative. Applicants will monitor subaward compliance with grant terms, applicable federal and state law including the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Award, 2 C.F.R. Part 200, the Grant Accountability and Transparency Act, 44 Ill. Admin. Code 7000, and ICJIA policies. Proposed subawards must be identified, if possible, and their roles described in both the program and budget narratives.

For procurement contracts, applicants are encouraged to promote free and open competition in awarding contracts. All subcontracts must comply with federal and state requirements as well as the ICJIA Subcontract Policy. Some agreements may be entered

into through a "sole source" process, however, other agreements must be competitively bid through a "Request for Proposal" process.

ICJIA will make the final determination whether a proposed agreement constitutes a subaward or a subcontract. ICJIA's determination is final and not subject to appeal.

Procurement Requirements

All procurement transactions shall be conducted by Applicants in a manner to provide, to the maximum extent practical, open and free competition. Applicant must use procurement procedures that minimally adhere to all applicable laws, executive orders and federal guidelines. Applicant shall also adhere, and assure that its contractors and subcontractors adhere, to all applicable certification and disclosure requirements of the Illinois Procurement Code.

Applicant shall follow its established procurement process if it minimally adheres to applicable federal and state guidelines, and the following requirements. If Applicant's established procurement process is less competitive than the following requirements, the following more competitive requirements must be adhered to in lieu of Applicant's procurement process.

- For procurements of \$100,000 or less, Applicant must solicit quotes or bids from at least three sources.
- For procurements over \$100,000, Applicant must formally advertise the proposed procurement through an Invitation for Bids (IFB), or a Request for Proposals (RFP) process.

All procurements over \$2,000, must be submitted by Applicant to Grantor for review and written approval prior to their issuance. In addition, Grantor reserves the right to request that any RFP or IFB, regardless of its dollar amount, be submitted to Grantor for review and approval prior to its issuance. In addition, Applicant shall notify and submit for approval to Grantor any other relevant procurement documents including but not limited to Request for Information (RFI).

As required by Grantor, Applicant shall submit documentation regarding its procurement procedures and grant-funded purchases for Grantor review and approval, to assure adherence to applicable federal and state guidelines.

If Grantor allows a sole source procurement, Applicant must submit documentation to justify the sole source procurement as required by Grantor's policy, procedures, and guidelines. Applicant may not enter into a sole source procurement without Grantor's written approval.

7. Requirement Prior to Submitting the Application.

<u>Applicant Technical Assistance Recording.</u> Applicants are advised to view the following mandatory technical assistance recordings prior to application submission. All recordings are located on the ICJIA website at https://gata.icjia.cloud/:

- NOFO General Requirements
- GATA Compliance
- Indirect Costs

The Violence Prevention and One Time Support technical assistance recording will be available for viewing beginning October 2, 2019.

E. Application Review Information

- **1.** Criteria. Application materials must address all components of this NOFO and demonstrate both a need for the program and an ability to successfully implement the program. Evaluation criteria must include at a minimum the following criteria categories:
 - Need identification of stakeholders, facts and evidence that demonstrate the proposal supports the grant program purpose.
 - Capacity the ability of an entity to execute the grant project according to project requirements
 - Quality the totality of features and characteristics of a service, project or product that indicated its ability to satisfy the requirements of the grant program
 - Other such as societal impact, economic impact, cost effectiveness, sustainability, and grant specific criteria.

Reviewers will score applications based on completeness, clear and detailed responses to program narrative questions, and inclusion of all mandatory program elements as well as consideration of past performance history and/or financial standing with ICJIA. The applicant must demonstrate that costs are reasonable, necessary, and allowable.

The total number of points available is 100. A minimum score of 60 is required to be recommended for funding.

Track 1: Violence Prevention Planning

Scoring Criteria	Possible Points
Statement of the Problem:	18
Section thoroughly describes the geographic areas to be	6
included in the violence prevention plan. At a minimum, the county(ies) must be listed. If the entire county is not	
being served, list the towns/cities is/are being proposed.	
If the entire town/city is/are not being proposed, list the	
neighborhood(s).	

Section thoroughly describes the extent and types of violence children, youth, adults, and families experience	
violence children, youth, adults, and families experience	
in this geographic area.	
Section thoroughly describes additional factors that 6	
contribute to the problem this application seeks to	
address.	^
Agency Capacity: 2	
Section thoroughly describes agency's experience in	
planning processes. Include specific examples with	
timeframe, successes, challenges and lessons learned.	
Section thoroughly describes agency's experience 7	
collaborating with other agencies and systems on	
projects that improved the lives of children, youth, adults	
or families. Include the membership, projects'	
timeframe, successes, challenges, and lessons learned.	
Section thoroughly describes agency's ability to manage 6	
grants. Include current annual budget	
	lot
adequately answered the required question.	cored
Project Implementation and Management: 4	2
Section thoroughly describes steps taken to engage high-	
level leadership and cross system representatives as	
outlined in the NOFO, Program Design section. If	
known, listed anticipated members.	
Section thoroughly describes the proposed process to 7	
develop a shared vision, mission and language for the	
violence prevention plan. Number and type of meetings	
and how sector representation and engagement will be	
managed is thoroughly described.	
Section thoroughly describes how community members 7	
will be engaged throughout the planning process.	
Response specified demographic groups and	
neighborhoods if applicable. Number of events/activities	
and proposed methods to engage community members is	
thoroughly described.	
Section thoroughly describes the positions included in 7	
the proposed planning process, including the	
qualifications necessary and reporting structure.	
Section thoroughly describes proposed data collection 7	
Section thoroughly describes proposed data collection and analysis methods. Number and type of collection and	

meetings and how additional input will be gathered and	
incorporated is thoroughly described.	
Goals, Objectives, Performance Indicators and Implementat	ion 10
Schedule:	
Section includes reasonable objectives	5
Section includes a detailed implementation scheduled.	5
Budget Detail:	5
Budget is complete.	
Budgeted items are cost-effective in relation to the	
proposed activities.	
Budget Narrative:	5
Narrative is complete for all line items, clearly detailing	
how the applicant arrived at and calculated the budget	
amounts.	
Total Possible Po	ints 100

Track Two: One-time Supports for Existing Violence Prevention Programming

Scoring Criteria	Possible Points
Summary of the Problem:	24
Section thoroughly describes the geographic areas to be included in the violence prevention plan. Section thoroughly describes the geographic areas to be included in the violence prevention plan. At a minimum, the county(ies) must be listed. If the entire county is not being served, list the towns/cities is/are being proposed. If the entire town/city is/are not being proposed, list the neighborhood(s).	8
Section thoroughly describes the extent and types of violence children, youth, adults and families experience in this geographic area.	8
Section thoroughly describes additional factors that contribute to the problem this application seeks to address.	8
Agency Capacity:	16
Section thoroughly describes agency's ability to manage grants. Include agency's current annual budget.	8
Section thoroughly describes agency's property retention policies and procedures.	8
Current Violence Prevention Program:	40

Section thoroughly describes the current violence prevention programming supported through this proposal. Included the risk and protective factors that the program addresses.	10
Section thoroughly describes the demographics of the persons engaged in the current violence prevention programming	10
Section thoroughly describes the requested one-time supports, why the items(s) is needed and how each relate to the current programming.	10
Section thoroughly describes how the one time-supports will be used through June 30, 2021.	10
Section describes if the proposed item(s) will be used by	Not
other agency programs. If applicable, response includes	Scored
other programs' budget, number of employees and the	
proposed frequency of use.	
Goals, Objectives, Performance Indicators and Implementation Schedule:	10
Section includes reasonable objectives	5
Section includes a detailed implementation scheduled.	5
Budget Detail:	5
Budget is complete.	
Budgeted items are cost-effective in relation to the	
proposed activities.	
Budget Narrative:	5
Narrative is complete for all line items, clearly detailing how the applicant arrived at and calculated the budget amounts.	
Total Possible Points	100

2. Review and Selection Process

All applications will be screened for completeness and GATA ICQ submission for the current state fiscal year. Applications from agencies that do not have a current ICQ submitted by the date of application will not be reviewed. **Applications will be rejected if any required documents are missing or if any of the program narrative formatting is not followed.**

Selection of proposals that pass the screening process will be reviewed by three staff and/or volunteers with training in violence prevention. All reviewers will review and submit any conflicts of interest. Applications will be reviewed by tracks and regions outlined in the Appendix A of this NOFO. The chart below outlines how selection will be made.

Chicago	Highest Score for Track 1 and Track 2	Next highest score, then next highest score, etc. until funds are exhausted or number of grants reached
Suburban Cook, DuPage, Kane, Lake, McHenry, and Will counties	Highest Score for Track 1 and Track 2	Next highest score, then next highest score, etc. until funds are exhausted or number of grants reached
Balance of State	Highest Score for Track 1 and Track 2 in each of the geographic regions (Northern counties, Central counties, Southern counties)	Next highest score, then next highest score, etc. until funds are exhausted or number of grants reached

ICJIA reserves the right to reject any or all incomplete proposals, proposals including unallowable activities, proposals that fail to meet eligibility or program requirements, or proposals that are otherwise deemed to be unsatisfactory. ICJIA also reserves the right to invite applicants to answer clarifying questions and modify budgets that include unallowable or unreasonable costs.

Successful applicants whose applications contained unallowable or unreasonable costs will have their award reduced by the total amount of those costs. Upon applicant acceptance of the grant award, announcement of the grant award shall be published by the awarding agency to the GATA portal. Review team recommendations will be forwarded to ICJIA Budget Committee for approval. Applicants will be notified of the Budget Committee's decision.

3. Appeal Process

Unsuccessful applicants may request a formal appeal. Only the evaluation process is subject to appeal. Evaluation scores and funding determinations may not be contested and will not be considered by ICJIA's Appeals Review Officer. The appeal must be via email and submitted within 14 calendar days after either the date the grant award notice is published or receipt of a Funding Opportunity Declination Letter from ICJIA, whichever comes first. The written appeal must include, at a minimum, the following:

- Statement indicating a request for a formal appeal.
- The name and address of the appealing party.
- Identification of the grant program.
- A statement of reason for the appeal.

Please send your appeal to:

Appeals Review Officer

Illinois Criminal Justice Information Authority Cja.aro@Illinois.gov

Once an appeal is received, ICJIA will acknowledge receipt of an appeal within 14 calendar days from the date the appeal was received. ICJIA will respond to the appeal, in writing, within 60 days or supply a written explanation as to why additional time is required. The appealing party must supply any additional information requested by ICJIA within the time period set in the request. ICJIA will resolve the appeal by means of written determination.

The determination will include:

- Review of the appeal.
- Appeal determination.
- Rationale for the determination.
- Standard description of the appeal review process and criteria.

4. Debriefing Process

Unsuccessful applicants may request a debriefing for feedback that could help them improve future funding applications. Debriefings will take the form of written advice to applicants on the strengths and weaknesses of their applications in terms of the evaluation and review criteria.

Requests for debriefings must be made via email and submitted within seven calendar days after receipt of notice. Debriefing requests will not be granted if there is an active appeal, administrative action, or court proceeding. The written debriefing requests shall include at a minimum the following:

- The name and address of the requesting party
- Identification of grant program
- Reasons for the debrief request

Please send requests to:

Reshma Desai Illinois Criminal Justice Information Authority CJA.StateViolencePrevention@Illinois.gov

5. Programmatic Risk Assessment

All applicant agencies recommended for funding will be required to submit a completed ICJIA Programmatic Risk Assessment (PRA). This assessment will identify elements of fiscal and administrative risk at the program level and will be used to determine required specific conditions to the interagency agreement. The PRA must be completed for the program agency.

Implementing Agency vs. Program Agency

An implementing agency is the legal entity that receives state funds, such as a county.

A program agency:

- Is a subdivision of the implementing agency, such as a county probation department.
- Carries out program operations.
- Is responsible for data and fiscal reporting.

PRAs completed for other state agencies will not be accepted by ICJIA.

6. Anticipated Announcement and State Award Dates

Task	Date
NOFO posted	September 30, 2019
Applicant webinar available	October 2, 2019
NOFO question submission deadline	October 24, 2019 November 15, 2019
Notice of Intent Due	October 24, 2019 November 15, 2019
Applications due	11:59 p.m., October 31, 2019 11:59 p.m., December 2, 2019
Budget Committee review/approval of recommended designations	December 2019 January 2020
Program start date	January 1, 2020 February 1, 2020

F. Award Administration Information

1. State Award Notices

The ICJIA Budget Committee is scheduled to review and approve designations in December 2019 January 2020.

ICJIA will transmit a Notice of State Award (NOSA), and the grant agreement to successful applicants after the Budget Committee reviews and approves designations. The NOSA will detail specific conditions resulting from pre-award risk assessments that will be included in the grant agreement. The NOSA will be provided and be must be accepted through the Grantee Portal unless an alternative distribution has been established by ICJIA. The NOSA is not an authorization to begin performance or incur costs.

ICJIA also requires additional documents to be submitted prior to the execution of an agreement, including:

- Fiscal Information Sheet
- Audit Information Sheet
- Programmatic Risk Assessment

2. Administrative and National Policy Requirements

a. Background Checks. Background checks are required for all program staff and volunteers who have direct contact with youth (under 18 years) before hiring or before working on the program. Applicants must have a written protocol on file requiring background checks for all such staff and volunteers, and maintain documentation of their completion and results. Background checks must include fingerprint-based background checks through the Illinois State Police.

