



# State of Nevada

Department of Health and Human Services  
**Division of Child and Family Services**  
Grants Management Unit

## Victims of Crime Act

### **Notice of Funding Opportunity**

State Fiscal Year 2026 Award

Note: This document is available online at: <https://dcfs.nv.gov/Programs/GMU/GMU/>

# Section I: Opportunity Summary

## Opportunity Summary

The Victims of Crime Act (VOCA) Assistance formula grant program assists States and Territories to support programming for nonprofit and public agencies that provide direct services to victims of crime. Examples include but are not limited to: programs to assist the elderly with all types of crime victimization; legal assistance to victims; child advocacy centers; sexual assault victim advocates; data and technology needs that support the delivery of direct services to victims; programs directed to youth, teen, and college age victims; and programs assisting male and female victims of domestic violence and sexual assault.

This NOFO is for competitive applications to be funded through the Victims of Crime Act Federal Fiscal Year 2023 award for State Fiscal Year (SFY) 2026. This NOFO implements a funding process that combines application review with grant allocation and is administered by the Division of Child and Family Services (DCFS) Grants Management Unit (GMU). Funds awarded as a result of this NOFO will begin on July 1, 2025, and expire on June 30, 2026. Unused funds from one year will not be carried forward to the next year. DCFS has determined that VOCA funding will be distributed based on federal priority and victim population need. Funds are awarded on a SFY basis through a NOFO process and are dependent upon availability of funding, compliance with grant requests, and scopes of work (SOW).

### Funding Details Summary:

**Notice:** We are aware of the decline in VOCA funding and are distributing funds in a manner that minimizes any impact on subrecipients' operations and planning. Our approach prioritizes stability and ensures continued support and funding during this adjustment. Please adjust your funding request to meet the current funding amount.

- **Total Available Funding:** \$10,500,000.00
- **Funding Performance Period:** July 1, 2025 through June 30, 2026
- **Funding Considerations:** Under the VOCA Program Guidelines, funding priority is given to programs serving victims of sexual assault, domestic violence, and child abuse. DCFS has determined that previously underserved victims of violent crimes and previously underserved victims of non-violent crimes are to be served under this award.
- **Award Guarantees:** Current subrecipients are not guaranteed funding in SFY 2026, and awards granted through this NOFO do not ensure future funding.
- **Match/Cost Sharing Requirement:** The minimum local match requirement is twenty percent (20%) of the total VOCA project cost. There is no match requirement for subrecipients that are federally recognized American Indian or Alaska Native tribes that operate on tribal lands.
- **There is no guarantee that any application will be approved or receive funding.**

# Funding Guidelines

## OVERVIEW

The VOCA Formula Grant Program, created under the 1984 Victims of Crime Act, provides federal funding nationwide to support victim assistance and compensation programs, to provide training for diverse professionals who work with victims, to develop projects that enhance victims' rights and services and to undertake public education and awareness activities on behalf of crime victims.

VOCA is administered at the federal level through the U.S. Department of Justice (DOJ), Office for Victims of Crime (OVC) which annually awards a grant to each State, the District of Columbia, and U.S. Territories. States have sole discretion in determining which organizations will receive funds and in what amounts, if the recipients meet the requirements of VOCA and the Program Guidelines

<http://ojp.gov/ovc/voca/vaguide.htm/>

The Crime Victims' Fund is the source of funding for these programs. Millions of dollars are deposited into this fund annually from criminal fines, forfeited bail bonds, penalties, and special assessments collected by U.S. Attorneys' Offices, federal U.S. courts, and the Federal Bureau of Prisons. To date, Crime Victims' Fund dollars have always come from offenders convicted of federal crimes, not from taxpayers.

The primary purpose of VOCA is to support the provision of services to victims of crime throughout the nation.

### **Please Note:**

For the purpose of the VOCA Crime Victim Assistance Grant Program, a crime victim is a person who has suffered physical, sexual, financial, or emotional harm as a result of the commission of a crime.

**Funding cannot be used for the investigation of crimes, collection of evidence to further the prosecution of crimes, or for prevention activities.** <sup>1</sup>

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<sup>1</sup> [28 CFR 94.122\(c\)](#)

## VICTIM POPULATIONS TO BE SERVED

The overall purpose of the VOCA legislation is the expansion and development of victim services. Under the VOCA Program Guidelines, funding priority is given to programs serving victims of sexual assault, domestic violence, and child abuse. DCFS has determined that previously underserved victims of violent crimes and previously underserved victims of non-violent crimes are to be served under this award.

Federal guidelines require states to allocate a portion of their VOCA funds to eligible crime victim assistance programs that provide assistance to the following victim populations:

### Federal Priority Victim Populations <sup>2</sup>

- A. **Child Abuse:** These services should include treatment for children who are victims of physical or sexual abuse, and services for their non-offending parents and siblings. Examples of services may include play, individual, and/or group therapy. Services may be provided through mental health or hospital-based programs. Victims of child abuse may include, but are not limited to, child victims of: Physical, sexual, or emotional abuse; child pornography-related offenses; neglect; commercial sexual exploitation; bullying; and/or exposure to violence.
- B. **Sexual Assault:** Services provided should assist victims in dealing with the trauma of sexual assault and its emotional aftermath. Services may include 24-hour crisis hotlines, crisis intervention, emergency services, legal advocacy, clinical evaluation and long- and short-term counseling. Services may be provided to the victim's family and significant others. Services can be designed to serve both male and female victims. These services may be provided to adult survivors of child sexual abuse or incest.
- C. **Domestic Violence:** Domestic violence is a term that covers many types of acts committed by a current or former intimate partner against another, or within a family. Services may include 24-hour crisis hotlines, crisis intervention, emergency services, shelters or safe homes, long- and short-term counseling, information and referral, and legal advocacy in obtaining emergency restraining orders, injunctive or other protective orders.
- D. **Underserved Priority Areas – Underserved Victim Populations:** Victims of both violent and non-violent crimes, including individuals who have endured physical, emotional, financial, or psychological harm. These populations may face significant barriers in accessing essential services, support systems, and legal resources due to factors such as socioeconomic status, geographic isolation, language barriers, or systemic inequities.

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<sup>2</sup> [\(28 CFR 94.104 \(b\)\(c\)\)](#) and [34 U.S.C. 20103\(a\)\(2\)\(B\)](#)

**Collaboration with Victim Service Agencies**<sup>3</sup>: Applicants are requested to be considerate of overlap of community resources. Funding will be distributed across agencies, and it is therefore imperative that agencies limit the categories of funding being requested to work together across agencies in the community. The goal is effective service delivery for victims and survivors and collaboration is required to effectively accomplish this goal. All applicants must demonstrate how they will ensure ongoing collaboration with other victim service agencies in all aspects of service provisions.

**Confidentiality**<sup>4</sup>: Applicants will be required to maintain the confidentiality of any information that would identify persons receiving services and to conduct background checks on all employees, volunteers, and other workforce members that are in direct contact with children or families that are receiving services.

**Funding Period**: Grants will be awarded for a **12-month period: July 1, 2025, through June 30, 2026.**

**Match/Cost Sharing Requirement**<sup>5</sup>: The minimum local match requirement is twenty percent (20%) of the total VOCA project cost. VOCA subrecipients that are Native American tribes/organizations located on reservations are not required to provide match. If an agency is not able to provide match, a match waiver request for a full- or partial-match waiver may be submitted.

**Reporting**: Monthly Financial Status reports will be required by the 15th of each month for the previous month. Quarterly programmatic reports will be required by the 15th of the month for the previous quarter.

## **APPLICANT ELIGIBILITY**

All non-profit and public agencies (including state and local governmental agencies, universities, and community colleges) can apply if interested in providing services and following grant specific requirements (See VOCA REQUIREMENTS for expanded descriptions). **Eligible organizations include victim services organizations that provide *direct services to crime victims*.**

Per the VOCA Final Rule, **the definition of direct services or services to victims of crime** means those services described in 42 U.S.C. 10603(d)(2)<sup>6</sup>, and efforts that:

1. Respond to the emotional and physical needs of crime victims
2. Assist primary and secondary victims of crime to stabilize their lives after a victimization
3. Assist victims to understand and participate in the criminal justice system; and
4. Provide victims of crime with a measure of safety and security.

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<sup>3</sup> [28 CFR 94.109\(b\)\(10\)](#)

<sup>4</sup> [28 C.F.R. 94.115](#)

<sup>5</sup> [28 CFR 94.118](#)

<sup>6</sup> [42 U.S.C. 10603\(d\)\(2\)](#)

Examples of types of organizations that provide direct services include, but are not limited to the following:

- Sexual assault and rape treatment centers
- Domestic violence programs and shelters
- Child abuse programs
- Centers for missing children
- Mental health services; and
- Other community-based victim coalitions and support organizations.

**Activities Supported Will Result In:**

- Enhanced community stakeholder collaborations around proactive planning and resource development to meet the needs of child victims and their supportive caregivers;
- Improved investigations and prosecutions of cases of child abuse and neglect;
- Trauma-informed systems;
- Improved community-wide, coordinated, planned responses to cases of child abuse and neglect.

In addition to victim service organizations whose sole purpose is to serve crime victims, many other public and non-profit organizations have components which offer services to crime victims. These organizations are eligible to receive VOCA funds if the funds are used to expand or enhance the delivery of crime victims' services. These organizations include, but are not limited to, the following:

- **Criminal Justice Agencies** – Law enforcement agencies, prosecutors' offices, courts, corrections departments, and probation and paroling authorities are eligible to receive VOCA funds to help pay for victims' services.
- **Religiously-Affiliated Organizations** – Organizations receiving VOCA funds must ensure that services are offered to all crime victims without regard to religious affiliation and that the receipt of services is not contingent upon participation in a religious activity or event. Faith-based and community organizations will be considered for awards as are other eligible applicants and if they receive assistance awards, will be treated on an equal basis with all other grantees in the administration of such awards. No eligible applicant or grantee will be discriminated against based on its religious character or affiliation, or religious name. Faith-based and community organizations are required to abide by the same regulations and requirements specifically associated with the program under which they are awarded a grant, as any other agency awarded funding.
- **Hospitals and Emergency Medical Facilities** – Organizations must offer crisis counseling, support groups and /or other types of victim services.

- **Others** – State and local public agencies such as mental health service organizations, state or local public child and adult protective services, state grantees, Native American Tribes/Organizations, legal service agencies and programs with a demonstrated history of advocacy on behalf of domestic violence victims, and public housing authorities that have components specifically trained to serve crime victims.

### **Additional Specific Eligibility Requirements**

OVC established eligibility criteria that must be met by all organizations that receive VOCA funds. These funds are to be awarded to applicants only for providing services to victims of crime. Each applicant organization shall meet the requirements as outlined in the section VOCA REQUIREMENTS.

## **EMERGING TRENDS**

Applicants who respond to this NOFO should be aware that emerging trends in approaches to service delivery, community partnerships, collective impact, data tracking and more may result in eventual adjustments to some aspects of programs and/or processes. During the grant period, applicants who receive funding will be asked to collaborate with DCFS and other stakeholders in mapping the future of service delivery to victims of crime. Strategies considered may include, but are not necessarily limited to:

- Identifying and prioritizing service gaps
- Determining strategies to enhance data collection and reporting
- Strengthening and standardizing output and outcome measures
- Ascertaining best practices in client-centered, holistic service delivery
- Evidence-based, Evidence-informed practices
- Building a coordinated network of statewide partnerships
- Offering Culturally competent services to underserved populations; and
- Utilizing technology to improve victims’ access to information and services.

In May of 2013 the U.S. Department of Justice (DOJ) Office of Justice Programs (OJP) Office for Victims of Crime (OVC) published a report entitled “Vision 21 Transforming Victims Services”. The report can be found at [Vision 21: Transforming Victim Services Final Report \(ojp.gov\)](https://www.ojp.gov/ovc/vision21). It provides information on the history of victim services in the United States and details the challenges and innovative practices that have been successful in improving victim services. The report also contains information on the OJP’s website [www.crimesolutions.gov](http://www.crimesolutions.gov) that disseminates evidence-based practice that can be adapted for use by state and local practitioners.

## FUNDING ALLOCATION AND DISTRIBUTION <sup>7</sup>

At least ten percent (10%) of the total VOCA funds will be allocated to each of the Federal priority areas; however, funding will also be distributed to ALL other Victims of Crime. The allocation of funds to Federal priority categories does not prevent DCFS from distributing additional funds to agencies serving other victims of crime.

Priority Victim Populations	Funding Allocations	Approximate Minimum of Awards Statewide
Child Abuse	10% of the award	\$1,050,000.00
Sexual Assault	10% of the award	\$1,050,000.00
Domestic Violence	10% of the award	\$1,050,000.00
Previously Underserved	10% of the award	\$1,050,000.00

DCFS has determined that VOCA funding will be distributed based on population and need. Funding preference will be given to the federal priority victim populations. Applicants should not exceed the award amounts listed in this solicitation and should carefully consider the resources needed to successfully implement the proposed project. DCFS has the discretion to award grants for greater or lesser amounts than requested and to negotiate the scope of work and budget with applicants prior to awarding a grant.

DCFS is obligated to ensure that the ten percent (10%) priority area thresholds will be met. Funding decisions will be made based on application scores and the need to ensure that the ten percent (10%) thresholds are met. A successful application is not a guarantee you will receive all or partial funding for the program; or, if initially funded, that your project will receive continued funding in subsequent grant cycles. DCFS reserves the right to fund or not fund any project based on scoring, available funds, or past grant performance. The below table represents targeted funding allocations by geographic region; however, actual funds awarded may vary slightly based on the receipt of successful applications and identified service and population needs.