Staff or volunteers with a record of the following offenses will automatically be excluded from having direct contact with youth: 1) any sex offense or 2) an offense in which the victim is, by statute, a youth, including but not limited to, child abuse and child endangerment. Staff or volunteers with a Class X felony for which the person has completed parole/supervised release within the past 10 years will automatically be excluded from having direct contact with youth, unless the program model or service provision relies on staff access or credibility with atrisk populations.

b. Management and Disposition of Equipment and Supplies

Equipment acquired by Applicant with ICJIA funds shall be used for purposes of the program described in the grant agreement. Applicant may retain the equipment acquired with grant funds as long as they serve to accomplish program purposes, whether or not the program continues to be supported by grant funds, but such determinations as to retention are within the sole discretion of Grantor. If the equipment originally purchased for the program are no longer capable of fulfilling the needs of the program and must be traded in or replaced, or there is no longer a need for the equipment, Applicant shall request instructions from ICJIA.

i. ICJIA may deny equipment costs or require that Applicant relinquish already purchased equipment to ICJIA if Applicant fails to employ an adequate property management system governing the use, protection, and management of such property. Applicant is responsible for replacing or repairing equipment that are willfully or negligently lost, stolen, damaged or destroyed. Applicant shall provide equivalent insurance coverage for grant funded equipment as provided for other equipment owned by

- Applicant. Any loss, damage or theft of equipment shall be investigated and fully documented, and immediately reported to ICJIA.
- ii. If, for an item of equipment described in the Budget to be purchased with ICJIA funds, Applicant does not have, at a minimum, a purchase order dated within 90 days after the start date of the agreement, Applicant shall submit a letter to ICJIA explaining the delay in the purchase of equipment. ICJIA may, in its discretion:
 - Reduce the amount of funding
 - Cancel the agreement
 - Applicant to reallocate the funds that were allocated for such equipment to other allowable ICJIA approved costs
 - Extend the period to purchase equipment past the 90-day period.
- iii. Equipment purchased using ICJIA funds shall be made available for inspection during site visits, and upon request of ICJIA as part of its grant monitoring and oversight responsibilities.
- iv. Applicant must use procedures for managing equipment (including replacement equipment) acquired in whole or in part with grant funds, until disposition takes place, that, at a minimum, meet the following requirements:
 - (a). Property records. Property records must be maintained to include all of the following information: (1) Description of the property, (2) Serial number or other (3) Identification number, (4) Source of the property, including the award, (5) identification number, (6) Identification of the title holder, (7) Acquisition date, (8) Cost of the property, (9) Percentage of ICJIA fund participation in the cost of the property, (10) Location of the property, (11) Use and condition of the property, and (12) Disposition data, including the date of disposal and sale price
 - (b) Inventory. A physical inventory of the property must be taken and the results reconciled with the property records at least once every 2 years.
 - (c) Maintenance procedures. Adequate maintenance procedures must be established and used to keep the property in good condition.
 - (d) Control system. A control system must be in place with adequate safeguards to prevent loss, damage, and theft.

- v. Proper sales procedures. If authorized or required to sell the property, Applicant must establish proper sales procedures to ensure the highest possible return.
- vi. Applicant must compensate ICJIA for the grant-making component for its share of residual inventory of unused supplies if both of the following apply:
 - (a) The residual inventory of unused supplies exceeds \$5,000 in total aggregate fair market value upon termination or completion of the funding support.
 - (b) The supplies are no longer needed for any other ICJIA sponsored program, if paid with ICJIA grant funds.

In addition to implementing the funded project consistent with the approved project proposal and budget, agencies selected for funding must comply with applicable grant terms and conditions and other legal requirements, including, but not limited to, the State General Revenue Funds and related regulations, the ICJIA Financial Guide and Policy and Procedure Manual, the Grant Accountability and Transparency Act, and the U.S. Department of Justice Grants Financial Guide, which will be included in the award documents, incorporated into the award by reference, or are otherwise applicable to the award.

Additional programmatic and administrative special conditions may be required.

3. Reporting

Recipients must submit periodic financial reports, progress reports, final financial and progress reports, and, if applicable, an annual audit report in accordance with the 2 CFR Part 200 Uniform Requirements. Future awards and fund drawdowns may be withheld if reports are delinquent.

G. State Awarding Agency Contact(s)

For questions and technical assistance regarding application submission, contact:

Reshma Desai Illinois Criminal Justice Information Authority CJA.StateViolencePrevention@Illinois.gov

H. Other Information

Neither the State of Illinois nor ICJIA are obligated to make any award as a result of this announcement. The ICJIA Executive Director or designee has sole authority to bind ICJIA to the expenditure of funds through the execution of grant agreements.

This application is subject to the Illinois Freedom of Information Act. Any information that the applicant believes should be exempt under FOIA should clearly highlight the information that is exempt, and the basis of the exemption.

ICJIA plans to request SFY21 Violence Prevention funding. Should violence prevention funding be included in the SFY 21 state budget, ICJIA will let a competitive solicitation to fund violence prevention <u>programming</u>. That future solicitation will not be restricted to those that received SFY20 funds, though the review process will undoubtedly assess planning components as outlined in the Program Design section of this NOFO.

Appendix A

Northern outside Cook and collar counties	Central counties		Southern counties
Boone	Adams	Schuyler	Alexander
Carroll	Brown	Scott	Bond
DeKalb	Bureau	Shelby	Calhoun
Grundy	Cass	Stark	Clark
Jo Daviess	Champaign	Tazewell	Clay
Kendall	Christian	Vermilion	Clinton
LaSalle	Coles	Warren	Crawford
Lee	DeWitt	Woodford	Cumberland
Ogle	Douglas		Edwards
Stephenson	Edgar		Effingham
Whiteside	Ford		Fayette
Winnebago	Fulton		Franklin
	Greene		Gallatin
	Hancock		Hamilton
	Henderson		Hardin
Chicago	Henry		Jackson
	Iroquois		Jasper
Cook County	Kankakee		Jefferson
	Knox		Jersey
Collar counties	Livingston		Johnson
DuPage	Logan		Lawrence
Kane	McDonough		Madison
Lake	McLean		Marion
McHenry	Macon		Massac
Will	Macoupin		Monroe
	Marshall		Perry
	Mason		Pope
	Menard		Pulaski
	Mercer		Randolph
	Montgomery		Richland
	Morgan		St. Clair
	Moultrie		Saline
	Peoria		Union
	Piatt		Wabash
	Pike		Washington
	Putnam		Wayne
	Rock Island		White
	Sangamon		Williamson

	Uniform Application for State Grant Assistance		
Updated by ICJIA			
Illinois Criminal Justice Information Authority			
4		Completed Section	
1.	Type of Submission	☐ Pre-application	
		□ Application	
		☐ Changed / Corrected Application	
2.	Type of Application	⊠ New	
		☐ Continuation (i.e. multiple year grant)	
		☐ Revision (modification to initial application)	
3.	Date / Time Received by	Completed by State Agency upon Receipt of Application	
	State		
4.	Name of the Awarding	Illinois Criminal Justice Information Authority	
	State Agency		
5.	Catalog of State Financial	546-00-2179	
_	Assistance (CSFA) Number		
6.	CSFA Title	Violence Prevention and Street Intervention Programs (VP-SIP)	
Grai	nt specific information (if app	licable) **	
7.	Agreement Number		
8.	Previous Agreement		
	Numbers		
Cata	log of Federal Domestic Assis	stance (CFDA) Not applicable (No federal funding)	
9.	CFDA Number		
10.	CFDA Title		
11.	CFDA Number		
12.	CFDA Title		
Fede	eral Fund Information	□ Not applicable (No federal funding)	
13.	Federal Award ID Number		
14.	Federal Award Date		
15.	Amount Obligated by this		
13.	action		
16.	Total Amount of the		
	Federal Award		
Fund	ding Opportunity Information		
17.	Funding Opportunity	2179-1255	
	Number		
18.	Funding Opportunity Title	Violence Prevention and Street Intervention Programs (VP-SIP)	
19.	Funding Opportunity	Public Safety	
	Program Field		
Com	petition Identification 🛛 N	ot Applicable	
20.	Competition Identification Number		
21.	Competition Identification		
	Title		

	Applicant Completed Section						
Imple	Implementing Agency Information**						
22.	Legal Name	(Name used for DUNS registration and grantee pre-qualification.)					
23.	Common Name (DBA)						
24.	Employer / Taxpayer ID Number (EIN, TIN)						
25.	Vendor ID, if different than above						
26.	Organizational DUNS						
27.	SAM expiration date						
28.	SAM Cage Code						
29.	Business Address	Street address:					
		City: State: County: Zip + 4:					
Imple	ZIP + 4: Implementing Agency: Person to be contacted for Program Matters involving this application.						
30.	First Name	are considered for 110g. and matters into thing time approaches.					
31.	Last Name						
32.	Suffix						
33.	Title						
34.	Telephone Number						
35.	Fax Number						
36.	Email address						
Imple	ementing Agency: Person to	be contacted for Business/Administrative Office Matters involving this application.					
37.	First Name						
38.	Last Name						
39.	Suffix						
40.	Title						
41.	Telephone Number						
42.	Fax Number						
43.	Email address						
		lifferent from Implementing Agency.)**					
44.	Legal Name	(Name used for DUNS registration.)					
45.	Organizational DUNS number						
46.	SAM expiration date						
47.	SAM Cage Code						
48.	Business Address	Street address:					
		City:					
		State:					
		County:					
		Zip + 4:					
Progr	ram Agency: Person to be co	ntacted for Program Matters involving this Application.					
49.	First Name						

50.	Last Name	
51.	Suffix	
52.	Title	
53.	Telephone Number	
54.	Fax Number	
55.	Email address	
	s Affected**	
56.	Areas Affected by the	(If program is not state-wide, list each county. If not serving the entire county, also
	Project (County(ies);	list the municipalities served within the county. If Chicago is included, list the neighborhoods served within Chicago if services are not provided throughout the
	City(ies); or State-wide)	entire city.)
		entire city.)
57.	Implementing Agency's	Congressional District:
	Legislative District	State Senate District:
	(This must be based on	State Representative District:
	the nine digit zip code	
	registered with SAM.)	
58.	Primary Area of	(This should be either the Program Agency's office or the location where a majority of
	Performance	the grant activity takes place. A street address does not need to be provided but
		please list city, state, and nine digit zip code.)
	Dutanama Auras of	Communicated Districts
59.	Primary Area of Performance's Legislative	Congressional District: State Senate District:
	District (This must be	State Representative District:
	based on the nine digit	State Representative District.
	zip code listed above.)	
Appli	icant's Project**	
60.	Description Title of	(Text only for the program title as listed on the Attachment A.)
60.	2000.1000.1100.01	Text only for the program title as listed on the Attachment A.)
60.	Applicant's Project	(Text only for the program title as listed on the Attachment A.)
	Applicant's Project	(Text only for the program title as listed on the Attachment A.)
61.	=	Start Date:
	Applicant's Project	
61.	Applicant's Project Proposed Project Term	Start Date: End Date:
	Applicant's Project Proposed Project Term Estimated Funding	Start Date: End Date: Designated/Awarded Amount, if known: \$
61.	Applicant's Project Proposed Project Term	Start Date: End Date: □ Designated/Awarded Amount, if known: \$ □ Budgeted/Requested Amount: \$
61.	Applicant's Project Proposed Project Term Estimated Funding	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$
61.	Applicant's Project Proposed Project Term Estimated Funding	Start Date: End Date: □ Designated/Awarded Amount, if known: \$ □ Budgeted/Requested Amount: \$
61.	Applicant's Project Proposed Project Term Estimated Funding	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$
61.	Applicant's Project Proposed Project Term Estimated Funding	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$
61.	Applicant's Project Proposed Project Term Estimated Funding	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$
61.	Applicant's Project Proposed Project Term Estimated Funding (include all that apply)	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$
61.	Applicant's Project Proposed Project Term Estimated Funding	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$
61. 62.	Applicant's Project Proposed Project Term Estimated Funding (include all that apply)	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:%
61. 62. Appli By sig	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) icant Certification:	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:%
61. 62. Appli By sig	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) icant Certification: gning this application, I certifiments herein are true, comp	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:%
61. 62. Appli By sig state and a	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) icant Certification: gning this application, I certifiments herein are true, compagree to comply with any resu	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:% y (1) to the statements contained in the list of certifications* and (2) that the lete and accurate to the best of my knowledge. I also provide the required assurances*
61. 62. Appli By sign states and a states	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) icant Certification: gning this application, I certifiments herein are true, compagree to comply with any resuments or claims may subject	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:% y (1) to the statements contained in the list of certifications* and (2) that the lete and accurate to the best of my knowledge. I also provide the required assurances* ulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent me to criminal, civil or administrative penalties. (U.S. Code, Title 218, Section 1001)
61. 62. Appli By sig state and a state (*) Th	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) icant Certification: gning this application, I certifiments herein are true, compagree to comply with any resuments or claims may subject the list of certification and ass	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:% y (1) to the statements contained in the list of certifications* and (2) that the lete and accurate to the best of my knowledge. I also provide the required assurances* ulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent
61. 62. Appli By sig state and a state (*) Th	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) icant Certification: gning this application, I certifiments herein are true, compagree to comply with any resuments or claims may subject	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:% y (1) to the statements contained in the list of certifications* and (2) that the lete and accurate to the best of my knowledge. I also provide the required assurances* ulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent me to criminal, civil or administrative penalties. (U.S. Code, Title 218, Section 1001) urances, or an internet site where you may obtain this list is contained in the Notice of
61. 62. Appli By sig state and a state (*) Th	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) icant Certification: gning this application, I certifiments herein are true, compagree to comply with any resuments or claims may subject the list of certification and ass	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:% y (1) to the statements contained in the list of certifications* and (2) that the lete and accurate to the best of my knowledge. I also provide the required assurances* ulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent me to criminal, civil or administrative penalties. (U.S. Code, Title 218, Section 1001)
61. 62. Appli By sig states and a	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) icant Certification: gning this application, I certifiments herein are true, compagree to comply with any resu	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:% y (1) to the statements contained in the list of certifications* and (2) that the lete and accurate to the best of my knowledge. I also provide the required assurances* ulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent
61. 62. Appli By sig state and a state (*) Th	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) icant Certification: gning this application, I certifiments herein are true, compagree to comply with any resuments or claims may subject the list of certification and ass	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:% y (1) to the statements contained in the list of certifications* and (2) that the lete and accurate to the best of my knowledge. I also provide the required assurances* ulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent me to criminal, civil or administrative penalties. (U.S. Code, Title 218, Section 1001) urances, or an internet site where you may obtain this list is contained in the Notice of

Imple	Implementing Agency Authorized Official (Director, President, Chair, or similar position)				
63.	First Name				
64.	Last Name				
65.	Title				
66.	Telephone Number				
67.	Fax Number				
68.	Email address				
69.	Signature of Authorized				
	Representative				
70.	Date Signed				
Imple	ementing Agency Financial O	fficer (Chief Financial Officer, Comptroller, Treasurer, or similar position.)			
71.	First Name				
72.	Last Name				
73.	Title				
74.	Telephone Number				
75.	Fax Number				
76.	Email address				
77.	Signature of Authorized				
	Representative				
78.	Date Signed				
Prog	ram Agency Authorized Offic	ial			
79.	First Name				
80.	Last Name				
81.	Title				
82.	Telephone Number				
83.	Fax Number				
84.	Email address				
85.	Signature of Authorized				
	Representative				
86.	Date Signed				

^{**} ICJIA specific modification to GATA form

Program Narrative

Statement of the Problem

- 1. Describe the geographic areas to be supported through this proposal. At a minimum, the county(ies) must be listed. If the entire county is not being served, list the towns/cities is/are being proposed. If the entire town/city is/are not being proposed, list the neighborhood(s).
- 1. Describe the extent and types of violence children, youth, adults and families experience in this geographic area.
- 2. Describe additional factors that contribute to the problem this application seeks to address.

Agency Capacity

- 3. Describe your agency's experience in a strategic planning processes. Include specific examples with timeframe, successes, challenges and lessons learned.
- 4. Describe your agency's experience collaborating with other agencies and systems on projects that improved the lives of children, youth, adults or families. Include the membership, projects' timeframe, successes, challenges, and lessons learned.
- 5. Describe your agency's ability to manage grants. Include your agency's current annual budget.
- 6. If the contractual section of the budget includes proposed subaward(s), answer the following question:
 - a. Explain how the applicant agency will monitor subawards for compliance with program terms and Federal and State regulations, detailing monitoring frequency and corrective action procedures, and agency ability to provide any needed technical assistance.

Project Implementation and Management

Program Narrative

- 7. Partnership: Discuss steps you plan to take to engage high-level leadership and cross system representatives as outlined in the NOFO, Program Design section. Please list each anticipated member.
- 8. Collaboration: Discuss the proposed process to develop a shared vision, mission and language for the violence prevention plan. Include number and type of meetings; how sector representation and engagement will be managed.
- 9. Community Engagement: Discuss how community members will be engaged throughout the planning process. Specify demographic groups and neighborhoods if applicable. Include number of events/activities and proposed methods to engage community members.
- 10. Staffing: Describe the positions included in the proposed planning process, including the qualifications necessary to coordinate this planning process. Also state what position this individual will report to.
- 11. Information Gathering: Describe proposed data collection and analysis methods. Specify number and type of collection and analysis methods.
- 12. Creating the Plan: Describe the proposed process for drafting, reviewing, finalizing and designing the plan. Include number of meetings, how additional input will be gathered and incorporated.

Goals, Objectives and Performance Measures

Funded programs will be required to submit quarterly progress reports that will minimally include the following information based on the objectives the applicant agencies propose in their response to this solicitation. Fill in the areas below where indicated.

Goal: To create a comprehensive violent prevention plan, created through a collabora	tive
process, that recommends specific strategies and action steps.	

Process Objectives Performance Measures

Program Narrative

Form a planning group that includes at least one representative from each of the following sectors: 1) elected officials' office 2) public health; 3) police/sheriff; 4) human services; 5) educational institutions; 5) victim service organizations; 6) child/youth serving organizations; 7) grassroots and faith-based groups; 8) people with lived experiences; and 9) community residents, if not represented in the other sectors	# of unique sectors represented across the attendance sheets
At least one representative from each required sector attends at least 50% of planning group meetings.	# of sectors that attended at least 50% of planning group meetings
Conduct meetings with the planning group	# of meetings conducted with the planning group
Conduct qualitative data collection activities (e.g., focus groups, systematic written observations, open-ended questions in a survey, interviews).	# of qualitative data collection activities conducted
Conduct quantitative data collection activities (frequencies/counts, descriptive statistics, close-ended questions in a survey, interviews).	# of quantitative data collection activities conducted
Complete at least one gap analysis of current VP Programming and discuss it the planning group	# of gap analyses discussed with planning group members
Conduct at least two community forums to collect information and inform the plan	# of community forums conducted to collect information and inform the plan
Outcome Objectives	Performance Measures
The final prevention plan targets at least two forms of violence at each of the following levels: universal, selected, AND indicated	# of forms of violence targeted by the prevention plan at each of the following levels: universal, selected, AND indicated
The final prevention plan includes recommendations and actions steps to achieve recommendations	Plan and ICJIA template are completed and submitted in close out report.

Implementation Schedule

Complete the table below, defining each step in the implementation and operation of the proposed program, detailing the staff position responsible for each task and a target date for completion. Do not use staff names. Please add additional lines as necessary.

Track One: Violence Prevention Planning Program Narrative

Task	Staff Position Responsible	Date Due
Submit quarterly data report to the		15 th of month
Authority		after the end of
·		the quarter
Submit monthly fiscal reports to the		15 th of month
Authority		after the end of
		the reporting
		month

Grantee Contact

Name	
Title	
Address	
City	
Zip	
Phone	
TTY#	
Fax#	
Email address	

Track Two: One-Time Supports

Program Narrative

Statement of the Problem

- 1. Describe the geographic areas to be supported through this proposal. At a minimum, the county(ies) must be listed. If the entire county is not being served, list the towns/cities is/are being proposed. If the entire town/city is/are not being proposed, list the neighborhood(s).
- 2. Describe the extent and types of violence children, youth, adults and families experience in this geographic area.
- 3. Describe additional factors that contribute to the problem this application seeks to address.

Agency Capacity

- 1. Describe your agency's ability to manage grants. Include agency's current annual budget.
- 2. Describe your agency's property retention policies and procedures.

Current Violence Prevention Program

- 4. Describe the current violence prevention programming supported through this proposal. Include the risk and protective factors related to violence prevention that the program addresses.
- 5. Describe the demographics of the participants engaged in the current violence prevention programming.
- 6. Describe the requested one-time supports, why the items(s) is needed and how each relate to the current programming.

Track Two: One-Time Supports

Program Narrative

- 7. Describe how the one time-supports will be used through June 30, 2021. Note: Selected applicants will have to certify that the purchased items will be utilized for violence prevention activities through June 30, 2021.
- 8. Describe if the proposed item(s) will be used by other agency programs. For each of the other programs that will use the item(s), include their programs' budgets, number of employees and the proposed frequency of use.

Goals, Objectives and Performance Measures

Funded programs will be required to submit quarterly progress reports that will minimally include the following information based on the objectives the applicant agencies propose in their response to this solicitation.

Goal: To support existing violence prevention programs through one-time purchases that				
enhance the program.				
Outcome Objectives Performance Measures				
Procure item(s) by May 31, 2020 June 15, 2020 to	Date item(s) is/are procured			
support violence prevention programming.				
If applicable, install item(s) by May 31, 2020 June	Date item(s) is/are installed			
15, 2020.				
Begin using item(s) in current violence prevention programming by June 1, 2020 June 20, 2020.	Date item(s) is/are utilized.			

Implementation Schedule

Complete the table below, defining each step in the implementation and operation of the proposed program, detailing the staff position responsible for each task and a target date for completion. Do not use staff names. Please add additional lines as necessary.

Task	Staff Position F	Responsible Date Due	

Track Two: One-Time Supports

Program Narrative

Submit quarterly data report to the	15 th of month
Authority	after the end of
	the quarter
Submit monthly fiscal reports to the	15 th of month
Authority	after the end of
	the reporting
	month

Grantee Contact

Name	
Title	
Address	
City	
Zip	
Phone	
TTY#	
Fax#	
Email address	

STATE OF ILLINOIS	UNIFORM GRANT BUDGET TEMPLATE (updated by ICJIA) DUNS#:		AGENCY: Illinois Criminal Justice Information Authority	
implementing Agency Name:			NOFO ID: 2179-1255	Grant #:
CFSA Number: 546-00-2179	CSFA Short Description: Violence Prevention and Street Intervention Programs (VP-SIP)		State Fiscal Year(s): FY20	Project Period: January 1, February 1, 2020 - June 30, 2020
All applicants must complete the cells highlighted in blue. The remain Schould complete the column under "Year 1." Please read all instruc	ctions before completing form.			nuesting funding for only one year
<u>SE</u> 0	CTION A FEDER	AL/STATE OF ILLINOI	IS FUNDS	
Revenues	Year 1			
(a). State of Illinois Grant Amount Requested				
BUDG	GET SUMMARY - FEDI	ERAL/STATE OF ILLING	DIS FUNDS	
Budget Expenditure Categories OMB Uniform Guidance Federal Awards Reference 2 CFR 200	<u>Year 1</u>			
. Personnel (Salaries & Wages) 200.430	\$	-		
2. Fringe Benefits 200.431	\$	-		
3. Travel 200.474	\$	-		
4. Equipment 200.439	\$	-		
5. Supplies 200.94	\$	-		
5. Contractual Services (200.318) & Subawards (200.92)	\$	-		
6. Total Direct Costs (lines 1-15) 200.413	\$	-		
17. Indirect Costs* (see below) 200.414	0			
Rate: Base: \$	\$	-		

SECTION - A (continued) Indirect Cost Rate Information If your organization is requesting reimbursement for indirect costs on line 17 of the Budget Summary, please select one of the following options. Our Organization receives direct Federal funding and currently has a Negotiated Indirect Cost Rate Agreement (NICRA) with our Federal Cognizant Agency. A copy of this agreement will be provided to the State of Illinois' Indirect Cost Unit for review and documentation before reimbursement is allowed. This NICRA will be accepted by all State of 1) Illinois Agencies up to any statutory, rule-based or programmatic restrictions or limitations. NOTE: (If this option is selected, please provide basic Negotiated Indirect Cost Rate Agreement information in area designated below) Your Organization may not have a Federally Negotiated Indirect Cost Rate Agreement. Therefore, in order for your Organization to be reimbursed for Indirect Costs from the State of Illinois, your Organization must either: A. Negotiate an Indirect Cost Rate with the State of Illinois' Indirect Cost Unit with guidance from your State Cognizant Agency on an annual basis. B. Elect to use the de minimis rate of 10% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois Awards. C. Use a Restricted Rate designated by programmatic or statutory policy. (See Notice of Funding Opportunity for Restricted Rate Programs) Our Organization currently has a Negotiated Indirect Cost Rate Agreement with the State of Illinois that will be accepted by all State of Illinois Agencies up to any statutory, rulebased or programmatic restrictions or limitations. Our Organization is required to submit a new Indirect Cost Rate Proposal to the Indirect Cost Unit within six (6) months after 2a) the close of each fiscal year (2 CFR 200 Appendix IV (C)(2)(c). NOTE: (If this option is selected, please provide basic Indirect Cost Rate information in area designated below) Our Organization currently does not have a Negotiated Indirect Cost Rate Agreement with the State of Illinois. Our Organization will submit our initial Indirect Cost Rate 2b) Proposal (ICRP) immediately after our Organization is advised that the State award will be made and, in no event, later than three (3) months after the effective date of the State award (2 CFR 200 Appendix IV (C)(2)(b). The initial ICRP will be sent to the State of Illinois' Indirect Cost Unit. NOTE: (Check with your State of Illinois Agency for information regarding reimbursement of indirect costs while your proposal is being negotiated) Our Organization has never received a Negotiated Indirect Cost Rate Agreement from either the Federal government or the State of Illinois and elects to charge the de minimis 3) rate of 10% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois awards (2 CFR 200.414 (c)(4)(f) & (200.68). NOTE: (Your Organization must be eligible, see 2 CFR 200.414 (f), and submit documentation on the calculation of MTDC within your Budget Narrative under Indirect Costs) For Restricted Rate Programs (check one) -- Our Organization is using a restricted indirect cost rate that: Is included as a "Special Indirect Cost Rate" in our NICRA (2 CFR 200Appendix IV (5) Or; 4) Complies with other statutory policies (*please specify*): The Restricted Indirect Cost Rate is 5) No reimbursement of Indirect Cost is being requested. (Please consult your program office regarding possible match requirements)

Basic Negotiated Indirect Cost Rate Agreement information if Option (1) or (2a) is selected

Period Covered by the NICRA:

Approving Fed/State Agency (please specify):

The Indirect Cost Rate is:

The Distribution Base is:

STATE OF ILLINOIS		BUDGET TEMPLATE by ICJIA)	AGENCY: Illinois Crimina	al Justice Information Authority
Implementing Agency Name:	DUNS#:		NOFO ID: 2179-1255	Grant #:
CFSA Number: 546-00-2179	CSFA Short Description: V Street Intervention Progra		State Fiscal Year(s): FY20	Project Period: January 1, February 1, 2020 - June 30, 2020
If you are required to provide or volunteer to provide cost-sharing, match complete the cells highlighted in blue. The remaining cells will be automounder "Year 1." Please read all instructions before completing form.				
	SECTION B	MATCH FUNDS		
Program Revenues	Year 1			
Grantee Match Requirement: <u>%_(ICJIA to populate only if match is required)</u>				
(b)Cash				
(c)Non-cash				
(d). Other Funding & Contributions				
NON-STATE Funds Total				
	BUDGET SUMMA	RY MATCH FUNDS		
Budget Expenditure Categories OMB Uniform Guidance Federal Awards Reference 2 CFR 200	Year 1			
1. Personnel (Salaries & Wages) 200.430	\$ -			
2. Fringe Benefits 200.431	\$ -			
3. Travel 200.474	\$ -			
4. Equipment 200.439	\$ -			
5. Supplies 200.94	\$ -			
6. Contractual Services (200.318) & Subawards (200.92)	\$ -			
16. Total Direct Costs (lines 1-15) 200.413	\$ -			
17. Indirect Costs* (see below) 200.414				
Rate: % Base:	\$ -			
18 Total Costs NON-ICHA (Match) Funds (lines 16 and 17)	s -			

STATE OF ILLINOIS	UNIFORM GRANT BUDGET TEMPLATE (updated by ICJIA)	AGENCY: Illinois Criminal Justice Information Author			
Implementing Agency Name:	DUNS#:	NOFO ID: 2179-1255	Grant #:		
	CSFA Short Description: Violence Prevention and Street Intervention Programs (VP-SIP)	()	Project Period: January 1, February 1, 2020 - June 30, 2020		

"By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate and that any false, fictitious, or fraudulent information or the

Note: Please see ICJIA Specific Instructions tab for additional information about filling out this sheet.

(2 CFR 200.415)

omission of any material fact, could result in the immediate termination of n	ny grant award(s). "	
Implementing	Agency	Program Agency
Name of Applicant Institution/Organization	Name of Applicant Institution/Organization	Institution/Organization
Signature	Signature	Signature
Name of Official	Name of Official	Name of Official
Title Chief Financial Officer (or equivalent)	Title Executive Director (or equivalent)	Title Executive Director (or equivalent)
Date of Signature	Date of Signature	Date of Signature

Note: The State awarding agency may change required signers based on the grantee's organizational structure. The required signers must have the authority to enter into contractual agreements on behalf of the organization.

Implementing Agency Name: Grant #:

Section C - Budget Worksheet & Narrative

1). Personnel (Salaries & Wages) (2 CFR 200.430) -- List each position by title and name of employee, if available. Show the annual salary rate and the percentage of time to be devoted to the project and length of time working on the project. Compensation paid for employees engaged in grant activities must be consistent with that paid for similar work within the applicant organization. Include a description of the responsibilities and duties of each position in relationship to fulfilling the project goals and objectives in the narrative space provided below. Also, provide a justification and description of each position (including vacant positions). Relate each position specifically to program objectives. Personnel cannot exceed 100% of their time on all active projects.

Note: Please see ICJIA Specific Instructions tab for additional information for completing this section.