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<sup>7</sup> [28 CFR 94.104](#)

## Funding Distribution

Geographic Region	Target Funding Allocations	Approximate Total of Awards
Clark County	69% of the funding amount	\$7,245,000.00
Washoe County	19% of the funding amount	\$1,995,000.00
Balance of the State, Rural, Counties	12% of the funding amount	\$1,260,000.00
<b>Total</b>		<b>\$10,500,000.00</b>

## FUNDING REQUIREMENTS

VOCA Federal funds are awarded to DCFS by the Office of Justice Programs, Office for Victims of Crime authorized by the Victims of Crime Act of 1984 (P.L.98-473, as amended).

Subrecipients receiving VOCA funds must meet the following eligibility requirements:

- A. **Compliance with DCFS grant requirements:** Agencies must adhere to financial and programmatic guidelines; comply with deadlines; and provide all information to DCFS as requested in a timely fashion.
- B. **Compliance with Federal Rule<sup>8</sup>:** Applicants must comply with the applicable provisions of VOCA, the Program Guidelines, and the requirements of the OJP Financial Guide, effective edition <https://ojp.gov/ovc/welcome.html> which includes maintaining programmatic and financial records that fully disclose the amount and disposition of VOCA funds received. This includes financial documentation for disbursements; daily time and attendance records specifying time devoted to allowable VOCA victim services; client files; portion of the project supplied by other sources of revenue; job descriptions; contracts for services; and other records which facilitate an effective audit.
- C. **Unique Entity Identifier for SAM.gov<sup>9</sup>:** The Unique Entity Identifier (UEI) is a 12-character alphanumeric ID assigned to an entity by SAM.gov. Existing registered entities can find their UEI by following the steps found [here](#) or at [https://www.fsd.gov/gsafsd\\_spid=kb\\_article\\_view&sysparm\\_article=KB0041254&sys\\_kb\\_id=875189f21bee8d54937fa64ce54bcbaa&spa=11bee8d54937fa64ce54bcbaa&spa=1](https://www.fsd.gov/gsafsd_spid=kb_article_view&sysparm_article=KB0041254&sys_kb_id=875189f21bee8d54937fa64ce54bcbaa&spa=11bee8d54937fa64ce54bcbaa&spa=1)

\*New entities can get their UEI at <https://sam.gov> and complete and entity registration.\*

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<sup>8</sup> [28 CFR 94.101](#)

<sup>9</sup> [2 CFR Part 25 Subpart C](#)

- D. **Civil Rights Compliance**<sup>10</sup>: All recipients of federal grant funds are required to comply with nondiscrimination requirements contained in various federal laws. If a court or administrative agency makes a finding of discrimination on grounds of race, color, religion, national origin, gender, disability, or age against a recipient of funds after a due process hearing, the recipient must agree to forward a copy of the finding to the Office for Civil Rights of the Department of Justice's Office of Justice Programs. Training resources can be found here: [Civil Rights Office | Training Resources | Office of Justice Programs](#)
- E. **Civil Rights Information**<sup>11</sup>: Maintain statutorily required civil rights statistics on victims served by race, national origin, sex, age, and disability and permit reasonable access to its books, documents, papers, and records to determine whether the subrecipient is complying with applicable civil rights laws. This requirement is waived when providing a service, such as telephone counseling, where soliciting the information may be inappropriate or offensive to the crime victim.
- F. **Client-counselor and research information confidentiality**<sup>12</sup>: Maintain confidentiality of client-counselor information, as required by state and federal law.
- G. **Confidentiality of research information**<sup>13</sup>: Except as otherwise provided by federal law, no recipient of monies under VOCA shall use or reveal any research or statistical information furnished under the program by any person and identifiable to any specific private person for any purpose other than the purpose for which such information was obtained in accordance with VOCA. Such information, and any copy of such information, shall be immune from legal process and shall not, without the consent of the person furnishing such information, be admitted as evidence, or used for any purpose in any action, suit, or other judicial, legislative, or administrative proceeding. See Section 1407(d) of VOCA codified at 42 U.S.C. 10604.

These provisions are intended, among other things, to ensure the confidentiality of information provided by crime victims to counselors working for victim services programs receiving VOCA funds. Whatever the scope of application given this provision, it is clear that there is nothing in VOCA or its legislative history to indicate that Congress intended to override or repeal, in effect, a state's existing law governing the disclosure of information which is supportive of VOCA's fundamental goal of helping crime victims.

For example, this provision would not act to override or repeal, in effect, a state's existing law pertaining to the mandatory reporting of suspected child abuse. This confidentiality provision should not be interpreted to thwart the legitimate informational needs of public

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<sup>10</sup> [42 U.S.C. § 2000d](#)

<sup>11</sup> [28 CFR Part 42](#)

<sup>12</sup> [28 CFR 94.115](#)

<sup>13</sup> [34 U.S.C. § 10231](#)

agencies. For example, this provision does not prohibit a domestic violence shelter from acknowledging, in response to an inquiry by a law enforcement agency conducting a missing person investigation, that the person is safe in the shelter. Similarly, this provision does not prohibit access to a victim service project by a federal or state agency seeking to determine whether federal and state funds are being utilized in accordance with funding agreements.

- H. **Maintain confidentiality**<sup>14</sup>: Eligible agencies must have policies and procedures in place that safeguard the confidentiality of all victim records, contact information, personally identifying information, and other information considered sensitive. These measures must be consistent with applicable Federal, state, and local laws regarding privacy and confidentiality.
- I. **Help victims apply for compensation benefits**<sup>15</sup>: Such assistance may include identifying and notifying crime victims of the availability of compensation, assisting them with the application forms and procedures, obtaining necessary documentation, and/or checking on claim status.
- J. **New programs**<sup>16</sup>: Programs that have not yet demonstrated a record of providing services may be eligible to receive VOCA funding, if it can be demonstrated that twenty-five to fifty percent (25-50%) of the financial support for the agency comes from non-Federal sources. Organizations must have a variety of funding sources in addition to Federal funding to ensure financial stability.
- K. **No charge to victims for VOCA-funded services**<sup>17</sup>: Applicants must provide services to crime victims at no charge through the VOCA-funded project.
- L. **Determination of Suitability to interact with participating minors**<sup>18</sup>: Before allowing any covered individual to interact with participating minors under the award, the program must first make a written determination regarding that individual's suitability. This determination must be based on current and appropriate information and should consider the factors and considerations outlined at <https://www.ojp.gov/funding/explore/interact-minors>. This process ensures that suitability is assessed thoroughly before any interaction occurs.

A sample determination of suitability checklist can be found here: [Sample Suitability Determination Award Condition Subrecipient Monitoring Checklist](#)

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<sup>14</sup> [28 CFR 94.115](#)

<sup>15</sup> [28 CFR 94.113\(d\)](#)

<sup>16</sup> [28 CFR 94.112\(b\)\(2\)](#)

<sup>17</sup> [28 CFR 94.117\(a\)](#)

<sup>18</sup> [2 CFR 200.208](#)

M. **Program match requirements**<sup>19</sup>: The purpose of matching contributions is to increase the number of resources available to the projects supported by grant funds. Matching contributions of twenty percent (20%) (cash or in-kind) of the total cost of each VOCA project (VOCA subaward plus match) are required for each VOCA-funded project and must be derived from non-federal sources, except as provided in the OJP Financial Guide, which can be accessed at <https://ojp.gov/financialguide/DOJ/index.htm>. All funds designated as match are restricted to the same uses as the VOCA funds and must be expended within the grant period.

**Example: (\$100,000.00 total project amount / 80%) x 20% = \$25,000.00 Match.**

For the purposes of this program, in-kind match may include donations of expendable equipment, office supplies, workshop or classroom materials, workspace, or the monetary value of time contributed by professionals and technical personnel and other skilled and unskilled labor, if the services they provide are an integral and necessary part of a funded project. The value placed on donated services must be consistent with the rate of compensation paid for similar work in the subrecipient's organization. If the required skills are not found in the subrecipient's organization, the rate of compensation must be consistent with the labor market. In either case, fringe benefits may be included in the valuation. The value placed on loaned or donated equipment may not exceed its fair market value. The value of donated space may not exceed the fair rental value of comparable space as established by an independent appraisal of comparable space and facilities in privately-owned buildings in the same locality.

N. **Native American Tribes/Organizations Located on Reservations**<sup>20</sup>: The match for new or existing VOCA subrecipients that are Native American tribes/organizations located on reservations is no longer required. For this grant, a Native American tribe/organization is defined as any tribe, band, nation, or other organized group or community, which is recognized as eligible for the special programs and services provided by the U.S. to Native Americans because of their status as Native Americans. A reservation is defined as a tract of land set aside for use of, and occupancy by, Native Americans.

O. **Promote community efforts to aid crime victims**<sup>21</sup>: Promote community-based coordinated public and private efforts to aid crime victims. Coordination may include, but is not limited to, serving on state, federal, local, or Native American task forces, commissions, working groups, coalitions, and/or multi-disciplinary teams. Coordination efforts also include developing written agreements that contribute to better and more comprehensive services to crime victims.

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<sup>19</sup> [28 CFR 94.118](#)

<sup>20</sup> [28 CFR 94.118\(b\)](#)

<sup>21</sup> [28 CFR 94.120\(a\)](#)

- P. **Promote victim safety**<sup>22</sup>: DCFS prohibits activities that compromise victim safety, such as requiring victims to meet with offenders.
- Q. **Public or non-profit organization**<sup>23</sup>: To be eligible to receive VOCA funds, organizations must be operated by a public or private non-profit organization, or a combination of such organizations, and provide services to all types of crime victims.
- R. **Record keeping**<sup>24</sup>: VOCA subrecipients must maintain records that clearly show the source, the amount, and the period during which the match was allocated. The basis for determining the value of personnel services, materials, equipment, and space must be documented. Volunteer services must be documented, and to the extent feasible, supported by the same methods used by the subrecipient for its own paid employees.
- S. **Record of effective services**<sup>25</sup>: Demonstrate a record of providing effective services to crime victims. This includes having the support and approval of its services by the community, and a history of providing direct services in a cost-effective manner and financial support from other sources.
- T. **Services to Limited-English-Proficient (LEP) Persons**<sup>26</sup>: National origin discrimination includes discrimination based on LEP. To ensure compliance with Title VI of the Civil Rights Act and the Omnibus Crime Control and Safe Streets Act, recipients are required to take reasonable steps to ensure that LEP persons have meaningful access to their programs. Meaningful access may entail providing language assistance services, including interpretation and translation services, where necessary. Applicants are encouraged to consider the need for language services for LEP persons served or encountered both in developing their applications and budgets in conducting their programs and activities. Reasonable costs associated with providing meaningful access for LEP individuals are considered allowable program costs.
- U. **Services to victims of federal crimes**<sup>27</sup>: Applicants must provide services to victims of federal crimes on the same basis as victims of state and/or local crimes.

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<sup>22</sup> [28 CFR 90.24](#)

<sup>23</sup> [28 CFR 94.111](#)

<sup>24</sup> [2 CFR 200.302\(b\)\(3\)](#)

<sup>25</sup> [28 CFR 94.105](#)

<sup>26</sup> [28 CFR 42.104](#)

<sup>27</sup> [28 CFR 94.111](#)

- V. **Volunteers**<sup>28</sup>: Subrecipients must utilize volunteers in providing services to victims of all crimes. Additionally, agencies must maintain log sheets to adequately document volunteer hours. Agencies that do not utilize volunteers must obtain a waiver from DCFS.

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<sup>28</sup> [34 U.S.C. § 20103\(b\)\(1\)\(C\)](#) and [28 CFR 94.113](#)

## QUESTION AND ANSWER SESSION

A Question-and-Answer session will begin the first day of the NOFO release and will continue until March 25, 2025. All questions and answers will be posted on the DCFS website at <http://dcfs.nv.gov/Programs/GMU/GMU/> by March 25, 2025. To submit your questions please e-mail to DCFS GMU at [dcfsgrants@dcfs.nv.gov](mailto:dcfsgrants@dcfs.nv.gov). For Programming questions, contact Mikayla Tran at [Mikayla.tran@dcfs.nv.gov](mailto:Mikayla.tran@dcfs.nv.gov).



# Section II: Application Process

## Award Overview Timeline

Event	Date/Time
Grant opportunity announced	March 14, 2025
Questions and Answers posted to DCFS GMU webpage	March 25, 2025
Deadline for submission	April 15, 2025, 5 PM PST
Evaluation period (approximate time frame)	April to May 2025
Announcement of awards	June 2025
Performance Period	July 1, 2025, through June 30, 2026

## Application Review

The reviewers will review and evaluate each application, see Appendix C: Scoring Matrix. The evaluation of applications received in response to this NOFO will be conducted in a comprehensive, fair, and impartial manner. Reviewers will use structural, quantitative scoring techniques to maximize the objectivity of the evaluation. The review process will consist of a technical review of the applicant's information, including the project and the budget (justification, cost effectiveness, project sustainability). By applying, you agree to adhere to the special conditions GMU has identified.

## Evaluation Process

Applications received by the published deadline of **5:00 pm on April 15, 2025**, will be processed as follows:

### STEP 1: Technical Review

DCFS staff will perform a technical review of each application to ensure that minimum standards are met.

- Applications **may** be disqualified if they are missing fundamental elements (i.e., unanswered questions, required attachments).

### STEP 2: Application Review Panel

- A. Each application will be evaluated for content and scored by the reviewers and final recommendations will be approved by GMU.

- B. As part of the review process, GMU staff will identify strengths and weaknesses, and may recommend, as a condition of funding the project, that:
- Specific revisions are made to the budget or Scope of Work, or
  - Special conditions are placed on the award (e.g., certain fiscal controls, more stringent performance requirements, or more frequent reviews).
- C. The review panel will identify specific line-item areas for revision if funding limitations result in a reduction of an overall proposed budget. In the event budget reductions are necessary, an equitable formula based on application ranking and scores will be developed and applied in an impartial manner.
- D. The reviewers will submit review panel recommendations to the Administrator of DCFS or designee for final approval.

### **STEP 3: Final Decisions**

Final funding decisions will be made by the DCFS Administrator or designee based on the following factors:

- Review panel scores;
- Geographic distribution of the proposed grant awards;
- Conflicts or redundancy with other funded programs, or potential for supplanting existing funds.