		Computation							
Name	Position	Salary or Wage	Basis (Yr./Mo./Hr.)	% of Time	Quantity (based on Yr/Mo/Hr)	Federal/State Amount	Match	Total Cost	
								\$	-
								\$	-
								\$	-
								\$	-
								\$	-
								\$	-
								\$	-
								\$	-
								\$	-
								\$	-
					Total	\$ -	\$ -	\$	-

Personnel Narrative:	

Implementing Agency Name:

Grant #:

Section C - Budget Worksheet & Narrative

2). Fringe Benefits (2 CFR 200.431)—Fringe benefits should be based on actual known costs or an established formula. Fringe benefits are for the personnel listed in category (1) direct salaries and wages, and only for the percentage of time devoted to the project. Provide the name of the fringe benefit (i.e., Retirement, Insurance, Worker's Comp, etc), the fringe benefit rate, and a clear description of how the computation of fringe benefits was done. Provide both the annual (for multiyear awards) and total. If a fringe benefit rate is not used, show how the fringe benefits were computed for each position. The budget justification should be reflected in the budget description. Elements that comprise fringe benefits should be indicated.

Note: Please see ICJIA Specific Instructions tab for additional information for completing this section.

			Fringe Costs																
Name	Position	Calcula Salai		FI	CA	Otho (Please sp		Other (Please sp		Otho (Please sp		Othe (Please sp			Flat Rate Fringe (If applicable)	Federal/State Amount	Match	Total	l Cost
		Juni	- ,	7.65	00%														
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
																¢	ø	ø	

Fringe Narrative:		

Implementing Agency Name:

Grant #:

Section C - Budget Worksheet & Narrative

3). <u>Travel</u> (2 CFR 200.474)-- Travel should include: origin and destination, estimated costs and type of transportation, number of travelers, related lodging and per diem costs, brief description of the travel involved, its purpose, and explanation of how the proposed travel is necessary for successful completion of the project. In training projects, travel and meals for trainees should be listed separately. Show the number of trainees and unit cost involved. Identify the location of travel, if known; or if unknown, indicate "location to be determined." Indicate source of Travel Policies applied, Applicant or State of Illinois Travel Regulations. **NOTE:** Dollars requested in the travel category should be for staff travel only. Travel for consultants should be shown in the contractual category along with the consultant's fee. Travel for training participants, advisory committees, review panels and etc., should be itemized the same way as indicated above and placed in the "Miscellaneous" category.

Column G ("Basis") defines the quantity being measured. For example, if your expense is two nights in a hotel, the basis is "Nights." If the expense is 300 miles, the basis is "Miles."

Note: Please see ICJIA Specific Instructions tab for additional information for completing this section.

Purpose of Travel	Location			Comp		Federal/State	Match	Total Cost			
(brief description)	Location	Items	Cost Rate	Quantity	Basis	# Staff	# of Trips	Amount	Match	1 otal Cost	
										\$ -	
										\$ -	
										\$ -	
										\$ -	
										\$ -	
										\$ -	
										\$ -	
										\$ -	
										\$ -	
										\$ -	
										\$ -	
				•	•	•	Total	\$ -	\$ -	\$ -	

Travel Narrative:			

Implementing Agency Name:	Grant #:
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Section C - Budget Worksheet & Narrative

4). Equipment (2 CFR 200.439) -- Provide justification for the use of each item and relate them to specific program objectives. Provide both the annual (for multiyear awards) and total for equipment. Equipment is defined as an article of tangible personal property that has a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the non-Federal entity for financial statement purposes, or \$5,000. An applicant organization may classify equipment at a lower dollar value but cannot classify it higher than \$5,000. (Note: Organization's own capitalization policy for classification of equipment can be used). Applicants should analyze the cost benefits of purchasing versus leasing equipment, especially high cost items and those subject to rapid technical advances. Rented or leased equipment costs should be listed in the "Contractual" category. Explain how the equipment is necessary for the success of the project. Attach a narrative describing the procurement method to be used.

Note: Please see ICJIA Specific Instructions tab for additional information for completing this section.

		Computation	n				
Item	Quantity	Cost	Pro-Rated Share (Put 100% if cost is not pro-rated)	Federal/State Amount	Match	Total C	Cost
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-

Total \$

\$

Equipment Narrative:	

Implementing Agency Name:	Grant #:
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Section C - Budget Worksheet & Narrative

5). Supplies (2 CFR 200.94) -- List items by type (office supplies, postage, training materials, copying paper, and other expendable items such as books, hand held tape recorders) and show the basis for computation. Generally, supplies include any materials that are expendable or consumed during the course of the project.

Note: Please see ICJIA Specific Instructions tab for additional information for completing this section.

The second secon		Computation					
Supply Items	Quantity/ Duration	Cost	Pro-Rated Share (Put 100% if cost is not pro-rated)	Federal/State Amount	Match	Total C	Cost
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-

Total \$

Supplies Narrative:	

Implementing Agency Name: Grant #:

Section C - Budget Worksheet & Narrative

6). Contractual Services (2 CFR 200.318) & Subawards (200.92) -- Provide a description of the product or service to be procured by contract and an estimate of the cost. Applicants are encouraged to promote free and open competition in awarding contracts. Federal rules require a separate justification must be provided for sole source contracts in excess of \$150,000 (See 2 CFR 200.88). However, ICJIA has additional requirements for sole source contracts of other amounts. The applicant must contact the ICJIA grant monitor or program administrator for additional information. This budget category may include subawards. Provide separate budgets for each subaward or contract, regardless of the dollar value and indicate the basis for the cost estimates in the narrative. Describe products or services to be obtained and indicate the applicability or necessity of each to the project.

Please also note the differences between subaward, contract, and contractor (vendor):

- 1) Subaward (200.92) means an award provided by a pass-through entity to a subrecipient for the subrecipient to carry out part of a Federal/State award, including a portion of the scope of work or objectives. It does not include payments to an individual that is a beneficiary of a Federal/State program.
- 2) Contract (200.22) means a legal instrument by which a non-Federal entity purchases property or services needed to carry out the project or program under a Federal award. The term as used in this part does not include a legal instrument, even if the non-Federal entity considers it a contract, when the substance of the transaction meets the definition of a Federal award or subaward.
- 3) "Vendor" or "Contractor" is generally a dealer, distributor or other seller that provides services in support of the project activities. This can include utilities, leases, computing costs, audit costs, and similar types of costs.

Note: Please see ICJIA Specific Instructions tab for additional information for completing this section.

	Computation					
Description	Cost per Basis	Basis		Pro-Rated Share (Put 100% if cost is not pro-rated)	Match	Total Cost
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -

Contractual Narrative:			

Total \$

mplementing Agency Name:	Grant #:

Section C - Budget Worksheet & Narrative

16). <u>Indirect Cost</u> (2 CFR 200.414) --Provide the most recent indirect cost rate agreement information with the itemized budget. The applicable indirect cost rate(s) negotiated by the organization with the cognizant negotiating agency must be used in computing indirect costs (F&A) for a program budget. The amount for indirect costs should be calculated by applying the current negotiated indirect cost rate(s) to the approved base(s). After the amount of indirect costs is determined for the program, a breakdown of the indirect costs should be provided in the budget worksheet and narrative below.

Note: Please see ICJIA Specific Instructions tab for additional information for completing this section.

December 1	Computation		Federal/State Amount	M-4-b	Total Cost
Description	Base	Rate	rederal/State Amount	Match	Total Cost
					\$ -

This is to certify that I have reviewed the indirect cost rate proposal and grant agreement budget, and to the best of my knowledge and belief:

- (1) The costs included in the proposal to establish the final indirect costs rate for this project period are not listed in the budget as a direct cost.
- (2) The indirect costs charged to this grant agreement are not included as direct costs in a different grant agreement with the Criminal Justice Information Authority (Authority) or any other grantor.
- (3) The direct costs listed in this budget are not charged as indirect costs in a different grant agreement with the Authority or any other grantor.

Violation of this certification may result in a range of penalties, including suspension of funds under this program, termination of this agreement, suspension or debarment from receiving future grants, recoupment of monies provided under this grant, and all remedies allowed under the Illinois Grant Recovery Act (30 ILCS 708/1 et seq.)

Institution/Organization	Institution/Organization
Signature	Signature
Name of Official	Name of Official
 Title	Title
Chief Financial Officer (or equivalent)	Executive Director (or equivalent)
Date of Signature	Date of Signature

Section C - Budget Worksheet & Narrative

Budget Summary--When you have completed the budget worksheet, transfer the totals for each category to the spaces below to the uniform template provided (SECTION A & B). Verify the total costs and the total project costs. Indicate the amount of State requested funds and the amount of non-Statel funds that will support the project.

Budget Category	Federal/State Amount	Match Amount	Total Amount
1. Personnel	\$ -	\$ -	\$ -
2. Fringe Benefits	\$ -	\$ -	\$ -
3. Travel	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -
5. Supplies	\$ -	\$ -	\$ -
6. Contractual Services	\$ -	\$ -	\$ -
16. Indirect Costs	\$ -	\$ -	\$ -
TOTAL PROJECT COSTS	\$ -	\$ -	\$ -

ICJIA Agency Approval	STATE OF ILLINOIS UNIFORM GRANT BUDGET TEMPLATE (updated by ICJIA)	AGENCY: Illinois Criminal Justice Inform	nation Authority
Implementing Agency Name:	DUNS#:	NOFO ID: 2179-1255	Grant #:
	CSFA Short Description: Violence Prevention and Street Intervention Programs (VP-SIP)	` '	Project Period: January 1, February 1, 2020 - June 30, 2020

FOR ICJIA USE ONLY

Final Budget Amount Approval

Final Total Budget Amount	ICJIA Program Staff Name	ICJIA Program Staff Signature	<u>Date</u>		
Final Total Award Amount (if different)	ICJIA Fiscal & Administrative Staff Name	ICJIA Fiscal & Administrative Signature	<u>Date</u>		

Budget Revision Amount Approval

	1 181 1 1 1	T · · · · ·	
Final Revised Budget Amount	ICJIA Program Staff Name	ICJIA Program Staff Signature	<u>Date</u>
Final Total Award Amount (if different)	ICJIA Fiscal & Administrative Staff Name	ICJIA Fiscal & Administrative Signature	<u>Date</u>

Budget Revision Amount Approval

Final Revised Budget Amount	ICJIA Program Staff Name	ICJIA Program Staff Signature	<u>Date</u>
Final Total Award Amount (if different)	ICJIA Fiscal & Administrative Staff Name	ICJIA Fiscal & Administrative Signature	<u>Date</u>

§200.308 Revision of budget and program plans

(e) The Federal/State awarding agency may, at its option, restrict the transfer of funds among direct cost categories or programs, functions and activities for Federal/State awards in which the Federal/State share of the project exceeds the Simplified Acquisition Threshold and the cumulative amount of such transfers exceeds or is expected to exceed 10 percent or \$1,000 per detail line item, whichever is greater of the total budget as last approved by the Federal/State awarding agency. The Federal/State awarding agency cannot permit a transfer that would cause any Federal/State appropriation to be used for purposes other than those consistent with the appropriation.

State of Illinois -- Uniform Budget Template (updated by ICJIA) -- GATA General Instructions

Section A – Budget Summary

FEDERAL/STATE FUNDS

All applicants must complete Section A and provide a break-down by all applicable budget categories. Please read all instructions before completing form.

FEDERAL/STATE GRANT FUNDS

Provide a total requested ICJIA Grant amount for each year in the Revenue portion of Section A. The amount entered in Line (a) will equal the total amount budgeted on Line 18 of Section A.

BUDGET SUMMARY - FEDERAL/STATE FUNDS

All applicants must complete Section A and provide a break-down by the applicable budget categories.

For each project year for which funding is requested, show the total amount requested for each applicable budget category.

Please see detail worksheet and narrative section for further descriptions and explanations of budgetary line items

Section A - Indirect Cost Information: (This information should be completed by the applicant's Business Office). If the applicant is requesting reimbursement for indirect costs on line 17, the applicant's Business Office must select one of the options listed on the Indirect Cost Information page under Section-A Indirect Cost Information (1-4).

Option (1): The applicant has a Negotiated Indirect Cost Rate Agreement (NICRA) that was approved by the Federal government. A copy of this agreement must be provided to the State of Illinois' Indirect Cost Unit for review and documentation. This NICRA will be accepted by all State of Illinois Agencies up to any statutory, rule-based or programmatic restrictions or limitations. If this option is selected by the applicant, basic information is required for completion of this section. See bottom of "Section-A Indirect Cost Information"

NOTE: The applicant may not have a Federally Negotiated Indirect Cost Rate Agreement. Therefore, in order for the applicant to be reimbursed for Indirect Costs from the State of Illinois the applicant must either:

- A) Negotiate an Indirect Cost Rate with the State of Illinois' Indirect Cost Unit with guidance from our State Cognizant Agency on an annual basis.
- B) Elect to use the de minimis rate of 10% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois Awards.
- C) Use a Restricted Rate designated by programmatic statutory policy. (See Notice of Funding Opportunity for Restricted Rate Programs)

Option (2a): The applicant currently has a Negotiated Indirect Cost Rate Agreement with the State of Illinois that will be accepted by all State of Illinois Agencies up to any statutory, rule-based or programmatic restrictions or limitations. The applicant is required to submit a new Indirect Cost Rate Proposal to the Indirect Cost Unit within six (6) months after the close of each fiscal year (2 CFR 200 Appendix IV (C)(2)(c). Note: If this option is selected by the applicant, basic information is required for completion of this section. See bottom of "Section-A Indirect Cost Information"

OR

Option (2b): The applicant currently does not have a Negotiated Indirect Cost Rate Agreement with the State of Illinois. The applicant must submit its initial Indirect Cost Rate Proposal (ICRP) immediately after the applicant is advised that the State award will be made and, in no event, later than three (3) months after the effective date of the State award (2 CFR 200 Appendix IV (C)(2)(b). The initial ICRP will be sent to the State of Illinois' Indirect Cost Unit. Note: The applicant should check with the State of Illinois awarding Agency for information regarding reimbursement of indirect costs while its proposal is being negotiated

Option (3): The applicant elects to charge the de minimis rate of 10% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois awards (2 CFR 200.414 (c)(4)(f) & (200.68). Note: The applicant must be eligible, see 2 CFR 200.414 (f), and submit documentation on the calculation of MTDC within your Budget Narrative under Indirect Costs. Note the applicant may only use the 10 percent de minimis rate if the applicant does not have an Approved Indirect Cost Rate Agreement. The applicant may not use the de minimis rate if it is a Local government, or if your grant is funded under a training rate or restricted rate program.

Option (4): If you are applying for a grant under a Restricted Rate Program, indicate whether you are using a restricted indirect cost rate that is included on your approved Indirect Cost Rate Agreement, or whether you are using a restricted indirect cost rate that complies with statutory or programmatic policies. *Note:* See Notice of State Award for Restricted Rate Programs

Section B - Budget Summary

<u>MATCH FUNDS</u>

MATCH FUNDS: If the applicant is required to provide or volunteers to provide cost-sharing or matching funds or other non-ICJIA resources to the project, the applicant must provide a revenue breakdown of all Match funds in lines (b)-(d). the total of "Match Funds" should equal the amount budgeted on Line 18 of Section B. If a match percentage is required, the amount should be entered in this section.

BUDGET SUMMARY - MATCH FUNDS

If the applicant is required to provide or volunteers to provide cost-sharing or matching funds or other match resources to the project, these costs should be shown for each applicable budget category of Section B.

For each applicable budget category for which matching funds are provided, show the total contribution. Only use those categories that are visible.

Please see detail worksheet and narrative section for further descriptions and explanations of budgetary line items

Section C - Budget Worksheet & Narrative

[Attach separate sheet(s)]

Pay attention to applicable ICJIA-specific instructions.

All applicants are required to submit a budget narrative along with Section A and Section B. The budget narrative is sometimes referred to as the budget justification. The narrative serves two purposes: it explains how the costs were estimated and it justifies the need for the cost. The narrative may include tables for clarification purposes. The State of Illinois recommends using the State of Illinois Uniform Budget Template worksheet and narrative guide provided.

- 1. Provide an itemized budget breakdown, and justification by project year, for each budget category listed in Sections A and B.
- 2. For match funds or resources listed in Section B that are used to meet a cost-sharing or matching requirement or provided as a voluntary cost-sharing or matching commitment, you must include:
 - a. The specific costs or contributions by budget category;
 - b. The source of the costs or contributions; and
 - c. In the case of third-party in-kind contributions, a description of how the value was determined for the donated or contributed goods or services.

Budget Instructions (General)

[Please review cost sharing and matching regulations found in 2 CFR 200.306.]

- 3. If applicable to this program, provide the rate and base on which fringe benefits are calculated.
- 4. If the applicant is requesting reimbursement for indirect costs on line 17, this information should be completed by the applicant's Business Office. Specify the estimated amount of the base to which the indirect cost rate is applied and the total indirect expense. Depending on the grant program to which the applicant is applying and/or the applicant's approved Indirect Cost Rate Agreement, some direct cost budget categories in the applicant's grant application budget may not be included in the base and multiplied by your indirect cost rate. Please indicate which costs are included and which costs are excluded from the base to which the indirect cost rate is applied.
- 5. Provide other explanations or comments you deem necessary.

Keep in mind the following-

Although the degree of specificity of any budget will vary depending on the nature of the project and State of Illinois agency requirements, a complete, well-thought-out budget serves to reinforce your credibility and increase the likelihood of your proposal being funded.

- •A well-prepared budget should be reasonable and demonstrate that the funds being asked for will be used wisely.
- •The budget should be as concrete and specific as possible in its estimates. Make every effort to be realistic, to estimate costs accurately.
- •The budget format should be as clear as possible. It should begin with a budget narrative, which you should write after the entire budget has been prepared.
- •Each section of the budget should be in outline form, listing line items under major headings and subheadings.
- •Each of the major components should be subtotaled with a grand total at the end.

Your budget should justify all expenses and be consistent with the program narrative:

- •Salaries should be comparable to those within the applicant organization.
- •If new staff is being hired, additional space and equipment are considered, as necessary.
- •If the budget lists an equipment purchase, it is the type allowed by the agency.
- •If additional space is rented, the increase in insurance is supported.
- •If an indirect cost rate applies to the proposal, the division between direct and indirect costs is not in conflict, and the aggregate budget totals refer directly to the approved formula. Indirect costs are costs that are not readily assignable to a particular project, but are necessary to the operation of the organization and the performance of the project (like the cost of operating and maintaining facilities, depreciation, and administrative salaries).

\$200.308 Revision of budget and program plans

(e) The Federal/State awarding agency may, at its option, restrict the transfer of funds among direct cost categories or programs, functions and activities for Federal/State awards in which the Federal/State share of the project exceeds the Simplified Acquisition Threshold and the cumulative amount of such transfers exceeds or is expected to exceed 10 percent or \$1,000 per detail line item, whichever is greater of the total budget as last approved by the Federal/State awarding agency. The Federal/State awarding agency cannot permit a transfer that would cause any Federal/State appropriation to be used for purposes other than those consistent with the appropriation.

State of Illinois -- Uniform Budget Template (updated by ICJIA) -- ICJIA Specific Instructions

Section A – Budget Summary

- I. Section A: Federal/State funds are those that come from ICJIA as part of a NOFO or continuation. The Implementing Agency is the entity that will be responsible for managing the agreement. Please complete all cells in blue. If indirect costs are being included in the budget, don't forget to include the Rate and Base in the left column. The following information can be found on the GATA website or on the Uniform Notice of Funding Opportunity (NOFO): NOFO ID; CFSA Number; CFSA Short Description; State Fiscal Year(s) and Project Period. If this is a continuation grant, please enter the grant number.
- II. Section A Indirect Costs: One of the following must be checked: Item 1; 2a or 2b; 3, 4, or 5. If Option 1 or 2a is selected, then the box at the bottom of the page must be filled out.
- III. Section B: All required match must be included. If you are including additional match (overmatch), do not separate required match from overmatch. Those amounts should be combined together. If match is being included in your budget, please complete all cells in blue. If indirect costs will be paid by matching funds, include the Rate and Base in the left column.
- IV. Applicant Certification: The Implementing Agency (and Program Agency, if different from the Implementing Agency), must complete this form at the time the grant agreement is signed.
- V. FFATA Form: This should only be filled out if the source of ICJIA funds is federal (ie JAG, VOCA, VAWA, etc.) AND if the implementing agency receives \$25,000 or more in federal funds. To confirm whether federal funds are part of this award, please refer to the <u>CFDA</u> number on the Uniform Notice for Funding Opportunity (NOFO). If there is a CFDA number, then this award includes federal funds.

VI. Section C1- Personnel:

- A) If a cost of living increase is anticipated, please reflect the adjusted salary in one line item. In the justification, please state that the salary reflects a cost of living increase and provide the amount/length of time of the initial salary and amount/length of time of the final salary.
- B) If you are budgeting for overtime, please put the overtime amount on the bottom row. In the justification, please state how the overtime amount has been calculated.
- C) Quantity of time will depend on the basis selected.

VII. Section C2 - Fringe:

- A) If additional staff were added to the Personnel tab, please make sure they are also added here. Check the totals to make sure that all additional personnel are included. Fringe should include both the ICJIA and match amounts.
- B) If a personnel's salary is prorated, then the flat rate fringe must also be prorated.
- C) Please enter the percentages for retirement, insurance (include health, dental and life) and workman's comp. If there are other fringe benefits, please enter what the benefit is and the percentage.
- D) Column M has been provided for any flat rate fringe benefits. Please enter the dollar amount in Column M. The narrative should provide sufficient detail that ICJIA understands how the flat rate fringe benefits were calculated.

VIII. Section C3 - Travel:

- A) This page is to be used for all travel costs both daily and out of town. Please put similarly purposed trips together. For example daily mileage reimbursement costs can all be on one line item and daily parking costs on the next line item. Out of town trips should also be listed together. For example, if you will attend two conferences, please put costs associated with the first conference together, and then put costs associated with the second conference together.
- B) Travel expenses can not exceed the State of Illinois rates (or your agency's rate, whichever is lower). Mileage, per diem, and lodging rates can be found here: https://www.illinois.gov/cms/Employees/Travel/Pages/TravelReimbursement.aspx (copy and paste this address into a web browser).

IX. Section C4 - Equipment:

- A) All equipment must be purchased no later than 90 days after the start of the grant, unless otherwise approved by your ICJIA grant monitor.
- B) Equipment must be pro-rated if the piece of equipment will be used for any purpose other than the grant program.
- X. Section C5 Supplies: Please list all supplies/commodities in this section.
- XI. Section C6 Contractual Services: Pro-rated Share Certain contractual costs must be pro-rated to determine how much can be applied to the grant program. For example, telephone costs would be proportional to the number of FTEs on the grant funded program divided by the total number of FTE employees in the office. Utility or rent costs would be proportional to the space occupied by the grant funded program divided by the total space.

XII. Section C16 - Indirect Costs:

- A) If a federally-approved or state-approved indirect cost rate is being included, please provide the letter showing the approved indirect cost rate.
- B) If any indirect cost rate is being included (de minimus, federally approved or state approved), the certification must be signed at the time the grant agreement is signed.
- XIII. Summary: Please make sure the amounts on this page are the same as the amounts on each of the Budget Worksheet and Narrative tabs.
- XIX. Agency Approval: Do not complete this form this will be filled out by ICJIA.

	Uniform Application for State Grant Assistance		
	Updated by ICJIA		
	Illinois Criminal Justice Information Authority		
4	- (a) · ·	Completed Section	
1.	Type of Submission	☐ Pre-application	
		□ Application	
		☐ Changed / Corrected Application	
2.	Type of Application	⊠ New	
		☐ Continuation (i.e. multiple year grant)	
		☐ Revision (modification to initial application)	
3.	Date / Time Received by	Completed by State Agency upon Receipt of Application	
	State		
4.	Name of the Awarding	Illinois Criminal Justice Information Authority	
	State Agency		
5.	Catalog of State Financial	546-00-2179	
	Assistance (CSFA) Number		
6.	CSFA Title	Violence Prevention and Street Intervention Programs (VP-SIP)	
Gran	nt specific information (if app	licable) **	
7.	Agreement Number	incapiej	
8.	Previous Agreement		
0.	Numbers		
Cata	log of Federal Domestic Assis	stance (CFDA) Not applicable (No federal funding)	
9.	CFDA Number		
10.	CFDA Title		
11.	CFDA Number		
12.	CFDA Title		
	0. 2		
Fede	eral Fund Information	☑ Not applicable (No federal funding)	
Fed e 13.		☑ Not applicable (No federal funding)	
	eral Fund Information	☑ Not applicable (No federal funding)	
13. 14.	eral Fund Information Federal Award ID Number Federal Award Date	☑ Not applicable (No federal funding)	
13.	Federal Award ID Number Federal Award Date Amount Obligated by this	Not applicable (No federal funding)	
13. 14. 15.	Federal Award ID Number Federal Award Date Amount Obligated by this action	⊠ Not applicable (No federal funding)	
13. 14.	Federal Award ID Number Federal Award Date Amount Obligated by this action Total Amount of the	☐ Not applicable (No federal funding) ☐ Interest of the second of the	
13.14.15.16.	Federal Award ID Number Federal Award Date Amount Obligated by this action Total Amount of the Federal Award		
13. 14. 15. 16.	eral Fund Information Federal Award ID Number Federal Award Date Amount Obligated by this action Total Amount of the Federal Award ding Opportunity Information		
13.14.15.16.	eral Fund Information Federal Award ID Number Federal Award Date Amount Obligated by this action Total Amount of the Federal Award ding Opportunity Information		
13. 14. 15. 16.	Federal Award ID Number Federal Award Date Amount Obligated by this action Total Amount of the Federal Award ding Opportunity Information Funding Opportunity		
13. 14. 15. 16. Func 17.	Federal Award ID Number Federal Award Date Amount Obligated by this action Total Amount of the Federal Award ding Opportunity Information Funding Opportunity Number	2179-1255	
13. 14. 15. 16. Func 17.	Federal Award ID Number Federal Award ID Number Federal Award Date Amount Obligated by this action Total Amount of the Federal Award ding Opportunity Information Funding Opportunity Number Funding Opportunity Title Funding Opportunity	2179-1255	
13. 14. 15. 16. Func 17. 18.	Federal Award ID Number Federal Award ID Number Federal Award Date Amount Obligated by this action Total Amount of the Federal Award ding Opportunity Information Funding Opportunity Number Funding Opportunity Title Funding Opportunity Program Field	2179-1255 Violence Prevention and Street Intervention Programs (VP-SIP) Public Safety	
13. 14. 15. 16. Fund 17. 18. 19. Com	Federal Award ID Number Federal Award ID Number Federal Award Date Amount Obligated by this action Total Amount of the Federal Award ding Opportunity Information Funding Opportunity Number Funding Opportunity Title Funding Opportunity Program Field	2179-1255 Violence Prevention and Street Intervention Programs (VP-SIP) Public Safety	
13. 14. 15. 16. Func 17. 18.	Federal Award ID Number Federal Award ID Number Federal Award Date Amount Obligated by this action Total Amount of the Federal Award ding Opportunity Information Funding Opportunity Number Funding Opportunity Title Funding Opportunity Program Field Inpetition Identification	2179-1255 Violence Prevention and Street Intervention Programs (VP-SIP) Public Safety	
13. 14. 15. 16. Fund 17. 18.	Federal Award ID Number Federal Award ID Number Federal Award Date Amount Obligated by this action Total Amount of the Federal Award ding Opportunity Information Funding Opportunity Number Funding Opportunity Title Funding Opportunity Program Field	2179-1255 Violence Prevention and Street Intervention Programs (VP-SIP) Public Safety	

Applicant Completed Section		
Implementing Agency Information**		
22.	Legal Name	(Name used for DUNS registration and grantee pre-qualification.)
23.	Common Name (DBA)	
24.	Employer / Taxpayer ID Number (EIN, TIN)	
25.	Vendor ID, if different than above	
26.	Organizational DUNS	
27.	SAM expiration date	
28.	SAM Cage Code	
29.	Business Address	Street address:
		City: State: County: Zip + 4:
Imple	ementing Agency: Person to	be contacted for Program Matters involving this application.
30.	First Name	are considered for 110g. and matters into thing time approaches.
31.	Last Name	
32.	Suffix	
33.	Title	
34.	Telephone Number	
35.	Fax Number	
36.	Email address	
Imple	ementing Agency: Person to	be contacted for Business/Administrative Office Matters involving this application.
37.	First Name	
38.	Last Name	
39.	Suffix	
40.	Title	
41.	Telephone Number	
42.	Fax Number	
43.	Email address	
		lifferent from Implementing Agency.)**
44.	Legal Name	(Name used for DUNS registration.)
45.	Organizational DUNS number	
46.	SAM expiration date	
47.	SAM Cage Code	
48.	Business Address	Street address:
		City:
		State:
		County:
		Zip + 4:
Progr	ram Agency: Person to be co	ntacted for Program Matters involving this Application.
49.	First Name	, , , , , , , , , , , , , , , , , , ,