**Funding decisions made by the DCFS Administrator or designee are final.**

## **Notification and Awarding Process**

Successful applicants will be notified of their application status through a Letter of Intent (LOI) after funding decisions have been made by June 2025.

GMU staff will conduct negotiations with applicants regarding the recommendation for funding to address any specific issues identified during application review. All related issues must be resolved before a grant will be awarded. These issues may include, but are not limited to:

- Revisions to the project budget;
- Revisions to the Scope of Work; and/or
- Enactment of Special Conditions (e.g., fiscal controls, performance requirements or frequency of reviews).

Upon successful conclusion of negotiations, GMU staff will complete a written grant agreement in the form of a Notice of Subaward (NOSA). The NOSA documents and Grant Instructions and Requirements (GIRs) will be distributed to the subrecipient upon approval of the subaward, see Appendix D: Notice of Subaward.

## **Post Award Requirements**

## A. Monthly Financial Status and Request for Reimbursement Reports Filing

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DCFS requires the use of a standardized Excel spreadsheet workbook reimbursement request form that self-populates certain financial information. This form must be used for all reimbursement requests. Monthly reports are required even if no reimbursement is requested for a month. The monthly reports are due on the 15th of the month for the previous month. GMU staff will provide instructions and technical assistance upon the grant award. **Note: A signed GIRs is required before Request for Funds can be approved.**

Failure to submit timely quarterly report will result in the withholding of requests for reimbursement.

Per Code of Federal Regulations [2 C.F.R. § 200.430](#), charges made to Federal awards for salaries, wages, and fringe benefits must be based on records that accurately reflect the work performed and comply with the established policies and practices of the organization.

- Charges must be supported by a system of internal controls that provides reasonable assurance that the charges are accurate, allowable and properly allocated.
- Documentation for charges must be incorporated into the official records of the organization.
- Support must reasonably reflect the total activity for which the employee is compensated by the organization and cover both federally funded and all other activities. The records may include the use of subsidiary records as defined in the organization's written policies.
- Where grant recipients work on multiple grant programs or cost activities, documentation must support a reasonable allocation or distribution of costs among specific activities or cost objectives.
- Examples of items that may support salaries and wages include timesheets, time and effort reports, or activity reports that have been certified by the employee and approved by a supervisor with firsthand knowledge of the work performed. Payroll records will need to reflect either after the fact distribution of actual activities or certifications of employee's actual work performed.

Note: Time and effort reports must reflect actual hours worked. **Budgeted time and effort reports will be rejected.**

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<sup>29</sup> [2 CFR 200.328](#)

## B. Subrecipient Monitoring <sup>30</sup>

Successful applicants must participate in subrecipient monitoring. Subrecipient monitoring is intended to provide ongoing technical support to subrecipients and to gather information reportable by DCFS to federal or state agencies. To facilitate the review process, materials referred to in the review documents should be gathered prior to the review. The subrecipient’s primary contact person and appropriate staff should make themselves available to answer questions and assist the reviewer(s) throughout the process. For non-governmental agencies, at least one board member must also be available during the exit discussion. The subrecipient monitoring reports or action items to be addressed will be sent to the agency within 30 working days following the conclusion of the subrecipient monitoring.

## C. Quarterly Performance Reports <sup>31</sup>

Subrecipients who receive an award must complete performance reports on a quarterly basis and submit them as instructed by DCFS. The quarterly reports will be due by the 15th of the month following the end of the reporting quarter, please see the chart below. Successful applicants will report on their progress towards meeting their scope of work commitments and DCFS will provide a data reporting link for subrecipients to document their performance measures. Subrecipients will be required to provide source documentation that corresponds to the data reported.

Reporting Period	Type of Data Required	Due Date
July 1 – September 30	Program Performance Measures	October 15
October 1 – December 31	Program Performance Measures	January 15
January 1 – March 31	Program Performance Measures	April 15
April 1 – June 30	Program Performance Measures	July 15

Failure to submit timely quarterly report will result in the withholding of requests for reimbursement.

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<sup>30</sup> [2 CFR 200.332](#)

<sup>31</sup> [2 CFR 200.332](#)

## **D. Mandatory Training** <sup>32</sup>

Subrecipients who are awarded must complete the Department of Justice Grants Financial Management training at <https://onlinegfmt.training.ojp.gov/> every three years. Proof of completion of this training will be submitted to the GMU staff within 90 days after receiving notification of award.

Additionally, the GMU staff may hold mandatory trainings or webinars that all agencies receiving funding may be required to attend. The GMU staff will make every effort to offer any training sessions or webinars at least twice to make it easier for agencies to attend. Training topics will be determined based on GMU observation of common questions/concerns, new Federal or State regulations/guidance, and/or requests from agencies receiving the funding.

## **E. Compliance with Changes to Federal and State Laws** <sup>33</sup>

As Federal and State laws change and affect either the DCFS GMU process or the requirements of subrecipients, successful applicants will be required to respond to and adhere to all new regulations and requirements.

## **F. Nevada 2-1-1** <sup>34</sup>

Per the Grant Instructions and Requirement, all successful applicants will be required to add or update their agency's profile on Nevada's 2-1-1 website located at [www.nevada211.org](http://www.nevada211.org) within sixty (60) days after receiving notification of award and provide verification of enrollment. Nevada 2-1-1 is a statewide resource for individuals looking for assistance, services, and programs.

## **G. Nevada Confidential Address Program**

All applicants are strongly encouraged to post the Nevada Confidential Address Program poster for victims to reference. The Nevada Confidential Address Program (CAP) is a program that helps victims of domestic violence, sexual assault, human trafficking and/or stalking from being located by the perpetrator through public records. The program provides a fictitious address and confidential mail forwarding services to individuals and families across Nevada.

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<sup>32</sup> [2 CFR 200.332\(b\)\(3\)](#)

<sup>33</sup> [2 CFR 200.300\(a\)](#)

<sup>34</sup> [Grant Instructions and Requirements](#)

## H. DCFS Grievance Process

All successful applicants are strongly encouraged to **adhere to the DCFS Grievance Process** to ensure that domestic and sexual violence survivors have equitable access to services and a clear pathway to address concerns. Agencies must implement and follow the grievance resolution steps outlined by DCFS, which include:

1. **Direct Communication:** Clients must first attempt to resolve their issue by speaking with a staff member or program director.
2. **Escalation to Executive Leadership:** If unresolved, the concern must be escalated to the program's Executive Director for further review.
3. **Board of Directors Review:** If the issue remains unresolved, the client may submit a formal complaint to the program agency's Board of Directors.
4. **DCFS Grievance Submission:** Clients who have exhausted the agency's grievance process or feel they cannot raise concerns directly with shelter staff for any reason, including fear of retaliation, may submit a grievance directly to **DCFS**. DCFS will provide instructions on how to submit complaints through its **internal grievance system** and ensure that all clients have access to this option.

All funded agencies must maintain **transparency and compliance** in handling grievances and ensure that clients are aware of their rights to address concerns. Failure to handle grievance process may impact current and future funding eligibility.

## I. Client Satisfaction Surveys <sup>35</sup>

All successful applicants must participate in **client satisfaction surveys** as part of ongoing efforts to enhance service delivery and funding opportunities. Through client satisfaction surveys, DCFS and funded agencies will gain valuable insights into client experiences, helping identify **service gaps, strengthen programs, and support future funding opportunities**.

Surveys must be **completely anonymous**, ensuring that clients can provide honest feedback without concern. Surveys must include **core questions** that are required for all clients to answer, as well as **optional questions** that clients may choose to respond to. Agencies must make the survey **easily accessible**.

Participation in these client satisfaction surveys gives an opportunity for agencies to showcase their impact, enhance their services, assist DCFS with identifying Technical Assistance opportunities, and strengthen funding requests. By collecting **meaningful client feedback**, agencies will be able to **demonstrate success, drive program improvements, and advocate for increased funding** to continue supporting victims of domestic and sexual violence. **Participation helps shape the future of services for survivors!**

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<sup>35</sup> [2 CFR 200.425\(c\)\(3\)](#)

## **iMPRoVE Platform**

Beginning in SFY 2026, agencies who receive funding for Victim Services from DCFS will be asked to utilize iMPRoVe (Measure for Providers Responding to Victimization Experiences) if possible. A robust system that is designed to standardize and enhance the collection of client feedback. This platform will ensure consistency, flexibility, and confidentiality, helping agencies gather meaningful insights into client satisfaction and service delivery while meeting DCFS GMU requirements.

- Account Setup
  - Agencies are required to create an account on the iMPRoVe platform and familiarize themselves with the functionality outlined in the iMPRoVe User Guide ([User Guide Link](#)).
- Survey Requirements
  - Subrecipients must establish a Victim Services survey under the “Supportive or Community Advocacy Services” module, which includes 14 required core questions.
  - DCFS will provide additional required optional questions, and agencies may incorporate any further optional items they find relevant.
- Usage and Reporting
  - iMPRoVe ensures data consistency and confidentiality, streamlining the reporting process for both the agency and DCFS.
  - Agencies are responsible for maintaining up-to-date survey configurations and regularly reviewing feedback data to inform service improvements.

This suggestion applies beginning in SFY 2026, and compliance will be monitored through ongoing technical support, periodic reviews, and subrecipient monitoring. Additional resources and guidance on iMPRoVe will be made available to assist agencies with successful adoption.

### **Survey Administration Options:**

Agencies are suggested to have multiple methods to administer surveys, offering flexibility and accessibility to clients.

### **Confidentiality and Anonymity:**

- Surveys conducted through iMPRoVe will be fully confidential, with no identifying client information collected.
- The platform is designed to safeguard client privacy, ensuring all data is securely managed.

### **Goals and Benefits of iMPRoVe**

- **Enhanced Data Collection:** By integrating iMPRoVe, agencies will have access to a standardized yet flexible method for collecting actionable client feedback.

- **Data-Driven Improvements:** Aggregated survey data will provide insights to help agencies and DCFS GMU enhance service quality and effectiveness.
- **Transparency and Compliance:** The inclusion of required questions ensures agencies adhere to reporting standards and funding requirements, while also fostering greater transparency in service outcomes.

## J. National Shelter Standards <sup>36</sup>

All successful applicants are required to **adhere to national shelter standards and best practices** to ensure the highest quality of care and support for survivors of domestic and sexual violence. **DCFS will provide these standards and guidelines to applicants upon award** to help agencies align their services with recognized best practices in shelter operations, client care, and program management. By following these standards, agencies will:

- **Enhance safety and security** for clients and staff.
- **Ensure consistency in service delivery** across all funded shelters.
- **Implement trauma-informed and survivor-centered approaches** to care.
- **Maintain compliance with federal and state funding requirements.**

DCFS will offer guidance and technical assistance to help agencies **integrate these best practices into their operations** and maintain compliance with national standards.

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<sup>36</sup> [2 CFR 200.332\(e\)](#)

## K. Programmatic<sup>37</sup> and Financial<sup>38</sup> Standards

All successful applicants must adhere to the **Grant Instructions and Requirements (GIRS)** and follow best practices in **financial management, program oversight, and reporting** to ensure the **effective and compliant use of funding**. Agencies are expected to:

- **Maintain financial integrity** by ensuring all expenditures align with the approved budget.
- **Submit accurate and timely Requests for Reimbursement (RFRs)** with minimal discrepancies, ensuring that all requested reimbursements are for **allowable and budgeted costs**.
- **Ensure programmatic compliance** by actively cooperating with DCFS in all aspects of grant oversight, including:
  - **Grievance resolution** – Responding promptly and appropriately to client grievances.
  - **Information requests** – Providing requested data and documentation in a timely manner.
  - **Adherence to SOP/SOW** – Operating in accordance with their **Standard Operating Procedures (SOPs)** and **Scope of Work (SOW)** as outlined in their grant application.
  - **Participation in subrecipient monitoring** – Engaging in ongoing technical support and compliance reviews conducted by DCFS.
  - **Quarterly reporting** – Submitting program performance reports through an online reporting form as required. Submitted reports must only contain data specifically for this funding opportunity, data that is duplicated from other funding sources are not to be included.
    - Failure to submit timely quarterly report will result in the withholding of requests for reimbursement.

Failure to comply with **programmatic standards** may impact current and future funding eligibility. Agencies that do not demonstrate **fiscal responsibility, cooperation, and adherence to program requirements** risk funding adjustments (up to funding rescission), additional conditions, or ineligibility for future awards.

DCFS will provide **ongoing guidance and technical assistance** to help agencies meet these standards and support long-term program success.

## Questions?

Contact the DCFS GMU at [dcfsgrants@dcfs.nv.gov](mailto:dcfsgrants@dcfs.nv.gov)

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<sup>37</sup> [2 CFR 200.303](#)

<sup>38</sup> [2 CFR 200.302](#)

# Section III: Application Instructions

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## Application Instructions

An application packet, which includes this application and the required data sources, is available for download at <https://dcfs.nv.gov/Programs/GMU/GMU/>.

Late and/or incomplete applications will not be scored or considered for funding. The total possible score for the entire application is 175 points.

All pages including attachments must list the applicant's name on the bottom of the page.

## Application Checklist

- Complete the Application Checklist prior to scanning/submitting the application to DCFS.
- The Application Checklist is for the benefit of the applicants and is not required to be included in the Submission Packet.

## Section A – Application Form (5 Points) Must be Completed

- Complete the Application Form
- Sign the form.