50.	Last Name	
51.	Suffix	
52.	Title	
53.	Telephone Number	
54.	Fax Number	
55.	Email address	
	s Affected**	
56.	Areas Affected by the	(If program is not state-wide, list each county. If not serving the entire county, also
	Project (County(ies);	list the municipalities served within the county. If Chicago is included, list the neighborhoods served within Chicago if services are not provided throughout the
	City(ies); or State-wide)	entire city.)
		entire city.)
57.	Implementing Agency's	Congressional District:
	Legislative District	State Senate District:
	(This must be based on	State Representative District:
	the nine digit zip code	
	registered with SAM.)	
58.	Primary Area of	(This should be either the Program Agency's office or the location where a majority of
	Performance	the grant activity takes place. A street address does not need to be provided but
		please list city, state, and nine digit zip code.)
	Dutana and Australia	Communicated Districts
59.	Primary Area of Performance's Legislative	Congressional District: State Senate District:
	District (This must be	State Representative District:
	based on the nine digit	State Representative District.
	zip code listed above.)	
Appli	cant's Project**	
60.	Description Title of	(Text only for the program title as listed on the Attachment A.)
00.	2000.180.00.100.00	Text only for the program title as listed on the Attachment A.)
00.	Applicant's Project	(Text only for the program title as listed on the Attachment A.)
	Applicant's Project	(Text only for the program title as listed on the Attachment A.)
61.	<u> </u>	Start Date:
	Applicant's Project	
61.	Applicant's Project Proposed Project Term	Start Date: End Date:
	Applicant's Project Proposed Project Term Estimated Funding	Start Date: End Date: Designated/Awarded Amount, if known: \$
61.	Applicant's Project Proposed Project Term	Start Date: End Date: □ Designated/Awarded Amount, if known: \$ □ Budgeted/Requested Amount: \$
61.	Applicant's Project Proposed Project Term Estimated Funding	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$
61.	Applicant's Project Proposed Project Term Estimated Funding	Start Date: End Date: □ Designated/Awarded Amount, if known: \$ □ Budgeted/Requested Amount: \$
61.	Applicant's Project Proposed Project Term Estimated Funding	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$
61.	Applicant's Project Proposed Project Term Estimated Funding	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$
61.	Applicant's Project Proposed Project Term Estimated Funding	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$
61.	Applicant's Project Proposed Project Term Estimated Funding (include all that apply)	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$
61.	Applicant's Project Proposed Project Term Estimated Funding	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$
61. 62.	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) cant Certification:	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:%
61. 62. Appli By sig	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) cant Certification:	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:%
61. 62. Appli By sig	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) cant Certification: gning this application, I certifiments herein are true, comp	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:%
61. 62. Appli By sig state and a	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) cant Certification: gning this application, I certifiments herein are true, compagree to comply with any resu	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:% y (1) to the statements contained in the list of certifications* and (2) that the lete and accurate to the best of my knowledge. I also provide the required assurances*
61. 62. Appli By sign states and a states	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) cant Certification: gning this application, I certifiments herein are true, compagree to comply with any resuments or claims may subject	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:% y (1) to the statements contained in the list of certifications* and (2) that the lete and accurate to the best of my knowledge. I also provide the required assurances* ulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent me to criminal, civil or administrative penalties. (U.S. Code, Title 218, Section 1001)
61. 62. Appli By sig state and a state (*) Th	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) cant Certification: gning this application, I certifiments herein are true, compagree to comply with any resuments or claims may subject the list of certification and ass	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:% y (1) to the statements contained in the list of certifications* and (2) that the lete and accurate to the best of my knowledge. I also provide the required assurances* ulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent
61. 62. Appli By sig state and a state (*) Th	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) cant Certification: gning this application, I certifiments herein are true, compagree to comply with any resuments or claims may subject	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:% y (1) to the statements contained in the list of certifications* and (2) that the lete and accurate to the best of my knowledge. I also provide the required assurances* ulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent me to criminal, civil or administrative penalties. (U.S. Code, Title 218, Section 1001) urances, or an internet site where you may obtain this list is contained in the Notice of
61. 62. Appli By sig state and a state (*) Th	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) cant Certification: gning this application, I certifiments herein are true, compagree to comply with any resuments or claims may subject the list of certification and ass	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:% y (1) to the statements contained in the list of certifications* and (2) that the lete and accurate to the best of my knowledge. I also provide the required assurances* ulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent me to criminal, civil or administrative penalties. (U.S. Code, Title 218, Section 1001)
61. 62. Appli By sig states and a	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) cant Certification: gning this application, I certifiments herein are true, compagree to comply with any resu	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Match: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:% y (1) to the statements contained in the list of certifications* and (2) that the lete and accurate to the best of my knowledge. I also provide the required assurances* ulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent
61. 62. Appli By sig state and a state (*) Th	Applicant's Project Proposed Project Term Estimated Funding (include all that apply) cant Certification: gning this application, I certifiments herein are true, compagree to comply with any resuments or claims may subject the list of certification and ass	Start Date: End Date: Designated/Awarded Amount, if known: \$ Budgeted/Requested Amount: \$ Overmatch: \$ Program Income: \$ Total Amount: \$ Indirect cost rate:% y (1) to the statements contained in the list of certifications* and (2) that the lete and accurate to the best of my knowledge. I also provide the required assurances* ulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent me to criminal, civil or administrative penalties. (U.S. Code, Title 218, Section 1001) urances, or an internet site where you may obtain this list is contained in the Notice of

Imple	ementing Agency Authorized	Official (Director, President, Chair, or similar position)
63.	First Name	
64.	Last Name	
65.	Title	
66.	Telephone Number	
67.	Fax Number	
68.	Email address	
69.	Signature of Authorized	
	Representative	
70.	Date Signed	
Imple	ementing Agency Financial O	fficer (Chief Financial Officer, Comptroller, Treasurer, or similar position.)
71.	First Name	
72.	Last Name	
73.	Title	
74.	Telephone Number	
75.	Fax Number	
76.	Email address	
77.	Signature of Authorized	
	Representative	
78.	Date Signed	
Prog	ram Agency Authorized Offic	ial
79.	First Name	
80.	Last Name	
81.	Title	
82.	Telephone Number	
83.	Fax Number	
84.	Email address	
85.	Signature of Authorized	
	Representative	
86.	Date Signed	

^{**} ICJIA specific modification to GATA form

Program Narrative

Statement of the Problem

- 1. Describe the geographic areas to be supported through this proposal. At a minimum, the county(ies) must be listed. If the entire county is not being served, list the towns/cities is/are being proposed. If the entire town/city is/are not being proposed, list the neighborhood(s).
- 1. Describe the extent and types of violence children, youth, adults and families experience in this geographic area.
- 2. Describe additional factors that contribute to the problem this application seeks to address.

Agency Capacity

- 3. Describe your agency's experience in a strategic planning processes. Include specific examples with timeframe, successes, challenges and lessons learned.
- 4. Describe your agency's experience collaborating with other agencies and systems on projects that improved the lives of children, youth, adults or families. Include the membership, projects' timeframe, successes, challenges, and lessons learned.
- 5. Describe your agency's ability to manage grants. Include your agency's current annual budget.
- 6. If the contractual section of the budget includes proposed subaward(s), answer the following question:
 - a. Explain how the applicant agency will monitor subawards for compliance with program terms and Federal and State regulations, detailing monitoring frequency and corrective action procedures, and agency ability to provide any needed technical assistance.

Project Implementation and Management

Program Narrative

- 7. Partnership: Discuss steps you plan to take to engage high-level leadership and cross system representatives as outlined in the NOFO, Program Design section. Please list each anticipated member.
- 8. Collaboration: Discuss the proposed process to develop a shared vision, mission and language for the violence prevention plan. Include number and type of meetings; how sector representation and engagement will be managed.
- 9. Community Engagement: Discuss how community members will be engaged throughout the planning process. Specify demographic groups and neighborhoods if applicable. Include number of events/activities and proposed methods to engage community members.
- 10. Staffing: Describe the positions included in the proposed planning process, including the qualifications necessary to coordinate this planning process. Also state what position this individual will report to.
- 11. Information Gathering: Describe proposed data collection and analysis methods. Specify number and type of collection and analysis methods.
- 12. Creating the Plan: Describe the proposed process for drafting, reviewing, finalizing and designing the plan. Include number of meetings, how additional input will be gathered and incorporated.

Goals, Objectives and Performance Measures

Funded programs will be required to submit quarterly progress reports that will minimally include the following information based on the objectives the applicant agencies propose in their response to this solicitation. Fill in the areas below where indicated.

Goal: To create a comprehe	sive violent prevention plan, created through a collaborative	
process, that recommends specific strategies and action steps.		

Process Objectives Performance Measures

Program Narrative

Form a planning group that includes at least one representative from each of the following sectors: 1) elected officials' office 2) public health; 3) police/sheriff; 4) human services; 5) educational institutions; 5) victim service organizations; 6) child/youth serving organizations; 7) grassroots and faith-based groups; 8) people with lived experiences; and 9) community residents, if not represented in the other sectors	# of unique sectors represented across the attendance sheets
At least one representative from each required sector attends at least 50% of planning group meetings.	# of sectors that attended at least 50% of planning group meetings
Conduct meetings with the planning group	# of meetings conducted with the planning group
Conduct qualitative data collection activities (e.g., focus groups, systematic written observations, open-ended questions in a survey, interviews).	# of qualitative data collection activities conducted
Conduct quantitative data collection activities (frequencies/counts, descriptive statistics, close-ended questions in a survey, interviews).	# of quantitative data collection activities conducted
Complete at least one gap analysis of current VP Programming and discuss it the planning group	# of gap analyses discussed with planning group members
Conduct at least two community forums to collect information and inform the plan	# of community forums conducted to collect information and inform the plan
Outcome Objectives	Performance Measures
The final prevention plan targets at least two forms of violence at each of the following levels: universal, selected, AND indicated	# of forms of violence targeted by the prevention plan at each of the following levels: universal, selected, AND indicated
The final prevention plan includes recommendations and actions steps to achieve recommendations	Plan and ICJIA template are completed and submitted in close out report.

Implementation Schedule

Complete the table below, defining each step in the implementation and operation of the proposed program, detailing the staff position responsible for each task and a target date for completion. Do not use staff names. Please add additional lines as necessary.

Track One: Violence Prevention Planning Program Narrative

Task	Staff Position Responsible	Date Due
Submit quarterly data report to the		15 th of month
Authority		after the end of
·		the quarter
Submit monthly fiscal reports to the		15 th of month
Authority		after the end of
		the reporting
		month

Grantee Contact

Name	
Title	
Address	
City	
Zip	
Phone	
TTY#	
Fax#	
Email address	

Track Two: One-Time Supports

Program Narrative

Statement of the Problem

- 1. Describe the geographic areas to be supported through this proposal. At a minimum, the county(ies) must be listed. If the entire county is not being served, list the towns/cities is/are being proposed. If the entire town/city is/are not being proposed, list the neighborhood(s).
- 2. Describe the extent and types of violence children, youth, adults and families experience in this geographic area.
- 3. Describe additional factors that contribute to the problem this application seeks to address.

Agency Capacity

- 1. Describe your agency's ability to manage grants. Include agency's current annual budget.
- 2. Describe your agency's property retention policies and procedures.

Current Violence Prevention Program

- 4. Describe the current violence prevention programming supported through this proposal. Include the risk and protective factors related to violence prevention that the program addresses.
- 5. Describe the demographics of the participants engaged in the current violence prevention programming.
- 6. Describe the requested one-time supports, why the items(s) is needed and how each relate to the current programming.

Track Two: One-Time Supports

Program Narrative

- 7. Describe how the one time-supports will be used through June 30, 2021. Note: Selected applicants will have to certify that the purchased items will be utilized for violence prevention activities through June 30, 2021.
- 8. Describe if the proposed item(s) will be used by other agency programs. For each of the other programs that will use the item(s), include their programs' budgets, number of employees and the proposed frequency of use.

Goals, Objectives and Performance Measures

Funded programs will be required to submit quarterly progress reports that will minimally include the following information based on the objectives the applicant agencies propose in their response to this solicitation.

Goal: To support existing violence prevention programs through one-time purchases that									
enhance the program.									
Outcome Objectives	Performance Measures								
Procure item(s) by May 31, 2020 June 15, 2020 to	Date item(s) is/are procured								
support violence prevention programming.	-								
If applicable, install item(s) by May 31, 2020 June	Date item(s) is/are installed								
15, 2020.									
Begin using item(s) in current violence prevention programming by June 1, 2020 June 20, 2020.	Date item(s) is/are utilized.								

Implementation Schedule

Complete the table below, defining each step in the implementation and operation of the proposed program, detailing the staff position responsible for each task and a target date for completion. Do not use staff names. Please add additional lines as necessary.

Task	Staff Position F	Responsible Date Due	

Track Two: One-Time Supports

Program Narrative

Submit quarterly data report to the	15 th of month
Authority	after the end of
	the quarter
Submit monthly fiscal reports to the	15 th of month
Authority	after the end of
	the reporting
	month

Grantee Contact

Name	
Title	
Address	
City	
Zip	
Phone	
TTY#	
Fax#	
Email address	

STATE OF ILLINOIS		T BUDGET TEMPLATE ted by ICJIA)	AGENCY: Illinois Criminal Justice Information Author				
implementing Agency Name:	DUNS#:		NOFO ID: 2179-1255	Grant #:			
CFSA Number: 546-00-2179	CSFA Short Description: V Intervention Programs (VP-S	Tiolence Prevention and Street SIP)	State Fiscal Year(s): FY20	Project Period: January 1, February 1, 2020 - June 30, 2020			
All applicants must complete the cells highlighted in blue. The remain Schould complete the column under "Year 1." Please read all instruc	ctions before completing form.			nuesting funding for only one year			
<u>SE</u> 0	CTION A FEDER	AL/STATE OF ILLINOI	IS FUNDS				
Revenues	Year 1						
(a). State of Illinois Grant Amount Requested							
BUDG	GET SUMMARY - FEDI	ERAL/STATE OF ILLING	DIS FUNDS				
Budget Expenditure Categories OMB Uniform Guidance Federal Awards Reference 2 CFR 200	<u>Year 1</u>						
. Personnel (Salaries & Wages) 200.430	\$	-					
2. Fringe Benefits 200.431	\$	-					
3. Travel 200.474	\$	-					
4. Equipment 200.439	\$	-					
5. Supplies 200.94	\$	-					
5. Contractual Services (200.318) & Subawards (200.92)	\$	-					
6. Total Direct Costs (lines 1-15) 200.413	\$	-					
17. Indirect Costs* (see below) 200.414	0						
Rate: Base: \$	\$	-					