## Section B – Proposal Narrative (120 Points)

- The application narrative should be formatted in Arial 11-point font on single-spaced pages with one-inch margins. See Application Form Section B: Proposal Narrative for form.
- **Note:** Responses must specifically be tailored to this funding opportunity. If your organization is applying for other victim services funding, applicants should provide original content and avoid duplicating verbiage from other applications.
- **Complete Section B: Proposal Narrative**

Overview	
Maximum Possible Points	Instructions
<b>10</b>	1) Introduce the applicant organization, mission statement and its role in providing services, including any subcontractor(s) as necessary. <ul style="list-style-type: none"> <li>• Outline your service area.</li> <li>• Describe the number of years that your organization has served victims in your area.</li> <li>• Outline your service numbers for victim services for the past 2 years.</li> </ul>

Statement of Need and Target Population	
Maximum Possible Points	Instructions
<b>15</b>	1) How does your organization assess or identify the need for Victim Services in your area? Are you using assessments, surveys, policies, or community data? 2) Establish the degree of need of Child Abuse, Sexual Assault, Domestic Violence, or Previously Underserved services within your geographic area. <ul style="list-style-type: none"> <li>• If applying for multiple, please identify the degree of need for each population separately.</li> </ul> 3) Describe the target population and the geographic area served by your project/program (including demographic characteristics, risk factors, geographic location, statistics, etc.)

Services Proposed	
Maximum Possible Points	Instructions
<b>40</b>	<p>The foundation of the proposed project(s) should be constructed of evidence supported project justification, empirically supported methods, appropriate staffing, a flexible design, and a clear strategy.</p> <ol style="list-style-type: none"> <li>1) Give a brief summary of the proposed project and its purpose.</li> <li>2) Identify what services will be provided <b>for this funding opportunity</b> and how clients are referred to your agency.</li> <li>3) Describe your agency’s approach to direct service delivery and how it meets the needs of the client <b>for this funding opportunity</b>.</li> <li>4) If you are already providing the proposed services in the proposed community / communities, indicate whether there is a waiting list for the proposed services and provide the average length of wait and the number of prospective clients on the list.</li> <li>5) If you are a recipient of multiple victim services grants through DCFS GMU, please explain how your agency guarantees the time and effort towards this funding opportunity? How does your agency ensure the separation of activities and service numbers across different funding sources? Please describe the methods or systems you use to track and report services accurately while preventing duplication or overlap between funding sources. Is it outlined in your budget? Will it be outlined in your activity-based timesheets? <b>Note:</b> Your response must match your budget.</li> <li>6) Describe how training for staff will be conducted to ensure effective service delivery.</li> </ol>

Evidence-Based Programs/Practices	
Maximum Possible Points	Instructions
0	<ol style="list-style-type: none"> <li>1) Evidence-Based Programs/Practices (EBPs) are required and strongly encouraged by OJP whenever possible. Agencies will not lose points for not having EBPs. If your agency provides EBP services, provide the following: <ul style="list-style-type: none"> <li>• Proof of implementation in Section B.</li> <li>• Be based on a logic model</li> <li>• Have a written manual or protocol</li> <li>• Be generally accepted</li> <li>• Shown to do no harm</li> </ul> </li> <li>2) Demonstrate a commitment to ongoing evaluation and the establishment of a process for continuous quality improvement</li> <li>3) Provide information on evidence-based curriculum that is being used.</li> <li>4) Include the name of the curriculum and the level of priority for the curriculum (well supported, supported, promising programs and practices, emerging and evidence informed programs and practices, etc.)</li> </ol>

Availability and Accessibility of Services	
Maximum Possible Points	Instructions
20	<ol style="list-style-type: none"> <li>1) Explain how your agency will ensure that services are accessible to all populations, how the needs of your clients will be assessed, and how services will be individualized <b>for this funding opportunity</b>.</li> <li>2) Detail the availability of services within the organization's geographic area.</li> <li>3) Identify and list other organizations providing similar services and describe why duplication of services is warranted.</li> <li>4) Describe resources or planning that support sustainability, including diverse funding resources, staff commitments, and longevity of the organization.</li> </ol>

Goals, Objectives and Timelines	
Maximum Possible Points	Instructions
<b>15</b>	<ol style="list-style-type: none"> <li>1) Describe the organization’s goals and objectives <b>for SFY 2026</b> to meet the geographic area’s needs.</li> <li>2) Provide the projected number of services that will be provided, in clients served and services provided with these grant funds. Note that these projections must match the Scope of Work and Budget Narrative and must only be <b>for this funding opportunity</b>.</li> <li>3) If your agency is requesting funding for more than one priority category (Child Abuse, Sexual Assault, Domestic Violence, and/or Previously Underserved). Please list the projected number of services for each category separately, that will be provided, in clients served and services provided with these grant funds. <ul style="list-style-type: none"> <li>• Number of trainings/activities with the anticipated number of participants/activities/trainings that will be provided with these grant funds. Include anticipated dates for completion.</li> <li>• <b>These projections must match the Scope of Work and Budget Narrative.</b></li> </ul> </li> <li>4) Complete SOW as detailed in Appendix B: Descriptions of Services, Scope of Work and Deliverables. <b>If you are requesting funding for multiple priority categories, each category must have its own set of goals, objectives, and activities.</b></li> </ol>

Methods of Accomplishment	
Maximum Possible Points	Instructions
<b>10</b>	<ol style="list-style-type: none"> <li>1) Describe the plan to achieve the outlined goals and objectives. Include how, who, where, and when these goals and objectives will be achieved <b>for this funding opportunity</b>.</li> <li>2) How does your organization measure success? What measurements will be used to report on the proposed project’s success. (Evaluation tools, survey results, assessments, needs assessments, strategic plans, data collection results and methods, etc.)</li> <li>3) Note: Grantees will be required to track activities and evaluations to the VOCA Program contact.</li> </ol>

Community Coordination/Collaboration	
Maximum Possible Points	Instructions
10	<ol style="list-style-type: none"> <li>1) Provide a brief description of your collaboration and collaborative efforts with other victim service providers and other community services.</li> <li>2) If you do not currently collaborate with other victim service providers, please identify which ones, and explain why not.</li> </ol>

## Section C – Services Quality Narrative (15 Points)

- Services Quality Narrative should not exceed 3 pages.
- If the applicant provides direct services, you must respond with the questions in the **Direct Service Quality Narrative** section. If the applicant provides shelter services, you must respond with the questions in the **Shelter Quality Narrative** section. If the applicant provides both Direct Services and Shelter Services, the applicant must respond to both the questions in the **Direct Service Quality Narrative** section and the **Shelter Quality Narrative** section.
- This section should detail activities in regard to direct services and/or shelter quality as it relates to **this funding opportunity**.
  - **If your organization does not offer shelter services**, outline why you don't offer shelter services. If you contract out shelter services to another organization, please respond to the question below using that organization's information.

Direct Services Quality Narrative
Instructions
<ol style="list-style-type: none"> <li>1) Please provide a description of your direct services (e.g., counseling, advocacy, case management), including service locations, populations served, and any relevant information about your approach.</li> <li>2) Describe how your organization maintains the quality of direct services.</li> <li>3) Identify and detail the steps that your organization takes to handle complaints.</li> <li>4) Identify and detail how your organization ensures client satisfaction on services provided.</li> <li>5) Identify, outline, and detail the minimum standards that the organization adheres to, including how services are provided, the procedures followed, and any relevant protocols.</li> </ol>

## Shelter Quality Narrative

### Instructions

- 1) Please provide a description of your shelter and shelter services (shelter size, shelter capacity, shelter location (indicate the city or town, regions served and confidentiality), security measures, genders served, and any relevant information your organization would like to share).
- 2) Identify and list the amenities your organization offers in your shelter.
- 3) Describe how your organization maintains the shelters' quality.
- 4) Identify and detail the steps that your organization takes to handle complaints.
- 5) Identify and detail how your organization ensures resident satisfaction.
- 6) Identify, outline, and detail the minimum standards that the organization adheres to for the shelter. Cite sources for where standards were adapted from and include an attachment of the organization's shelter standards.

### Scoring Rubric

Score	Criteria	Details
<b>5</b>	Lacks detail or clear processes	<ul style="list-style-type: none"> <li>• Narrative is vague or incomplete.</li> <li>• No clear explanation of how quality is maintained.</li> <li>• Little or no mention of steps to address complaints.</li> </ul>
<b>10</b>	Adequate but not comprehensive	<ul style="list-style-type: none"> <li>• Narrative provides some detail but lacks depth.</li> <li>• Quality assurance steps are mentioned but not thoroughly explained.</li> <li>• Complaint process described minimally.</li> </ul>
<b>15</b>	Detailed, well-structured, and demonstrates proactive quality assurance	<ul style="list-style-type: none"> <li>• Comprehensive and clear narrative.</li> <li>• Specific steps for maintaining high-quality services or shelter conditions are outlined.</li> <li>• Detailed process for addressing complaints.</li> <li>• Proactive measures, such as staff training and regular quality reviews, are included.</li> </ul>

### Section D – Scope of Work (15 Points)

- Complete the Scope of Work (SOW), which is part of the Application form.
- See instructions on completing the SOW Table in Appendix C

## Section E – Budget (20 Points)

Use Arial 11-point font on single-spaced pages with one-inch margins.

See Appendix A: Budget Narrative Instructions

Proposed Project Budget	
Maximum Possible Points	Instructions
<b>5</b>	<ul style="list-style-type: none"> <li>Use the provided table and designate a whole dollar amount for the (7) seven budget categories; or use a zero (0) to indicate that no funds are being requested.</li> <li>Add these numbers to get the sum of the total amount of funding requested for a one-year project period.</li> </ul>

Budget Narrative	
Maximum Possible Points	Instructions
<b>15</b>	<ul style="list-style-type: none"> <li>Include a detailed description of the project budget for the grant funding requested.</li> <li>The budget should be an accurate representation of the funds necessary to carry out the proposed Scope of Work and achieve the projected outcomes.</li> <li>The Budget Narrative should align with the Narrative’s Goals, Objectives and Outcomes to be achieved.</li> </ul>

## Overview of Grant Conditions and Assurances

### General Conditions

- Nothing contained in this Agreement is intended to, or shall be construed in any manner, as creating or establishing the relationship of employer/employee between the parties. The Recipient shall at all times remain an “independent contractor” with respect to the services to be performed under this Agreement. The Department of Health and Human Services (hereafter referred to as “Department”) shall be exempt from payment of all Unemployment Compensation, FICA, retirement, life and/or medical insurance and Workers’ Compensation Insurance as the Recipient is an independent entity.
- The Recipient shall hold harmless, defend and indemnify the Department from any and all claims, actions, suits, charges and judgments whatsoever that arise out of the Recipient’s performance or nonperformance of the services or subject matter called for in this Agreement.

3. The Department or Recipient may amend this Agreement at any time provided that such amendments make specific reference to this Agreement, and are executed in writing, and signed by a duly authorized representative of both organizations. Such amendments shall not invalidate this Agreement, nor relieve or release the Department or Recipient from its obligations under this Agreement.
  - a. The Department may, in its discretion, amend this Agreement to conform with federal, state or local governmental guidelines, policies and available funding amounts, or for other reasons. If such amendments result in a change in the funding, the scope of services, or schedule of the activities to be undertaken as part of this Agreement, such modifications will be incorporated only by written amendment signed by both the Department and Recipient.
4. Either party may terminate this Agreement at any time by giving written notice to the other party of such termination and specifying the effective date thereof at least 30 days before the effective date of such termination. Partial terminations of the Scope of Work in Section B may only be undertaken with the prior approval of the Department. In the event of any termination for convenience, all finished or unfinished documents, data, studies, surveys, reports, or other materials prepared by the Recipient under this Agreement shall, at the option of the Department, become the property of the Department, and the Recipient shall be entitled to receive just and equitable compensation for any satisfactory work completed on such documents or materials prior to the termination.
  - a. The Department may also suspend or terminate this Agreement, in whole or in part, if the Recipient materially fails to comply with any term of this Agreement, or with any of the rules, regulations or provisions referred to herein; and the Department may declare the Recipient ineligible for any further participation in the Department's grant agreements, in addition to other remedies as provided by law. In the event there is probable cause to believe the Recipient is in noncompliance with any applicable rules or regulations, the Department may withhold funding.

## **Grant Assurances**

A signature on the cover page of this packet indicates that the applicant is capable of and agrees to meet the following requirements, and that all information contained in this proposal is true and correct.

1. Adopt and maintain a system of internal controls which results in the fiscal integrity and stability of the organization, including the use of Generally Accepted Accounting Principles (GAAP).
2. Compliance with state insurance requirements for general, professional, and automobile liability; workers' compensation and employer's liability; and, if advance funds are required, commercial crime insurance.
3. These grant funds will not be used to supplant existing financial support for current programs.

4. No portion of these grant funds will be subcontracted without prior written approval unless expressly identified in the grant agreement.
5. Compliance with the requirements of the Civil Rights Act of 1964, as amended, and the Rehabilitation Act of 1973, P.L. 93-112, as amended, and any relevant program-specific regulations, and shall not discriminate against any recipient or employee because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions).
6. Compliance with the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted there under contained in 28 CFR part 35.
7. Compliance with the Clean Air Act (42 U.S.C. 7401–7671q.) and the Federal Water Pollution Control Act (33 U.S.C. 1251–1387), as amended—Contracts and subgrants of amounts in excess of \$150,000.00 must contain a provision that requires the non-Federal awardee to agree to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act (42 U.S.C. 7401–7671q) and the Federal Water Pollution Control Act as amended (33 U.S.C. 1251–1387). Violations must be reported to the Federal awarding agency and the Regional Office of the Environmental Protection Agency (EPA).
8. Compliance with Title 2 of the Code of Federal Regulations (CFR) and any guidance in effect from the Office of Management and Budget (OMB) related (but not limited to) audit requirements for subrecipients that expend \$750,000.00 or more in Federal awards during the subrecipient’s fiscal year must have an annual audit prepared by an independent auditor in accordance with the terms and requirements of the appropriate circular.
9. Certification that neither the Recipient nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency. This certification is made pursuant to regulations implementing Executive Order 12549, Debarment and Suspension, 28 C.F.R. pt. 67 § 67.510, as published as pt. VII of May 26, 1988, Federal Register (pp. 19150-19211).
10. No funding associated with this grant will be used for lobbying.
11. Disclosure of any existing or potential conflicts of interest relative to the performance of services resulting from this grant award.
12. Provision of a work environment in which the use of tobacco products, alcohol, and illegal drugs will not be allowed.
13. An organization receiving grant funds through the Nevada Department of Health and Human Services shall not use grant funds for any activity related to the following:
  - a. Any attempt to influence the outcome of any federal, state or local election, referendum,

initiative or similar procedure, through in-kind or cash contributions, endorsements, publicity or a similar activity.

- b. Establishing, administering, contributing to or paying the expenses of a political party, campaign, political action committee or other organization established for the purpose of influencing the outcome of an election, referendum, initiative or similar procedure.
- c. Any attempt to influence:
  - i. The introduction or formulation of federal, state or local legislation; or
  - ii. The enactment or modification of any pending federal, state or local legislation, through communication with any member or employee of Congress, the Nevada Legislature or a local governmental entity responsible for enacting local legislation, including, without limitation, efforts to influence State or local officials to engage in a similar lobbying activity, or through communication with any governmental official or employee in connection with a decision to sign or veto enrolled legislation.
- d. Any attempt to influence the introduction, formulation, modification or enactment of a federal, state or local rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity through communication with any officer or employee of the United States Government, the State of Nevada or a local governmental entity, including, without limitation, efforts to influence state or local officials to engage in a similar lobbying activity.
- e. Any attempt to influence:
  - i. The introduction or formulation of federal, state or local legislation;
  - ii. The enactment or modification of any pending federal, state or local legislation; or
  - iii. The introduction, formulation, modification or enactment of a federal, state or local rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity, by preparing, distributing or using publicity or propaganda, or by urging members of the general public or any segment thereof to contribute to or participate in any mass demonstration, march, rally, fundraising drive, lobbying campaign or letter writing or telephone campaign.
- f. Legislative liaison activities, including, without limitation, attendance at legislative sessions or committee hearings, gathering information regarding legislation and analyzing the effect of legislation, when such activities are carried on in support of or in knowing preparation for an effort to engage in an activity prohibited pursuant to subsections 1 to 5, inclusive.
- g. Executive branch liaison activities, including, without limitation, attendance at hearings, gathering information regarding a rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity and analyzing the effect of the rule, regulation, executive order, program, policy or position, when such activities are carried on in support of or in knowing

preparation for an effort to engage in an activity prohibited pursuant to subsections 1 to 5, inclusive.

14. An organization receiving grant funds through the Nevada Department of Health and Human Services may, to the extent and in the manner authorized in its grant, use grant funds for any activity directly related to educating persons in a nonpartisan manner by providing factual information in a manner that is:
  - a. Made in a speech, article, publication, or other material that is distributed and made available to the public, or through radio, television, cable television or other medium of mass communication; and
  - b. Not specifically directed at:
    - i. Any member or employee of Congress, the Nevada Legislature or a local governmental entity responsible for enacting local legislation;
    - ii. Any governmental official or employee who is or could be involved in a decision to sign or veto enrolled legislation; or
    - iii. Any officer or employee of the United States Government, the State of Nevada or a local governmental entity who is involved in introducing, formulating, modifying or enacting a Federal, State or local rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity.

This provision does not prohibit a recipient or an applicant for a grant from providing information that is directly related to the grant or the application for the grant to the granting agency.

To comply with reporting requirements of the Federal Funding and Accountability Transparency Act (FFATA), the subrecipient agrees to provide the Department with copies of all contracts, subgrants, and or amendments to either such documents, which are funded by funds allotted in this agreement.

**Compliance with this section is acknowledged by signing the subaward cover page of this packet.**

## Annual Agency Self-Assessment

Complete and submit your organization's annual self-assessment questionnaire for the upcoming fiscal year. **If your organization has already completed the self-assessment for the funding opportunity's fiscal year, you do not need to submit it again.** If any significant changes occur within your organization, an updated assessment will be required

## Submission Instructions

- **The grant application deadline is 5:00 pm on Tuesday, April 15, 2024.**
- Signed application must be submitted online by emailing all required documents and attachments in a single email to [dcfsgrants@dcfs.nv.gov](mailto:dcfsgrants@dcfs.nv.gov). In the subject line of the email place the NOFO title, “VOCA Program NOFO Response from [name of applicant].”
  1. If a single email is too large to be accepted for transmittal or delivery by an email system used in the transmittal, more than one email may be sent by indicating in the email subject line that the application has been emailed in parts (e.g., “Part 1 of 3”).
- Once the application is submitted, no corrections or adjustments may be made prior to the negotiation period.
- The GMU will reply to emails to acknowledge the receipt of applications. If an email is not received within 3 business days of submitting the application, please contact **Mikayla Tran** at [mikayla.tran@dcfs.nv.gov](mailto:mikayla.tran@dcfs.nv.gov).
- Submitting a paper copy of the application is **not required**. However, applicants without access to email may send their completed applications by mail, with a postmark date of April 15, 2025, to:

Division of Child and Family Services  
 Grants Management Unit  
 ATTN: **Mikayla Tran**  
 4126 Technology Way, Suite 300  
 Carson City, NV 89706

## Contact Information

Contact Name	Email	Web Address / Phone Number
DCFS GMU	<a href="mailto:dcfsgrants@dcfs.nv.gov">dcfsgrants@dcfs.nv.gov</a>	<a href="https://dcfs.nv.gov/Programs/GMU/GMU/">https://dcfs.nv.gov/Programs/GMU/GMU/</a>
Mikayla Tran	<a href="mailto:mikayla.tran@dcfs.nv.gov">mikayla.tran@dcfs.nv.gov</a>	(775) 684-4427

# Application Checklist

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Print and sign the completed application. Complete this checklist prior to scanning/submitting.

## Section A: Application Form

- All boxes checked to indicate current and accurate responses.
- All fields are completed according to instructions.
- Application and Certification signed by organization's authorized official.

## Section B: Proposal Narrative

- Organization Information
- Project Summary and Abstract
- Target Population and Statement of Need
- Goals, Objectives and Timelines.
- Include copy of completed Scope of Work and Deliverables
- Completed Quarterly Report from previous year, if the organization received VOCA funds prior
- Page limits are not exceeded; Arial 11-point font and one-inch margins are retained

## Section C: Services Quality Narrative

- Completed Quality Narrative
- Page limits have not been exceeded

## Section D: Scope of Work

- Completed Scope of Work

## Section E: Budget

- Proposed Project Budget completed for each line item.
- Budget Narrative (must match the proposed budget) completed

## Application Submission/Attachments

- Included resumes and copies of licenses of key personnel (including subcontractors)
- A copy of the negotiated indirect agreement (if applicable)
- If not previously submitted, a filled out copy of the Agency Self-Assessment

## Application Submission

- A PDF will be emailed to [dcfsgrants@dcfs.nv.gov](mailto:dcfsgrants@dcfs.nv.gov) with all required documentation no later than Tuesday, April 15, 2025, by 5:00 p.m. PST

# Section A: Application Form

## Applicant Organization

Name	
Mailing Address	
City & State, Zip code (Zip + 4)	
Physical Address	
City & State, Zip code (Zip + 4)	
Federal Tax ID #	
UEI # (SAM.gov)	

<b>Organization Type</b>	<input type="checkbox"/> 501(c)(3) Nonprofit	<input type="checkbox"/> Government Agency
	<input type="checkbox"/> Tribal	<input type="checkbox"/> University or College

## Geographic Area of Service

Check all applicable boxes

<input type="checkbox"/> City	<input type="checkbox"/> County	<input type="checkbox"/> Region	<input type="checkbox"/> Statewide
-------------------------------	---------------------------------	---------------------------------	------------------------------------

<b>Counties with Population</b>			<input type="checkbox"/> Carson City (60,266)
<input type="checkbox"/> Churchill (27,273)	<input type="checkbox"/> Clark (2,392,490)	<input type="checkbox"/> Douglas (55,797)	<input type="checkbox"/> Elko (57,989)
<input type="checkbox"/> Esmeralda (1,086)	<input type="checkbox"/> Eureka (1,852)	<input type="checkbox"/> Humboldt (17,801)	<input type="checkbox"/> Lander (6,255)
<input type="checkbox"/> Lincoln (4,730)	<input type="checkbox"/> Lyon (65,116)	<input type="checkbox"/> Mineral (4,770)	<input type="checkbox"/> Nye (51,802)
<input type="checkbox"/> Pershing (7,184)	<input type="checkbox"/> Storey (4,457)	<input type="checkbox"/> Washoe (513,854)	<input type="checkbox"/> White Pine (10,209)

Provide a brief narrative of your service area. If you provide services in states other than Nevada, specify numbers or percentages served by each state.

### Victim Populations to be Served

Specify (%) percentage of funding requested for services by population/client. Only services that are specific to a federal priority category should be included. All services not specified to the federal priority category should be included in the “ALL other Victims of Crime” category.

Victim Population	% Of Funding (Column Must Total 100%)
<input type="checkbox"/> Child Abuse	
<input type="checkbox"/> Domestic Violence	
<input type="checkbox"/> Sexual Assault	
<input type="checkbox"/> Underserved Populations	
<input type="checkbox"/> Children and Minors	
<input type="checkbox"/> Elderly	
<input type="checkbox"/> Persons with Disabilities	
<input type="checkbox"/> Indigenous and Native Communities	
<input type="checkbox"/> Homeless	
<input type="checkbox"/> Other Underserved Population Not Listed	
<input type="checkbox"/> All other Victims of Crime	
<b>Total (Must add to 100%)</b>	

**Services Provided.** Please explain the who, what, and where of services provided.

--

**Evidence Based Services**

Enter the evidence based / evidence informed services that your organization offers. Add more rows for add all services offered by the organization.

Program Name	Evidence Based / Evidence Informed
	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

**Organization Contact – Director, CEO, Administrator**

Name	
Title	
Phone	
Email	

**Program Point of Contact**

Name	
Title	
Phone	
Email	

## Fiscal Officer

Name	
Title	
Phone	
Email	

## Subcontracting of Services

<b>Does your organization subcontract its services?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
---	--

Complete the table below if your organization subcontracts its services. Copy the table if additional contractors are used to provide a complete response.

Subcontractor	
Mailing Address	
City & State, Zip code (Zip + 4)	
Federal Tax ID #	

## Key Personnel

Name	Title	Phone	Email	Resume included?
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No

## Current Funding Sources

List **ALL** funding sources for your agency/organization.

To qualify for VOCA funding your agency must receive at least 25% of its funding from non-federal sources. 28 C.F.R 94.112(b)

Add additional rows to enter all funding sources that the organization has.

Name of Funding	Type (Federal, State, Local, Private, Etc.)	Project Period End Date	Amount Awarded (\$)

## Current Funding Request and Request History

List funding requested for the one-year award period.

Funding Request	SFY 2025 Award	SFY 2026 Request	Difference
Victims of Crime Act			

## Certification by Authorized Official

As the authorized official for the applying agency, I certify that the proposed project and activities described in this application meets all requirements of the Victims of Domestic Violence or Sexual Violence legislation governing the grant as indicated by the Division of Child and Family Services (DCFS) and the certifications in the Application Instructions; that all the information contained in the application is correct; that the appropriate coordination with affected agencies and organizations, including subcontractors, took place; that this agency agrees to comply with all provisions of the applicable grant program and all other applicable federal and state laws, current or future rules, and regulations. I understand and agree that any award received as a result of this application is subject to the conditions set forth in the Notice of Subaward and accompanying documents.

Name (type/print)	Phone
Title	Email
Signature	Date

# Section B: Proposal Narrative

## Application Narrative (140 Points)

- The application narrative should be formatted in Arial 11-point font on single-spaced pages with one-inch margins.
- **Note:** Responses **must specifically be tailored to this funding opportunity**. If your organization is applying for other victim services funding, applicants should provide original content and avoid duplicating verbiage from other applications.

Overview
Instructions
1) Introduce the applicant organization, mission statement and its role in providing services, including any subcontractor(s) as necessary. <ul style="list-style-type: none"><li>• Outline your service area.</li><li>• Describe the number of years that your organization has served victims in your area.</li><li>• Outline your service numbers for victim services for the past 2 years.</li></ul>

**DELETE TEXT \*\* BOX WILL AUTOMATICALLY RESIZE WITH YOUR CONTENT LENGTH\*\***

## Statement of Need and Target Population

### Instructions

- 1) How does your organization assess or identify the need for Victim Services in your area? Are you using assessments, surveys, policies, or community data?
- 2) Establish the degree of need of Child Abuse, Sexual Assault, Domestic Violence, or Previously Underserved services within your geographic area.
  - *If applying for multiple, please identify the degree of need for each population separately.*
- 3) Describe the target population and the geographic area served by your project/program (including demographic characteristics, risk factors, geographic location, statistics, etc.)

**DELETE TEXT \*\* BOX WILL AUTOMATICALLY RESIZE WITH YOUR CONTENT LENGTH\*\***

## Service Proposed

### Instructions

The foundation of the proposed project(s) should be constructed of evidence supported project justification, empirically supported methods, appropriate staffing, a flexible design, and a clear strategy.

- 1) Give a brief summary of the proposed project and its purpose.
- 2) Identify what services will be provided **for this funding opportunity** and how clients are referred to your agency.
- 3) Describe your agency's approach to direct service delivery and how it meets the needs of the client **for this funding opportunity**.
- 4) If you are already providing the proposed services in the proposed community / communities, indicate whether there is a waiting list for the proposed services and provide the average length of wait and the number of prospective clients on the list.
- 5) If you are a recipient of multiple victim services grants through DCFS GMU, please explain how your agency guarantees the time and effort towards this funding opportunity? How does your agency ensure the separation of activities and service numbers across different funding sources? Please describe the methods or systems you use to track and report services accurately while preventing duplication or overlap between funding sources. Is it outlined in your budget? Will it be outlined in your activity-based timesheets? **Note:** Your response must match your budget.
- 6) Describe how training for staff will be conducted to ensure effective service delivery.