SECTION - A (continued) Indirect Cost Rate Information If your organization is requesting reimbursement for indirect costs on line 17 of the Budget Summary, please select one of the following options. Our Organization receives direct Federal funding and currently has a Negotiated Indirect Cost Rate Agreement (NICRA) with our Federal Cognizant Agency. A copy of this agreement will be provided to the State of Illinois' Indirect Cost Unit for review and documentation before reimbursement is allowed. This NICRA will be accepted by all State of 1) Illinois Agencies up to any statutory, rule-based or programmatic restrictions or limitations. NOTE: (If this option is selected, please provide basic Negotiated Indirect Cost Rate Agreement information in area designated below) Your Organization may not have a Federally Negotiated Indirect Cost Rate Agreement. Therefore, in order for your Organization to be reimbursed for Indirect Costs from the State of Illinois, your Organization must either: A. Negotiate an Indirect Cost Rate with the State of Illinois' Indirect Cost Unit with guidance from your State Cognizant Agency on an annual basis. B. Elect to use the de minimis rate of 10% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois Awards. C. Use a Restricted Rate designated by programmatic or statutory policy. (See Notice of Funding Opportunity for Restricted Rate Programs) Our Organization currently has a Negotiated Indirect Cost Rate Agreement with the State of Illinois that will be accepted by all State of Illinois Agencies up to any statutory, rulebased or programmatic restrictions or limitations. Our Organization is required to submit a new Indirect Cost Rate Proposal to the Indirect Cost Unit within six (6) months after 2a) the close of each fiscal year (2 CFR 200 Appendix IV (C)(2)(c). NOTE: (If this option is selected, please provide basic Indirect Cost Rate information in area designated below) Our Organization currently does not have a Negotiated Indirect Cost Rate Agreement with the State of Illinois. Our Organization will submit our initial Indirect Cost Rate 2b) Proposal (ICRP) immediately after our Organization is advised that the State award will be made and, in no event, later than three (3) months after the effective date of the State award (2 CFR 200 Appendix IV (C)(2)(b). The initial ICRP will be sent to the State of Illinois' Indirect Cost Unit. NOTE: (Check with your State of Illinois Agency for information regarding reimbursement of indirect costs while your proposal is being negotiated) Our Organization has never received a Negotiated Indirect Cost Rate Agreement from either the Federal government or the State of Illinois and elects to charge the de minimis 3) rate of 10% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois awards (2 CFR 200.414 (c)(4)(f) & (200.68). NOTE: (Your Organization must be eligible, see 2 CFR 200.414 (f), and submit documentation on the calculation of MTDC within your Budget Narrative under Indirect Costs) For Restricted Rate Programs (check one) -- Our Organization is using a restricted indirect cost rate that: Is included as a "Special Indirect Cost Rate" in our NICRA (2 CFR 200Appendix IV (5) Or; 4) Complies with other statutory policies (*please specify*): The Restricted Indirect Cost Rate is 5) No reimbursement of Indirect Cost is being requested. (Please consult your program office regarding possible match requirements)

Basic Negotiated Indirect Cost Rate Agreement information if Option (1) or (2a) is selected

Period Covered by the NICRA:

Approving Fed/State Agency (please specify):

The Indirect Cost Rate is:

The Distribution Base is:

STATE OF ILLINOIS		BUDGET TEMPLATE by ICJIA)	AGENCY: Illinois Criminal Justice Information Authorit					
Implementing Agency Name:	DUNS#:		NOFO ID: 2179-1255	Grant #:				
CFSA Number: 546-00-2179	CSFA Short Description: V Street Intervention Progra		State Fiscal Year(s): FY20	Project Period: January 1, February 1, 2020 - June 30, 2020				
If you are required to provide or volunteer to provide cost-sharing, match complete the cells highlighted in blue. The remaining cells will be automounder "Year 1." Please read all instructions before completing form.								
	SECTION B	MATCH FUNDS						
Program Revenues	Year 1							
Grantee Match Requirement: <u>%_(ICJIA to populate only if match is required)</u>								
(b)Cash								
(c)Non-cash								
(d). Other Funding & Contributions								
NON-STATE Funds Total								
	BUDGET SUMMA	RY MATCH FUNDS						
Budget Expenditure Categories OMB Uniform Guidance Federal Awards Reference 2 CFR 200	Year 1							
1. Personnel (Salaries & Wages) 200.430	\$ -							
2. Fringe Benefits 200.431	\$ -							
3. Travel 200.474	\$ -							
4. Equipment 200.439	\$ -							
5. Supplies 200.94	\$ -							
6. Contractual Services (200.318) & Subawards (200.92)	\$ -							
16. Total Direct Costs (lines 1-15) 200.413	\$ -							
17. Indirect Costs* (see below) 200.414								
Rate: % Base:	\$ -							
18 Total Costs NON-ICHA (Match) Funds (lines 16 and 17)	s -							

STATE OF ILLINOIS	UNIFORM GRANT BUDGET TEMPLATE (updated by ICJIA)	AGENCY: Illinois Criminal Justice Information Author			
Implementing Agency Name:	DUNS#:	NOFO ID: 2179-1255	Grant #:		
	CSFA Short Description: Violence Prevention and Street Intervention Programs (VP-SIP)	` '	Project Period: January 1, February 1, 2020 - June 30, 2020		

"By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate and that any false, fictitious, or fraudulent information or the

Note: Please see ICJIA Specific Instructions tab for additional information about filling out this sheet.

(2 CFR 200.415)

Date of Signature

Implementing	Agency	Program Agency
Name of Applicant Institution/Organization	Name of Applicant Institution/Organization	Institution/Organization
Signature	Signature	Signature
Name of Official	Name of Official	Name of Official
Title Chief Financial Officer (or equivalent)	Title Executive Director (or equivalent)	Title Executive Director (or equivalent)

Note: The State awarding agency may change required signers based on the grantee's organizational structure. The required signers must have the authority to enter into contractual agreements on behalf of the organization.

Date of Signature

Date of Signature

Implementing Agency Name: Grant #:

Section C - Budget Worksheet & Narrative

1). Personnel (Salaries & Wages) (2 CFR 200.430) -- List each position by title and name of employee, if available. Show the annual salary rate and the percentage of time to be devoted to the project and length of time working on the project. Compensation paid for employees engaged in grant activities must be consistent with that paid for similar work within the applicant organization. Include a description of the responsibilities and duties of each position in relationship to fulfilling the project goals and objectives in the narrative space provided below. Also, provide a justification and description of each position (including vacant positions). Relate each position specifically to program objectives. Personnel cannot exceed 100% of their time on all active projects.

Note: Please see ICJIA Specific Instructions tab for additional information for completing this section.

			Com	putation					
Name	Position	Salary or Wage	Basis (Yr./Mo./Hr.)	% of Time	Quantity (based on Yr/Mo/Hr)	Federal/State Amount	Match	Total Cost	
								\$	-
								\$	-
								\$	-
								\$	-
								\$	-
								\$	-
								\$	-
								\$	-
								\$	-
								\$	-
	\$ -	\$ -	\$	-					

Personnel Narrative:	

Implementing Agency Name:

Section C - Budget Worksheet & Narrative

2). Fringe Benefits (2 CFR 200.431)—Fringe benefits should be based on actual known costs or an established formula. Fringe benefits are for the personnel listed in category (1) direct salaries and wages, and only for the percentage of time devoted to the project. Provide the name of the fringe benefit (i.e., Retirement, Insurance, Worker's Comp, etc), the fringe benefit rate, and a clear description of how the computation of fringe benefits was done. Provide both the annual (for multiyear awards) and total. If a fringe benefit rate is not used, show how the fringe benefits were computed for each position. The budget justification should be reflected in the budget description. Elements that comprise fringe benefits should be indicated.

Note: Please see ICJIA Specific Instructions tab for additional information for completing this section.

			Fringe Costs																
Name	Position	Calcula Salai		FI	CA	Otho (Please sp		Other (Please sp		Otho (Please sp		Othe (Please sp			Flat Rate Fringe (If applicable)	Federal/State Amount	Match	Total	l Cost
		Saidiy		7.6500%															
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$ -				\$	-
																¢	ø	ø	

Fringe Narrative:		

Implementing Agency Name:

Grant #:

Section C - Budget Worksheet & Narrative

3). <u>Travel</u> (2 CFR 200.474)-- Travel should include: origin and destination, estimated costs and type of transportation, number of travelers, related lodging and per diem costs, brief description of the travel involved, its purpose, and explanation of how the proposed travel is necessary for successful completion of the project. In training projects, travel and meals for trainees should be listed separately. Show the number of trainees and unit cost involved. Identify the location of travel, if known; or if unknown, indicate "location to be determined." Indicate source of Travel Policies applied, Applicant or State of Illinois Travel Regulations. **NOTE:** Dollars requested in the travel category should be for staff travel only. Travel for consultants should be shown in the contractual category along with the consultant's fee. Travel for training participants, advisory committees, review panels and etc., should be itemized the same way as indicated above and placed in the "Miscellaneous" category.

Column G ("Basis") defines the quantity being measured. For example, if your expense is two nights in a hotel, the basis is "Nights." If the expense is 300 miles, the basis is "Miles."

Note: Please see ICJIA Specific Instructions tab for additional information for completing this section.

Purpose of Travel	Location		Computation Federal/State Match Total Cost				Total Cost				
(brief description)	Location	Items	Cost Rate	Quantity	Basis	# Staff	# of Trips	Amount	Match	Total Cost	
										\$ -	
										\$ -	
										\$ -	
										\$ -	
										\$ -	
										\$ -	
										\$ -	
										\$ -	
										\$ -	
										\$ -	
										\$ -	
				•	•	•	Total	\$ -	\$ -	\$ -	

Travel Narrative:			

Implementing Agency Name:	Grant #:
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4). Equipment (2 CFR 200.439) -- Provide justification for the use of each item and relate them to specific program objectives. Provide both the annual (for multiyear awards) and total for equipment. Equipment is defined as an article of tangible personal property that has a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the non-Federal entity for financial statement purposes, or \$5,000. An applicant organization may classify equipment at a lower dollar value but cannot classify it higher than \$5,000. (Note: Organization's own capitalization policy for classification of equipment can be used). Applicants should analyze the cost benefits of purchasing versus leasing equipment, especially high cost items and those subject to rapid technical advances. Rented or leased equipment costs should be listed in the "Contractual" category. Explain how the equipment is necessary for the success of the project. Attach a narrative describing the procurement method to be used.

Note: Please see ICJIA Specific Instructions tab for additional information for completing this section.

		Computation	n				
Item	Quantity	Cost	Pro-Rated Share (Put 100% if cost is not pro-rated)	Federal/State Amount	Match	Total C	Cost
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-

Total \$

\$

Equipment Narrative:	

Implementing Agency Name:	Grant #:
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5). Supplies (2 CFR 200.94) -- List items by type (office supplies, postage, training materials, copying paper, and other expendable items such as books, hand held tape recorders) and show the basis for computation. Generally, supplies include any materials that are expendable or consumed during the course of the project.

Note: Please see ICJIA Specific Instructions tab for additional information for completing this section.

The second secon		Computation					
Supply Items	Quantity/ Duration	Cost	Pro-Rated Share (Put 100% if cost is not pro-rated)	Federal/State Amount	Match	Total C	Cost
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-
						\$	-

Total \$

Supplies Narrative:	

Implementing Agency Name: Grant #:

Section C - Budget Worksheet & Narrative

6). Contractual Services (2 CFR 200.318) & Subawards (200.92) -- Provide a description of the product or service to be procured by contract and an estimate of the cost. Applicants are encouraged to promote free and open competition in awarding contracts. Federal rules require a separate justification must be provided for sole source contracts in excess of \$150,000 (See 2 CFR 200.88). However, ICJIA has additional requirements for sole source contracts of other amounts. The applicant must contact the ICJIA grant monitor or program administrator for additional information. This budget category may include subawards. Provide separate budgets for each subaward or contract, regardless of the dollar value and indicate the basis for the cost estimates in the narrative. Describe products or services to be obtained and indicate the applicability or necessity of each to the project.

Please also note the differences between subaward, contract, and contractor (vendor):

- 1) Subaward (200.92) means an award provided by a pass-through entity to a subrecipient for the subrecipient to carry out part of a Federal/State award, including a portion of the scope of work or objectives. It does not include payments to an individual that is a beneficiary of a Federal/State program.
- 2) Contract (200.22) means a legal instrument by which a non-Federal entity purchases property or services needed to carry out the project or program under a Federal award. The term as used in this part does not include a legal instrument, even if the non-Federal entity considers it a contract, when the substance of the transaction meets the definition of a Federal award or subaward.
- 3) "Vendor" or "Contractor" is generally a dealer, distributor or other seller that provides services in support of the project activities. This can include utilities, leases, computing costs, audit costs, and similar types of costs.

Note: Please see ICJIA Specific Instructions tab for additional information for completing this section.

		Computation				
Description	Cost per Basis	Basis		Pro-Rated Share (Put 100% if cost is not pro-rated)	Match	Total Cost
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -

Contractual Narrative:			

Total \$

mplementing Agency Name:	Grant #:

16). <u>Indirect Cost</u> (2 CFR 200.414) --Provide the most recent indirect cost rate agreement information with the itemized budget. The applicable indirect cost rate(s) negotiated by the organization with the cognizant negotiating agency must be used in computing indirect costs (F&A) for a program budget. The amount for indirect costs should be calculated by applying the current negotiated indirect cost rate(s) to the approved base(s). After the amount of indirect costs is determined for the program, a breakdown of the indirect costs should be provided in the budget worksheet and narrative below.

Note: Please see ICJIA Specific Instructions tab for additional information for completing this section.

Description	Computation		Federal/State Amount	Match	Total Cost
Description	Base	Rate	rederai/State Amount	Match	Total Cost
					\$ -

This is to certify that I have reviewed the indirect cost rate proposal and grant agreement budget, and to the best of my knowledge and belief:

- (1) The costs included in the proposal to establish the final indirect costs rate for this project period are not listed in the budget as a direct cost.
- (2) The indirect costs charged to this grant agreement are not included as direct costs in a different grant agreement with the Criminal Justice Information Authority (Authority) or any other grantor.
- (3) The direct costs listed in this budget are not charged as indirect costs in a different grant agreement with the Authority or any other grantor.

Violation of this certification may result in a range of penalties, including suspension of funds under this program, termination of this agreement, suspension or debarment from receiving future grants, recoupment of monies provided under this grant, and all remedies allowed under the Illinois Grant Recovery Act (30 ILCS 708/1 et seq.)

Institution/Organization	Institution/Organization
Signature	Signature
Name of Official	Name of Official
 Title	Title
Chief Financial Officer (or equivalent)	Executive Director (or equivalent)
Date of Signature	Date of Signature

Budget Summary--When you have completed the budget worksheet, transfer the totals for each category to the spaces below to the uniform template provided (SECTION A & B). Verify the total costs and the total project costs. Indicate the amount of State requested funds and the amount of non-Statel funds that will support the project.