**DELETE TEXT \*\* BOX WILL AUTOMATICALLY RESIZE WITH YOUR CONTENT LENGTH\*\***

## Evidence-Based Programs/Practices

### Instructions

- 1) Evidence-Based Programs/Practices (EBPs) are required and strongly encouraged by OJP whenever possible. Agencies will not lose points for not having EBPs. If your agency provides EBP services, provide the following:
  - Proof of implementation in Section B.
  - Be based on a logic model
  - Have a written manual or protocol
  - Be generally accepted
  - Shown to do no harm
- 2) Demonstrate a commitment to ongoing evaluation and the establishment of a process for continuous quality improvement
- 3) Provide information on evidence based curriculum that is being used.
- 4) Include the name of the curriculum and the level of priority for the curriculum (well supported, supported, promising programs and practices, emerging and evidence informed programs and practices, etc.)

**DELETE TEXT \*\* BOX WILL AUTOMATICALLY RESIZE WITH YOUR CONTENT LENGTH\*\***

## Availability and Accessibility of Services

### Instructions

- 1) Explain how your agency will ensure that services are accessible to all populations, how the needs of your clients will be assessed, and how services will be individualized **for this funding opportunity**.
- 2) Detail the availability of services within the organization's geographic area.
- 3) Identify and list other organizations providing similar services and describe why duplication of services is warranted.
- 4) Describe resources or planning that support sustainability, including diverse funding resources, staff commitments, and longevity of the organization.

**DELETE TEXT \*\* BOX WILL AUTOMATICALLY RESIZE WITH YOUR CONTENT LENGTH\*\***

## Goals, Objectives and Timelines

### Instructions

- 1) Describe the organization's goals and objectives **for SFY 2026** to meet the geographic area's needs.
- 2) Provide the projected number of services that will be provided, in clients served and services provided with these grant funds. Note that these projections must match the Scope of Work and Budget Narrative and must only be **for this funding opportunity**.
- 3) If your agency is requesting funding for more than one priority category (Child Abuse, Sexual Assault, Domestic Violence, and/or Previously Underserved ). Please list the projected number of services for each category separately, that will be provided, in clients served and services provided with these grant funds.
  - Number of trainings/activities with the anticipated number of participants/activities/trainings that will be provided with these grant funds. Include anticipated dates for completion.
  - **These projections must match the Scope of Work and Budget Narrative.**
- 4) Complete SOW as detailed in Appendix B: Descriptions of Services, Scope of Work and Deliverables. **If you are requesting funding for multiple priority categories, each category must have its own set of goals, objectives, and activities.**

**DELETE TEXT \*\* BOX WILL AUTOMATICALLY RESIZE WITH YOUR CONTENT LENGTH\*\***

## Methods of Accomplishment

### Instructions

- 1) Describe the plan to achieve the outlined goals and objectives. Include how, who, where, and when these goals and objectives will be achieved **for this funding opportunity**.
- 2) How does your organization measure success? What measurements will be used to report on the proposed project's success. (Evaluation tools, survey results, assessments, needs assessments, strategic plans, data collection results and methods, etc.)
  - Note: Grantees will be required to track activities and evaluations to the VOCA Program contact.

**DELETE TEXT \*\* BOX WILL AUTOMATICALLY RESIZE WITH YOUR CONTENT LENGTH\*\***

## Community Coordination/Collaboration

### Instructions

- 1) Provide a brief description of your collaboration and collaborative efforts with other victim service providers and other community services.
- 2) If you do not currently collaborate with other victim service providers, please identify which ones, and explain why not.

**DELETE TEXT \*\* BOX WILL AUTOMATICALLY RESIZE WITH YOUR CONTENT LENGTH\*\***

# Section C: Services Quality Narrative

- Services Quality Narrative should not exceed 3 pages.
- If the applicant provides direct services, you must respond with the questions in the **Direct Service Quality Narrative** section. If the applicant provides shelter services, you must respond with the questions in the **Shelter Quality Narrative** section. If the applicant provides both Direct Services and Shelter Services, the applicant must respond to both the questions in the **Direct Service Quality Narrative** section and the **Shelter Quality Narrative** section.
- This section should detail activities in regard to direct services and/or shelter quality as it relates to **this funding opportunity**.
  - **If your organization does not offer shelter services**, outline why you don't offer shelter services. If you contract out shelter services to another organization, please respond to the question below using that organization's information.

Direct Services Quality Narrative
Instructions
<ol style="list-style-type: none"> <li>1) Please provide a description of your direct services (e.g., counseling, advocacy, case management), including service locations, populations served, and any relevant information about your approach.</li> <li>2) Describe how your organization maintains the quality of direct services.</li> <li>3) Identify and detail the steps that your organization takes to handle complaints.</li> <li>4) Identify and detail how your organization ensures client satisfaction on services provided.</li> <li>5) Identify, outline, and detail the minimum standards that the organization adheres to, including how services are provided, the procedures followed, and any relevant protocols.</li> </ol>

Shelter Quality Narrative
Instructions
<ol style="list-style-type: none"> <li>1) Please provide a description of your shelter and shelter services (shelter size, shelter capacity, shelter location (indicate the city or town, regions served and confidentiality), security measures, genders served, and any relevant information your organization would like to share).</li> <li>2) Identify and list the amenities your organization offers in your shelter.</li> <li>3) Describe how your organization maintains the shelters' quality.</li> <li>4) Identify and detail the steps that your organization takes to handle complaints.</li> <li>5) Identify and detail how your organization ensures resident satisfaction.</li> <li>6) Identify, outline, and detail the minimum standards that the organization adheres to for the shelter. Cite sources for where standards were adapted from and include an attachment of the organization's shelter standards.</li> </ol>

**DELETE TEXT \*\* BOX WILL AUTOMATICALLY RESIZE WITH YOUR CONTENT LENGTH\*\***

## Scope of Work – SFY 2026

**SUBRECIPIENT NAME**, hereinafter referred to as Subrecipient, agrees to provide the following services and reports according to the identified timeframes:

### Scope of Work for **SUBRECIPIENT NAME**

Goal 1: Describe the primary goal the program wishes to accomplish with this subaward.					
Target Number	Target Number Duplicated?	Objectives	Activities	Due Date	Documentation Needed for Measurement
#	Specify if your target number is duplicated. If yes, explain to what goal, objective, or grant	1. These are specific objectives that need to be made to achieve the Goal. These need to be measurable.	1.1 These are the activities that can or need to be accomplished to achieve the Objectives		1. What documentation do you have to show this objective was accomplished? How will you measure the information to show the objective is being met? 2. Report to the GMU Quarterly Report.
#		2.	2.1		1. 2. Report to the GMU Quarterly Report.
<b>Total Service Numbers to be Reported</b>					<b>#</b>

Goal 2: Describe the secondary goal the program wishes to accomplish with this subaward.					
Target Number	Target Number Duplicated?	Objectives	Activities	Due Date	Documentation Needed for Measurement
		1.	1.1		1. 2. Report to the GMU Quarterly Report.
		2.	2.1		1. 2. Report to the GMU Quarterly Report.
<b>Total Service Numbers to be Reported</b>					

Note: This document should not contain any red text when completed.

Note to Preparer: Copy the table to add additional goals as needed. Add rows to the table as necessary to include all objectives for each goal under this subaward. Ensure that activities, target numbers, documentation, and measurements align correctly with their corresponding objective rows.

# Section E: Budget

## Proposed Project Budget (20 Points)

- Submit as an attachment, your completed SFY 2026 VOCA Budget Narrative Template.
- Copy the total amounts for each budget category from the Budget Narrative Template into the rows below.

Category	Total Requested Amount (\$)
Personnel	
Travel/Training	
Operating	
Equipment	
Contractual/Consultant	
Other	
Total Funding Requested (\$)	

# Appendix A: Budget Narrative Instructions

## Budget Narrative Instructions

All applications must include a detailed project budget for the one-year funding cycle. The budget needs to accurately represent the funds **necessary** to carry out the proposed Scope of Work and to achieve the projected outcomes for the award funding period.

Note: *If the proposed project does not receive the full amount requested, the GMU will work with the applicant to modify the budget, the Scope of Work and the projected outcomes.*

Applicants **must** use the budget template form (Excel file) provided for downloading in the Budget Section of the online application and use the budget definitions provided in the “Categorized Budgets” section below to complete the narrative budget (spreadsheet tab labeled Budget Narrative). Complete a detailed budget for each line item. This spreadsheet contains formulas to automatically calculate totals and links to the budget summary spreadsheet (tab labeled Budget Summary) to automatically complete budget totals in Column B. **Do not override formulas.**

For all budget categories, provide total amount requested, item details, and line-item justification.

Applicant Name:					Form 1		
BUDGET NARRATIVE - SFY26							
<b>Total Personnel Costs</b>					Including Fringe	Total:	\$0.00
List Staff, positions, percent of time to be spent on the project, rate of pay, fringe rate, and total cost to this grant. As part of the Division of Child and Family Services' commitment to diversity, equity, and inclusion, it is encouraged that each agency pay staff a living wage and offer a health insurance option.							
	Annual Salary	Fringe Rate	% of Time	Months	Amount Requested		
Name of Employee (if know n, otherwise state new position).							
Title of position & Position Control Number							
Length of time in Position							
*Insert brief details to describe position duties as it relates to the funding.						\$0.00	
Name of Employee (if know n, otherwise state new position).							
Title of position & Position Control Number							
Length of time in Position							
*Insert brief details to describe position duties as it relates to the funding.						\$0.00	
Name of Employee (if know n, otherwise state new position).							
Title of position & Position Control Number							
Length of time in Position							
*Insert brief details to describe position duties as it relates to the funding.						\$0.00	
Name of Employee (if know n, otherwise state new position).							
Title of position & Position Control Number							
Length of time in Position							
*Insert brief details to describe position duties as it relates to the funding.						\$0.00	
*Insert new row for each position funded, or delete this row.							
<b>Total Fringe Cost</b>					<b>\$0.00</b>	<b>Total:</b>	<b>\$0.00</b>

<b>Travel/Training</b>				<b>Total:</b>	<b>\$0.00</b>
<b>Identify staff who will travel, the purpose, frequency, and projected costs. Utilize GSA rates for per diem and lodging (go to www.gsa.gov) as a guide unless the organization's policies specify lower rates for these expenses. Out-of-state travel or non-standard fares require special justification. Due to declining funds, these costs must have exceptional justification and cost allocation must be provided to be considered.</b>					
<b>Mileage</b>					\$0.00
Justification of need. Mileage is only reimbursable if it is for client transport, client assistance, or if it is a justifiable expense to provide client services. It is not reimbursable from employees home to/from workstation.					
<b>Agency Vehicle</b>					\$0.00
Justification of need. Example: vehicle maintenance (explain type eg: tires, oil change, etc.) and gas.					
<b>Out-of-State Travel</b>					<b>\$0.00</b>
<b>Title of Trip &amp; Destination such as CDC Conference: San Diego, CA</b>	<b>Cost</b>	<b># of Trips</b>	<b># of Days</b>	<b># of Staff</b>	
Registration fee					\$0.00
Airfare: Cost per trip (origin & destination) x # of trips x # of staff					\$0.00
Baggage fee: \$ amount per person x # of trips x # of staff					\$0.00
Per Diem: \$ per day per GSA rate for area x # of trips x # of staff					\$0.00
Lodging: \$ per day + \$ tax = total \$ x # of trips x # of nights x # of staff					\$0.00
Ground Transportation: \$ per r/trip x # of trips x # of staff					\$0.00
Parking: \$ per day x # of trips x # of days x # of staff					\$0.00
<b>Justification:</b>					
Who will be traveling, when and why, tie into program objective(s) or indicate required by funder. Travel/Training must be related to grant objectives and allow abilities.					
If traveling to more than 1 out-of-state destination, copy section above, revise formula in Cell F33 and complete for each trip					
<b>In-State Travel</b>					<b>\$0.00</b>
<b>Title of Trip &amp; Destination such as CDC Conference: Las Vegas, NV</b>	<b>Cost</b>	<b># of Trips</b>	<b># of Days</b>	<b># of Staff</b>	
Registration fee					\$0.00
Airfare: cost per trip (origin & designation) x # of trips x # of staff					\$0.00
Baggage fee: \$ amount per person x # of trips x # of staff					\$0.00
Per Diem: \$ per day per GSA rate for area x # of trips x # of staff					\$0.00
Lodging: \$ per day + \$ tax = total \$ x # of trips x # of nights x # of staff					\$0.00
Ground Transportation/Motor Pool: (\$ car/day + ## miles/day x \$ rate per mile) x # trips x # days					\$0.00
Parking: \$ per day x # of trips x # of days x # of staff					\$0.00
<b>Justification:</b>					
Who will be traveling, when and why, tie into program objective(s) or indicate required by funder. Travel/Training must be related to grant objectives and allow abilities.					
If traveling to more than 1 in-state destination, copy section above, revise formula in F48 and complete for each trip.					

<b>Operating</b>				<b>Total:</b>	<b>\$0.00</b>
<b>List tangible and expendable personal property, such as office supplies, program supplies, etc. Unit cost for general items are not required. Listing of typical or anticipated agency expenses should be included.</b>					
Rent Office: \$ per month x 12 months x allocation %					\$0.00
Communications Internet/phone Office: \$ per month x 12 months x allocation %					\$0.00
Utilities Office: \$ per month x 12 months x allocation %					\$0.00
Supplies Office: \$ per month x 12 months x allocation %					\$0.00
Janitorial Office: \$ per month x 12 months x allocation %					\$0.00
Printing services/rental: \$ per month x 12 months x allocation %					\$0.00
Insurance					\$0.00
Audit					\$0.00
Client software (specify, eg: Apricot, Datafirm, etc.)					\$0.00
Rent Shelter: \$ per month x 12 months x allocation %					\$0.00
Communications Internet/phone Shelter: \$ per month x 12 months x allocation %					\$0.00
Communications Cable Shelter: \$ per month x 12 months x allocation %					\$0.00
Utilities Shelter: \$ per month x 12 months x allocation %					\$0.00
Supplies Shelter: \$ per month x 12 months x allocation %					\$0.00
Janitorial Shelter: \$ per month x 12 months x allocation %					\$0.00
<b>Justification:</b>					
Provide narrative to explain specifics of line items. Example: Utilities include power, water, sewer, etc.					

<b>Equipment</b>				<b>Total:</b>	<b>\$0.00</b>
<b>List Equipment purchase costing \$5,000 or more, and justify these expenditures. Also list any computers, cellular phones, iPods, iPads, Tablets, etc. to be purchased regardless of cost. All other equipment costing less than \$5,000 should be listed under Operating. Due to declining funds, these costs must have exceptional justification and cost allocation must be provided to be considered.</b>					
Describe equipment					\$0.00

<b>Contractual</b>				<b>Total:</b>	<b>\$0.00</b>
<b>Agency must be able to provide documentation for full and open competition, develop clear descriptions of duties provided by Contractor, ensure maximum open and free competition, and verify that Contractor is not on the suspended and debarred list (SAM.gov). Agencies must follow their procurement policies to enter into contracts. Copies of contracts are required. Due to declining funds, these costs must have exceptional justification and cost allocation must be provided to be considered.</b>					
<b>Name of Contractor/Subrecipient:</b>					\$0.00
<b>Method of Selection:</b> Explain, i.e. sole source or competitive bid					
<b>Period of Performance:</b> July 1, 2022 - July 31, 2023					
<b>Scope of Work:</b> Briefly Define Scope of Work					
<b>Justification:</b> Define if sole source method and explain how it is sole source; explain contract approval.					
<b>Method of Accountability:</b>					
Define - Describe how the progress and performance of the consultant will be monitored. Identify who is responsible for supervising the consultant's work.					
*Add additional Contractor/Subrecipients here with justification or delete this row.					
					\$0.00

<b>Other</b>		Total:	\$0.00
Identify and justify these expenditures, which can include virtually any relevant expenditure associated with the project, such as emergency client services, client transportation, etc. Stipends or scholarships that are a component of a larger project or program may be included here, but require special justification.			
Emergency client services (define)		\$0.00	
Food gift cards		\$0.00	
Clothing gift cards		\$0.00	
Counseling/support group supplies		\$0.00	
Client transportation		\$0.00	
Brochures/flyers/educational information for program		\$0.00	
Public Presentations		\$0.00	
Volunteer Appreciation (not to exceed \$25/volunteer/year)		\$0.00	
Justification: Include narrative to explain generalized line items such as emergency client services (motel nights, etc.), transportation (gas card, bus pass, etc.), supplies, etc.			

<b>Indirect</b>		Total:	\$0.00
Indirect costs represent the expenses of doing business that are not readily identified with a particular grant, contract, project function, or activity, but are necessary for the general operation of the organization and the conduct of activities it performs. This will be a percentage that cannot exceed 10% of Modified Total Direct Cost (MTDC). Note that the formula in Cell F125 will automatically calculate 10%. Applicants may override this formula only if requesting a LOWER rate <u>or</u> providing a copy of their current Federally Approved Indirect Cost Rate Letter.			
Identify Indirect Expenses (List what items Indirect will be allocated to)		\$	-
MTDC is Personnel, Travel, Operating, and the first \$25,000 of Contract ONLY. Enter that number in this section if requesting indirect. The total will automatically calculate the allowable 10% de minimis.			
<b>TOTAL BUDGET</b>		Total:	\$0.00

<b>Applicant Name:</b>								<b>Form 2</b>	
PROPOSED BUDGET SUMMARY - SFY24 (Form Revised November 2022)									
A. PATTERN BOXES ARE FORMULA DRIVEN - DO NOT OVERRIDE - SEE INSTRUCTIONS									
FUNDING SOURCES	VOCA	Other Funding	Match	TOTAL					
PENDING OR SECURED	Pending								
TYPE (Federal, State, Private, etc.)	Federal								
ENTER TOTAL REQUEST	\$0.00							\$0.00	\$0.00
EXPENSE CATEGORY									
Personnel	\$0.00							\$0.00	\$0.00
Travel/Training	\$0.00							\$0.00	\$0.00
Operating	\$0.00							\$0.00	\$0.00
Equipment	\$0.00							\$0.00	\$0.00
Contractual/Consultant	\$0.00							\$0.00	\$0.00
Other Expenses	\$0.00							\$0.00	\$0.00
Indirect	\$0.00							\$0.00	\$0.00
TOTAL EXPENSES	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
These boxes should equal 0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total Indirect Cost	\$0.00							Total Agency Budget	\$0.00
Indirect % of Budget	#DIV/0!							Percent of Agency Budget	#DIV/0!

## PERSONNEL

Charges made for salaries, wages, and fringe benefits must be based on records that accurately reflect the work performed and comply with the established policies and practices of the organization. See [2 C.F.R. § 200.430](#).

Identify employees who provide direct services. The following criterion is useful in distinguishing employees from contract staff.

CONTRACTOR	EMPLOYEE
Delivers product	The applicant organization is responsible for product
Furnishes tools and/or equipment	The applicant organization furnishes workspace & tools
Determines means and methods	The applicant organization determines means and methods

In the narrative section, list each position and employee name, if known. Provide a breakdown of the wages or salary and the fringe benefit rate (e.g., health insurance, FICA, worker’s compensation).

**For example:**

Counselor:  $(\$28.00/\text{hour} \times 2,080/\text{year} + 22\% \text{ fringe}) \times 25\% \text{ of time} = \$17,763.00$

Advocate:  $(\$20.00/\text{hour} \times 40 \text{ hours/week} + 15\% \text{ fringe}) \times 52 \text{ weeks} = \$47,840.00$

Only those staff whose time can be traced directly back to the grant project should be included in this budget category, including those who spend only part of their time on grant activities.

Administrative/Executive Staff salaries that are not readily assignable to a particular project are not allowed.

## TRAVEL/TRAINING

Travel costs must provide direct benefit to this project. Identify staff that will travel, the purpose, frequency, and projected costs. U.S. General Services Administration (GSA) rates for per Diem and lodging, and the state rate for mileage (currently \$.70), should be used **unless the organization's policies specify lower rates** for these expenses. Local travel (i.e., within the program’s service area) should be listed separately from out-of-area travel. Out-of-state travel and nonstandard fares/rates require special justification. GSA rates can be found online at <https://www.gsa.gov/portal/category/26429>.

Identify and justify any training costs specifically associated with the project, including type of training, location, # of staff attending, benefit to subrecipient and Scope of Work implementation.

## OPERATING

For agencies with multiple funding sources, costs must be consistently allocated as described in the organization's cost allocation plan.

- **Occupancy:** Detail costs associated with maintaining a facility including rent, utilities, basic maintenance, etc. Mortgage, construction, remodeling, and repairs to current structures are not allowed.
- **Communications:** List the costs of telephones, fax, postage, etc.
- **Supplies:** Describe the cost of all consumable items needed for the project such as office supplies, client supplies, etc. Generally, supplies do not need to be priced individually, but a list of typical program supplies is necessary.
- **Other operating costs:** This could include insurance, dues, subscriptions, program costs, and costs not covered in the other categories. Only consumer/service delivery activities are reimbursable.

## EQUIPMENT

List and justify equipment to be purchased for this grant project (all non-consumable items). Equipment under \$5,000.00 should be included under Operating Costs and Supplies. All equipment costing \$5,000.00 and over must be listed separately and itemized. List any computer hardware to be purchased regardless of the cost. Equipment purchased for this project must be labeled, inventoried, and tracked and remains the property of the Division of Child and Family Services (DCFS). Equipment that does not directly facilitate the purpose of the project, as an integral component, is not allowed.

## CONTRACTUAL/CONSULTANT SERVICES

Identify project workers who are not employees of the applicant organization. Any costs associated with these workers, such as travel or per diem, should also be identified in this budget category. Explain the need and/or purpose for the contractual/consultant service and justify these costs. Describe each consultant's scope of work, list rate, hours, and cost. DCFS approval is required prior to the use of subcontractors. Written sub-agreements must be maintained, and the applicant is responsible for administering sub-agreements in accordance with all requirements identified for grants administered under VOCA. A copy of written agreements must be provided to GMU.

## OTHER EXPENSES

This category includes any relevant expenditure associated with the project not covered by the above. Wraparound funds are allowable for such items as rental assistance, transportation, utilities, children's clothing, emergency services, etc. Programs requesting these funds must adhere to the following requirements: 1) Maximum per family per year = \$2,000.00; 2) Subgrantees must document that there was an attempt to access all other possible resources prior to use of wraparound funds; 3) Detailed documentation of where these funds were used is required.

## INDIRECT COSTS

Indirect costs may be included in the budget and represent the expenses of doing business that are not readily identified with or allocable to a specific grant, contract, project function or activity, but are necessary for the general operation of the organization and the conduct of activities it performs. Indirect costs include but are not limited to depreciation and use allowances, facility operation and maintenance, memberships, and general administrative expenses such as management/administration, accounting, payroll, legal and data processing expenses that cannot be traced directly back to the grant project.

Subrecipients without a negotiated indirect rate with their cognizant federal agency may use a 15% *de minimis rate* of "modified total direct costs" (MTDC). The *de minimis rate* is only an option for subrecipients that have **never** received an approved federally negotiated indirect cost rate. The MTDC base includes all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and subawards up to the first \$25,000.00 of each subaward. MTDC excludes equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, **participant support costs**, and the portion of each subaward in excess of \$25,000.00. [2 C.F.R. § 200.68](#)

When the *de minimis rate* is used, costs must be consistently charged as either indirect or direct costs. Double-charging is not permitted. Transferring funds into or out of the indirect cost category is not allowable without prior approval and a budget modification is required.

Subrecipients that have a current federally approved indirect cost rate with their federal cognizant agency for indirect costs may include the negotiated percentage rate in their budgets. **A copy of the negotiated indirect agreement must be attached to the application.**

## BUDGET SUMMARY FORM 2

After completing Budget Narrative Form 1, turn to Budget Summary Form 2. Column B of Form 2 ("DCFS") should automatically update with the category totals from Budget Narrative Form 1. Column B should reflect only the amount requested in this application.

Complete Columns C through G of the form for all other funding sources that are either secured or pending **for this project** (not for the organization as a whole). Use a separate column for each separate source, including in-kind, volunteer, or cash donations. Replace the words "Other Funding" in the cell(s) in Row 6 with the name of the funding source. Enter either "Secured" or "Pending" in the cell(s) in Row 7. If the funding is pending, note the estimated date of the funding decision in Section B below the table, along with any other explanation deemed important to include.

Enter the "Total Agency Budget" in Cell I-26 labeled for this purpose. **This should include all funding available to the agency for all projects including the proposed project.** Cell I-27 requested from the DCFS for the proposed project will represent.

# Appendix B: Scope of Work Instructions

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## Scope of Work (SOW) Purpose

The Purpose of the Scope of Work (SOW) Table is to provide a clear and concise description of the services that will be provided with this grant funding. This description needs to contain measurable deliverables so that the Grant Management Unit staff can objectively measure if the program met its goals.

## Determining the Difference Between Goals, Objectives, Activities

**Goal:** The object of the agency's ambition or effort; and aim or desired result. This is a very broad statement on what your agency plans to do with this funding. It should establish the big picture and include the target population and what benefits/assistance they will receive.

**Objective:** A concrete, measurable milestone on the way to achieving the goal they relate to.

**Activity:** Things that happen or are being done to accomplish the objective they relate to.

**Documentation:** Material that provides official information or evidence or serves as a record of the activities and objectives will be completed.

## SOW Best Practices

The **Scope of Work (SOW)** must align with the **Victims of Crime Act (VOCA)** programmatic requirements, focusing on services directly related to victims of crime, including but not limited to domestic violence, sexual assault, child abuse, and underserved victims. The SOW should clearly define the agency's objectives, activities, and measurable outcomes to meet these programmatic goals.

### 1) Align with the Grant Purpose

- a) The SOW must be directly related to the VOCA programmatic requirements, which focus on:
  - i) **Direct services to victims of crime**, including emotional and physical support.
  - ii) **Assistance in stabilizing lives** after victimization.
  - iii) **Helping victims understand and participate** in the criminal justice system.
  - iv) **Providing safety and security** for victims.

## 2) Allowable Services Include:

- a) **Crisis Intervention** – 24-hour hotlines, emergency shelters, and crisis counseling.
- b) **Counseling and Therapy** – Individual, group, and family counseling.
- c) **Advocacy and Legal Assistance** – Support in obtaining protection orders, navigating legal systems, and accessing victim compensation.
- d) **Case Management and Support Services** – Assistance with housing, financial recovery, transportation, and other practical needs.
- e) **Education and Outreach** – Community education, public awareness, and prevention programs.
- f) **Specialized Services** – Addressing the needs of underserved populations, including non-English speaking victims, elderly victims, or victims with disabilities.

## 3) Make Goals Measurable

- a) **Specific** – Clearly define what the program aims to achieve.
- b) **Quantifiable** – Use numbers to define expected outcomes.
- c) **Trackable** – Set up mechanisms for tracking progress and measuring success.
- d) **Examples:**
  - i) Provide **counseling services** to 200 victims of domestic violence by the end of the fiscal year.
  - ii) Facilitate **legal advocacy** for 50 victims in obtaining protection orders within the project period.
  - iii) Conduct **community outreach** programs reaching 1,000 participants to raise awareness about sexual assault and available support services.

## 4) Ensure the SOW is Attainable

- a) Set realistic goals and objectives considering **agency capacity, community needs**, and the **project period**.
- b) Clearly define target populations, such as child abuse victims, sexual assault survivors, and underserved communities.
- c) Specify the type of assistance or services provided, e.g., **shelter, legal support, therapy, crisis intervention**, and **education programs**.