Budget Category	Federal/State Amount	Match Amount	Total Amount
1. Personnel	\$ -	\$ -	\$ -
2. Fringe Benefits	\$ -	\$ -	\$ -
3. Travel	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -
5. Supplies	\$ -	\$ -	\$ -
6. Contractual Services	\$ -	\$ -	\$ -
16. Indirect Costs	\$ -	\$ -	\$ -
TOTAL PROJECT COSTS	\$ -	\$ -	\$ -

ICJIA Agency Approval	STATE OF ILLINOIS UNIFORM GRANT BUDGET TEMPLATE (updated by ICJIA)	AGENCY: Illinois Criminal Justice Information Authority		
Implementing Agency Name:	DUNS#:	NOFO ID: 2179-1255	Grant #:	
	CSFA Short Description: Violence Prevention and Street Intervention Programs (VP-SIP)	` '	Project Period: January 1, February 1, 2020 - June 30, 2020	

FOR ICJIA USE ONLY

Final Budget Amount Approval

Final Total Budget Amount	ICJIA Program Staff Name	ICJIA Program Staff Signature	<u>Date</u>
Final Total Award Amount (if different)	ICJIA Fiscal & Administrative Staff Name	ICJIA Fiscal & Administrative Signature	Date

Budget Revision Amount Approval

The state of the s			
Final Revised Budget Amount	ICJIA Program Staff Name	ICJIA Program Staff Signature	<u>Date</u>
Final Total Award Amount (if different)	ICJIA Fiscal & Administrative Staff Name	ICJIA Fiscal & Administrative Signature	<u>Date</u>

Budget Revision Amount Approval

Final Revised Budget Amount	ICJIA Program Staff Name	ICJIA Program Staff Signature	<u>Date</u>
Final Total Award Amount (if different)	ICJIA Fiscal & Administrative Staff Name	ICJIA Fiscal & Administrative Signature	<u>Date</u>

§200.308 Revision of budget and program plans

(e) The Federal/State awarding agency may, at its option, restrict the transfer of funds among direct cost categories or programs, functions and activities for Federal/State awards in which the Federal/State share of the project exceeds the Simplified Acquisition Threshold and the cumulative amount of such transfers exceeds or is expected to exceed 10 percent or \$1,000 per detail line item, whichever is greater of the total budget as last approved by the Federal/State awarding agency. The Federal/State awarding agency cannot permit a transfer that would cause any Federal/State appropriation to be used for purposes other than those consistent with the appropriation.

State of Illinois -- Uniform Budget Template (updated by ICJIA) -- GATA General Instructions

Section A – Budget Summary

FEDERAL/STATE FUNDS

All applicants must complete Section A and provide a break-down by all applicable budget categories. Please read all instructions before completing form.

FEDERAL/STATE GRANT FUNDS

Provide a total requested ICJIA Grant amount for each year in the Revenue portion of Section A. The amount entered in Line (a) will equal the total amount budgeted on Line 18 of Section A.

BUDGET SUMMARY - FEDERAL/STATE FUNDS

All applicants must complete Section A and provide a break-down by the applicable budget categories.

For each project year for which funding is requested, show the total amount requested for each applicable budget category.

Please see detail worksheet and narrative section for further descriptions and explanations of budgetary line items

Section A - Indirect Cost Information: (This information should be completed by the applicant's Business Office). If the applicant is requesting reimbursement for indirect costs on line 17, the applicant's Business Office must select one of the options listed on the Indirect Cost Information page under Section-A Indirect Cost Information (1-4).

Option (1): The applicant has a Negotiated Indirect Cost Rate Agreement (NICRA) that was approved by the Federal government. A copy of this agreement must be provided to the State of Illinois' Indirect Cost Unit for review and documentation. This NICRA will be accepted by all State of Illinois Agencies up to any statutory, rule-based or programmatic restrictions or limitations. If this option is selected by the applicant, basic information is required for completion of this section. See bottom of "Section-A Indirect Cost Information"

NOTE: The applicant may not have a Federally Negotiated Indirect Cost Rate Agreement. Therefore, in order for the applicant to be reimbursed for Indirect Costs from the State of Illinois the applicant must either:

- A) Negotiate an Indirect Cost Rate with the State of Illinois' Indirect Cost Unit with guidance from our State Cognizant Agency on an annual basis.
- B) Elect to use the de minimis rate of 10% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois Awards.
- C) Use a Restricted Rate designated by programmatic statutory policy. (See Notice of Funding Opportunity for Restricted Rate Programs)

Option (2a): The applicant currently has a Negotiated Indirect Cost Rate Agreement with the State of Illinois that will be accepted by all State of Illinois Agencies up to any statutory, rule-based or programmatic restrictions or limitations. The applicant is required to submit a new Indirect Cost Rate Proposal to the Indirect Cost Unit within six (6) months after the close of each fiscal year (2 CFR 200 Appendix IV (C)(2)(c). Note: If this option is selected by the applicant, basic information is required for completion of this section. See bottom of "Section-A Indirect Cost Information"

OR

Option (2b): The applicant currently does not have a Negotiated Indirect Cost Rate Agreement with the State of Illinois. The applicant must submit its initial Indirect Cost Rate Proposal (ICRP) immediately after the applicant is advised that the State award will be made and, in no event, later than three (3) months after the effective date of the State award (2 CFR 200 Appendix IV (C)(2)(b). The initial ICRP will be sent to the State of Illinois' Indirect Cost Unit. Note: The applicant should check with the State of Illinois awarding Agency for information regarding reimbursement of indirect costs while its proposal is being negotiated

Option (3): The applicant elects to charge the de minimis rate of 10% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois awards (2 CFR 200.414 (c)(4)(f) & (200.68). Note: The applicant must be eligible, see 2 CFR 200.414 (f), and submit documentation on the calculation of MTDC within your Budget Narrative under Indirect Costs. Note the applicant may only use the 10 percent de minimis rate if the applicant does not have an Approved Indirect Cost Rate Agreement. The applicant may not use the de minimis rate if it is a Local government, or if your grant is funded under a training rate or restricted rate program.

Option (4): If you are applying for a grant under a Restricted Rate Program, indicate whether you are using a restricted indirect cost rate that is included on your approved Indirect Cost Rate Agreement, or whether you are using a restricted indirect cost rate that complies with statutory or programmatic policies. *Note:* See Notice of State Award for Restricted Rate Programs

Section B - Budget Summary

<u>MATCH FUNDS</u>

MATCH FUNDS: If the applicant is required to provide or volunteers to provide cost-sharing or matching funds or other non-ICJIA resources to the project, the applicant must provide a revenue breakdown of all Match funds in lines (b)-(d). the total of "Match Funds" should equal the amount budgeted on Line 18 of Section B. If a match percentage is required, the amount should be entered in this section.

BUDGET SUMMARY - MATCH FUNDS

If the applicant is required to provide or volunteers to provide cost-sharing or matching funds or other match resources to the project, these costs should be shown for each applicable budget category of Section B.

For each applicable budget category for which matching funds are provided, show the total contribution. Only use those categories that are visible.

Please see detail worksheet and narrative section for further descriptions and explanations of budgetary line items

Section C - Budget Worksheet & Narrative

[Attach separate sheet(s)]

Pay attention to applicable ICJIA-specific instructions.

All applicants are required to submit a budget narrative along with Section A and Section B. The budget narrative is sometimes referred to as the budget justification. The narrative serves two purposes: it explains how the costs were estimated and it justifies the need for the cost. The narrative may include tables for clarification purposes. The State of Illinois recommends using the State of Illinois Uniform Budget Template worksheet and narrative guide provided.

- 1. Provide an itemized budget breakdown, and justification by project year, for each budget category listed in Sections A and B.
- 2. For match funds or resources listed in Section B that are used to meet a cost-sharing or matching requirement or provided as a voluntary cost-sharing or matching commitment, you must include:
 - a. The specific costs or contributions by budget category;
 - b. The source of the costs or contributions; and
 - c. In the case of third-party in-kind contributions, a description of how the value was determined for the donated or contributed goods or services.

Budget Instructions (General)

[Please review cost sharing and matching regulations found in 2 CFR 200.306.]

- 3. If applicable to this program, provide the rate and base on which fringe benefits are calculated.
- 4. If the applicant is requesting reimbursement for indirect costs on line 17, this information should be completed by the applicant's Business Office. Specify the estimated amount of the base to which the indirect cost rate is applied and the total indirect expense. Depending on the grant program to which the applicant is applying and/or the applicant's approved Indirect Cost Rate Agreement, some direct cost budget categories in the applicant's grant application budget may not be included in the base and multiplied by your indirect cost rate. Please indicate which costs are included and which costs are excluded from the base to which the indirect cost rate is applied.
- 5. Provide other explanations or comments you deem necessary.

Keep in mind the following-

Although the degree of specificity of any budget will vary depending on the nature of the project and State of Illinois agency requirements, a complete, well-thought-out budget serves to reinforce your credibility and increase the likelihood of your proposal being funded.

- •A well-prepared budget should be reasonable and demonstrate that the funds being asked for will be used wisely.
- •The budget should be as concrete and specific as possible in its estimates. Make every effort to be realistic, to estimate costs accurately.
- •The budget format should be as clear as possible. It should begin with a budget narrative, which you should write after the entire budget has been prepared.
- •Each section of the budget should be in outline form, listing line items under major headings and subheadings.
- •Each of the major components should be subtotaled with a grand total at the end.

Your budget should justify all expenses and be consistent with the program narrative:

- •Salaries should be comparable to those within the applicant organization.
- •If new staff is being hired, additional space and equipment are considered, as necessary.
- •If the budget lists an equipment purchase, it is the type allowed by the agency.
- •If additional space is rented, the increase in insurance is supported.
- •If an indirect cost rate applies to the proposal, the division between direct and indirect costs is not in conflict, and the aggregate budget totals refer directly to the approved formula. Indirect costs are costs that are not readily assignable to a particular project, but are necessary to the operation of the organization and the performance of the project (like the cost of operating and maintaining facilities, depreciation, and administrative salaries).

\$200.308 Revision of budget and program plans

(e) The Federal/State awarding agency may, at its option, restrict the transfer of funds among direct cost categories or programs, functions and activities for Federal/State awards in which the Federal/State share of the project exceeds the Simplified Acquisition Threshold and the cumulative amount of such transfers exceeds or is expected to exceed 10 percent or \$1,000 per detail line item, whichever is greater of the total budget as last approved by the Federal/State awarding agency. The Federal/State awarding agency cannot permit a transfer that would cause any Federal/State appropriation to be used for purposes other than those consistent with the appropriation.

State of Illinois -- Uniform Budget Template (updated by ICJIA) -- ICJIA Specific Instructions

Section A – Budget Summary

- I. Section A: Federal/State funds are those that come from ICJIA as part of a NOFO or continuation. The Implementing Agency is the entity that will be responsible for managing the agreement. Please complete all cells in blue. If indirect costs are being included in the budget, don't forget to include the Rate and Base in the left column. The following information can be found on the GATA website or on the Uniform Notice of Funding Opportunity (NOFO): NOFO ID; CFSA Number; CFSA Short Description; State Fiscal Year(s) and Project Period. If this is a continuation grant, please enter the grant number.
- II. Section A Indirect Costs: One of the following must be checked: Item 1; 2a or 2b; 3, 4, or 5. If Option 1 or 2a is selected, then the box at the bottom of the page must be filled out.
- III. Section B: All required match must be included. If you are including additional match (overmatch), do not separate required match from overmatch. Those amounts should be combined together. If match is being included in your budget, please complete all cells in blue. If indirect costs will be paid by matching funds, include the Rate and Base in the left column.
- IV. Applicant Certification: The Implementing Agency (and Program Agency, if different from the Implementing Agency), must complete this form at the time the grant agreement is signed.
- V. FFATA Form: This should only be filled out if the source of ICJIA funds is federal (ie JAG, VOCA, VAWA, etc.) AND if the implementing agency receives \$25,000 or more in federal funds. To confirm whether federal funds are part of this award, please refer to the <u>CFDA</u> number on the Uniform Notice for Funding Opportunity (NOFO). If there is a CFDA number, then this award includes federal funds.

VI. Section C1- Personnel:

- A) If a cost of living increase is anticipated, please reflect the adjusted salary in one line item. In the justification, please state that the salary reflects a cost of living increase and provide the amount/length of time of the initial salary and amount/length of time of the final salary.
- B) If you are budgeting for overtime, please put the overtime amount on the bottom row. In the justification, please state how the overtime amount has been calculated.
- C) Quantity of time will depend on the basis selected.

VII. Section C2 - Fringe:

- A) If additional staff were added to the Personnel tab, please make sure they are also added here. Check the totals to make sure that all additional personnel are included. Fringe should include both the ICJIA and match amounts.
- B) If a personnel's salary is prorated, then the flat rate fringe must also be prorated.
- C) Please enter the percentages for retirement, insurance (include health, dental and life) and workman's comp. If there are other fringe benefits, please enter what the benefit is and the percentage.
- D) Column M has been provided for any flat rate fringe benefits. Please enter the dollar amount in Column M. The narrative should provide sufficient detail that ICJIA understands how the flat rate fringe benefits were calculated.

VIII. Section C3 - Travel:

- A) This page is to be used for all travel costs both daily and out of town. Please put similarly purposed trips together. For example daily mileage reimbursement costs can all be on one line item and daily parking costs on the next line item. Out of town trips should also be listed together. For example, if you will attend two conferences, please put costs associated with the first conference together, and then put costs associated with the second conference together.
- B) Travel expenses can not exceed the State of Illinois rates (or your agency's rate, whichever is lower). Mileage, per diem, and lodging rates can be found here: https://www.illinois.gov/cms/Employees/Travel/Pages/TravelReimbursement.aspx (copy and paste this address into a web browser).

IX. Section C4 - Equipment:

- A) All equipment must be purchased no later than 90 days after the start of the grant, unless otherwise approved by your ICJIA grant monitor.
- B) Equipment must be pro-rated if the piece of equipment will be used for any purpose other than the grant program.
- X. Section C5 Supplies: Please list all supplies/commodities in this section.
- XI. Section C6 Contractual Services: Pro-rated Share Certain contractual costs must be pro-rated to determine how much can be applied to the grant program. For example, telephone costs would be proportional to the number of FTEs on the grant funded program divided by the total number of FTE employees in the office. Utility or rent costs would be proportional to the space occupied by the grant funded program divided by the total space.

XII. Section C16 - Indirect Costs:

- A) If a federally-approved or state-approved indirect cost rate is being included, please provide the letter showing the approved indirect cost rate.
- B) If any indirect cost rate is being included (de minimus, federally approved or state approved), the certification must be signed at the time the grant agreement is signed.
- XIII. Summary: Please make sure the amounts on this page are the same as the amounts on each of the Budget Worksheet and Narrative tabs.
- XIX. Agency Approval: Do not complete this form this will be filled out by ICJIA.