## 5) Make the SOW Reportable

- a) Design the SOW to ensure effective documentation and reporting of progress.
- b) Align objectives and activities with VOCA's **data collection and reporting requirements**.
- c) Establish clear **output and outcome measures** such as:
  - i) Number of victims served.
  - ii) Number of counseling sessions provided.
  - iii) Success rates of legal advocacy outcomes.

iv) Community awareness and education program reach and impact.

## 6) Prioritize Core VOCA Services

- a) VOCA funding is intended for **direct services to victims of crime**. Therefore, the SOW should prioritize:
  - i) **Crisis Intervention and Safety Services**
    - (1) 24-hour hotlines, emergency shelters, and crisis counseling.
    - (2) Safety planning and support for victims in crisis situations.
  - b) **Counseling and Therapy**
    - i) Trauma-informed individual, group, and family counseling.
  - c) **Advocacy and Legal Assistance**
    - i) Legal advocacy and support in obtaining protection orders, navigating the criminal justice system, and accessing compensation.
  - d) **Case Management and Supportive Services**
    - i) Comprehensive case management for victim stabilization, including housing, financial support, transportation, and vocational assistance.
  - e) **Specialized Services for Underserved Populations**
    - i) Services tailored to underserved groups such as non-English speaking victims, elderly victims, or victims with disabilities.

## 7) Collaborate and Coordinate with Community Agencies

- a) Demonstrate ongoing collaboration with other **victim service agencies** for effective service delivery.
- b) Limit funding requests to avoid redundancy and maximize community resources.
- c) Emphasize **collective impact** by forming coalitions, multidisciplinary teams, or task forces.

## 8) Comply with Confidentiality and Safety Requirements

- a) Maintain the **confidentiality** of all victim records and sensitive information as required by VOCA.
- b) Ensure **victim safety** by adopting trauma-informed and survivor-centered approaches.
- c) Conduct **background checks** for all staff, volunteers, and personnel who interact with victims.

## 9) Include Culturally Competent and Inclusive Practices

- a) Provide services that are **culturally and linguistically appropriate** for diverse populations.
- b) Implement outreach strategies to **underserved populations** to ensure equitable access to services.
- c) Develop materials and resources in multiple languages as needed.

## 10) Utilize Evidence-Based and Trauma-Informed Practices

- a) Incorporate **evidence-based programs and practices** in service delivery.
- b) Ensure all staff and volunteers receive **training on trauma-informed care**.
- c) Continuously **evaluate and improve program quality** and outcomes using data-driven strategies.

## 11) Documentation and Reporting Requirements

- a) **Quarterly Performance Reports:** Report progress towards goals, objectives, and service numbers.
- b) **Monthly Financial Reports:** Provide financial accountability and transparency in fund usage.
- c) **Outcome Measurement and Evaluation:** Collect and analyze data on service outcomes to measure impact and improve service delivery.

## How to Complete the SOW

**If you are requesting funding for multiple priority categories, each category must have its own set of goals, objectives, and activities.**

1. Replace the red text that says “Subrecipient’s Name” with the name of your agency/organization in the sentence under the document name. Please note that this should be the name on your application.
2. Replace the red text that says “Subrecipient Name” with the name of your agency/organization in the “Scope of Work for Subrecipient Name” line of the document. Please note that this should be the name on your application.
3. Determine how many goals the program funded with this grant will have. You will need to have one goal statement and table with details for each goal.
  - a. If your program has only one goal, delete the second goal statement table from the template form.
  - b. If your program has more than two goals, copy the goal statement and table and paste it below the second table. Remember to change the numbering. Repeat this until you have the correct number of goals for your program.
4. Type the first goal statement for your program above the first table after where it says, “Goal 1:” See below for more details on the differences between a goal, an objective, and an activity.
5. Determine the target number of the objective(s) you are going to provide to meet your goal. Example below. **Add a new table row for each objective.**

6. Determine the objective(s) that will show how your agency is going to demonstrate that it met its goal and type them in the first column of the table labeled “Objectives”.
  - a. Number each objective in the table.
  - b. Each goal must have at least one objective.
  - c. Objectives need to be specific and measurable. This means that they most likely will have a number in them.
  
7. Put the target number for each objective in the column labeled “Target Number.”
  - a. These should be numbered to match the number of the objective that they are connected to.
  - b. Identify if the target number is a duplicated amount. If the target number is duplicated, explain what it is duplicated with.
  - c. Identify what the target number represents (individuals, classes, groups, families).
  
8. Determine the Activities that the agency/organization will need to complete to accomplish the objective.
  - a. Each objective must have at least one activity.
  - b. Number each activity with the number of the objective that it applies to then point and the number of the activity. Example: If the first objective had three activities, they would be numbered 1.1, 1.2., 1.3, then the second objective had two activities, they would be numbered 2.1, and 2.2.
  
9. Determine the amount of time it will take to accomplish each objective. This can be any period between the start and end date of the grant award period but not exceed the grant award period.
  - a. This is just the end date, not a range and should not be “continuing.”
  - b. These should line up with each objective in the table.
  
10. Determine the specific documentation needed to measure the objectives and activities to show that they were completed. This documentation may be reviewed at the request of the Grant Management Unit.
  - a. The numbering of the documentation should match the objective that the documentation will support.
  - b. Please also include in the GMU Quarterly Reports
  
11. Enter the total amount of services that will be assisted by each goal’s objective on the **Total Service Numbers to be Reported** box. This is the amount that will align with your quarterly reporting.

## Example Scope of Work – SFY 2026

Crater Lake Victim Advocacy, hereinafter referred to as Subrecipient, agrees to provide the following services and reports according to the identified timeframes:

### Scope of Work for Crater Lake Victim Advocacy

Goal 1: Assist 200 victims in becoming self-sufficient.					
Target Number	Target Number Duplicated?	Objectives	Activities	Due Date	Documentation Needed for Measurement
<b>100</b>	No	1. Provide advocacy	1.1 Operate hotline 1.2 Crisis intervention 1.3 Safety planning 1.4 Basic needs assessment	6/30/26	1. Electronic records system with ability to track victims who received advocacy services.
<b>50</b>	No	2. Provide education on criminal justice process	2.1 VOCA compensation education 2.2 (TPO) education 2.3 Legal resources education and referral	6/30/26	2. Case notes documenting information provided and referrals made
<b>50</b>	Yes, with ML Grant	3. Provide weekly life skills classes for victims.	3.1 Parenting classes 3.2 Budgeting/debt management classes 3.3 Employment readiness classes	6/30/26	3. Group sign-in sheets
<b>Total Service Numbers to be Reported</b>					<b>200</b>

Goal 2: Assist 50 victims to improve mental health related to victimization.					
Target Number	Target Number Duplicated?	Objectives	Activities	Due Date	Documentation Needed for Measurement
<b>20</b>	No	1. Provide mental health counseling	1.1 Psychiatric evaluation 1.2 Counseling sessions	6/30/26	1. Paper counseling charts with case notes.
<b>30</b>	No	2. Provide case management	2.1 Complete Social history 2.2 Case plans 2.3 Referrals	6/30/26	2. System tracking number of victims enrolled
<b>Total Service Numbers to be Reported</b>					<b>50</b>

## Example Scope of Work – SFY 2026 (Multiple Priority Categories)

Crater Lake Victim Advocacy, hereinafter referred to as Subrecipient, agrees to provide the following services and reports according to the identified timeframes:

### Child Abuse Scope of Work for Crater Lake Victim Advocacy

Goal 1: Assist 200 victims in becoming self-sufficient.					
Target Number	Target Number Duplicated?	Objectives	Activities	Due Date	Documentation Needed for Measurement
100	No	1. Provide advocacy	1.1 Operate hotline 1.2 Crisis intervention 1.3 Safety planning 1.4 Basic needs assessment	6/30/26	1. Electronic records system with ability to track victims who received advocacy services.
50	No	2. Provide education on criminal justice process	2.1 VOCA compensation education 2.2 (TPO) education 2.3 Legal resources education and referral	6/30/26	2. Case notes documenting information provided and referrals made
50	Yes, with ML Grant	3. Provide weekly life skills classes for victims.	3.1 Parenting classes 3.2 Budgeting/debt management classes 3.3 Employment readiness classes	6/30/26	3. Group sign-in sheets
<b>Total Service Numbers to be Reported</b>					<b>200</b>

### Underserved Scope of Work for Crater Lake Victim Advocacy

Goal 2: Assist 50 victims to improve mental health related to victimization.					
Target Number	Target Number Duplicated?	Objectives	Activities	Due Date	Documentation Needed for Measurement
20	No	1. Provide mental health counseling	1.1 Psychiatric evaluation 1.2 Counseling sessions	6/30/26	1. Paper counseling charts with case notes.
30	No	2. Provide case management	2.1 Complete Social history 2.2 Case plans 2.3 Referrals	6/30/26	2. System tracking number of victims enrolled
<b>Total Service Numbers to be Reported</b>					<b>50</b>

# Appendix C: Application Scoring Matrix

## GMU Application Scoring Matrix

Accepted proposals will be evaluated based on the following criteria:

- A. All parts of each section are included and addressed.
- B. Descriptions and details are clear, organized and understandable.
- C. Descriptions are responsive to the intent of the NOFO objectives.
- D. Overall ability of the applicant, as determined by the evaluation committee, to successfully provide services in accordance VOCA program guidelines.

**Points will be assigned for each item listed as follows:**

Maximum Points	Criteria
80% - 100% of Maximum Points	Applicant's proposal or capability is superior and exceeds Expectations for this criterion.
60% - 79% of Maximum Points	Applicant's proposal or capability is satisfactory and meets Expectations for this criterion
40% - 59% of Maximum Points	Applicant's proposal or capability is unsatisfactory and contains numerous deficiencies for this criterion.
0 – 39% of Maximum Points	Applicant's proposal or capability is not acceptable or Applicable for this criterion.

\*With the exception of the Servicers Quality Narrative, which will have its own point award criterion as listed in Section 3.

**The maximum points to be awarded for each proposal section are as follows:**

Proposal Component	Potential Maximum Score
A. Application Form	5
B. Proposal Narrative	120
C. Services Quality Narrative	15
D. Scope of Work	15
E. Budget	20
<b>Total</b>	<b>175</b>

# Sample: Notice of Subaward (NOSA)

Notice: The following pages provide sample versions of the Notice of Subaward document. These samples are for reference only and should not be considered as the final version of the document.



State of Nevada  
 Department of Health and Human Services  
**Division of Child & Family Services**  
 (hereinafter referred to as the Department)

Agency Ref. #: \_\_\_\_\_  
 Budget Account: \_\_\_\_\_  
 Category: \_\_\_\_\_  
 GL: \_\_\_\_\_  
 Job Number: \_\_\_\_\_

## NOTICE OF SUBAWARD

<b>Program Name:</b>		<b>Subrecipient's Name:</b>																			
<b>Address:</b>		<b>Address:</b>																			
<b>Subaward Period:</b>		<b>Subrecipient's:</b>																			
		EIN: _____ Vendor #: _____ Dun & Bradstreet: _____																			
<b>Purpose of Award:</b>																					
<b>Region(s) to be served:</b> <input type="checkbox"/> Statewide <input type="checkbox"/> Specific county or counties:																					
<b>Approved Budget Categories:</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>1. Personnel</td><td></td></tr> <tr><td>2. Travel/Training</td><td></td></tr> <tr><td>3. Operating</td><td></td></tr> <tr><td>4. Equipment</td><td></td></tr> <tr><td>5. Contractual/Consultant</td><td></td></tr> <tr><td>6. Other</td><td></td></tr> <tr><td><b>TOTAL DIRECT COSTS</b></td><td></td></tr> <tr><td>7. Indirect Costs</td><td></td></tr> <tr><td><b>TOTAL APPROVED BUDGET</b></td><td style="text-align: right;"><b>\$0.00</b></td></tr> </table>		1. Personnel		2. Travel/Training		3. Operating		4. Equipment		5. Contractual/Consultant		6. Other		<b>TOTAL DIRECT COSTS</b>		7. Indirect Costs		<b>TOTAL APPROVED BUDGET</b>	<b>\$0.00</b>	<b>FEDERAL AWARD COMPUTATION:</b> Total Obligated by this Action: \$ 0.00 Cumulative Prior Awards this Budget Period: \$ 0.00 Total Federal Funds Awarded to Date: \$ 0.00  Match Required <input type="checkbox"/> Y <input checked="" type="checkbox"/> N Amount Required this Action: \$ 0.00 Amount Required Prior Awards: \$ Total Match Amount Required: \$ Research and Development (R&D) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N Federal Budget Period: N/A Federal Project Period: N/A	
1. Personnel																					
2. Travel/Training																					
3. Operating																					
4. Equipment																					
5. Contractual/Consultant																					
6. Other																					
<b>TOTAL DIRECT COSTS</b>																					
7. Indirect Costs																					
<b>TOTAL APPROVED BUDGET</b>	<b>\$0.00</b>																				
<b>FOR AGENCY USE, ONLY</b>																					
<b>Source of Funds</b>	<b>% Funds:</b>	<b>CFDA:</b>	<b>FAIN:</b>																		
Victims of Domestic Violence Fees	100%																				
		<b>Federal Grant #:</b>	<b>Federal Grant Award Date by Federal Agency:</b>																		
<b>Agency Approved Indirect Rate:</b> 0.00%		<b>Subrecipient Approved Indirect Rate:</b>																			
<b>Terms and Conditions:</b>																					
In accepting these grant funds, it is understood that: 1. This award is subject to the availability of appropriate funds. 2. Expenditures must comply with any statutory guidelines, the DHHS Grant Instructions and Requirements, and the State Administrative Manual. 3. Expenditures must be consistent with the narrative, goals and objectives, and budget as approved and documented. 4. Subrecipient must comply with all applicable Federal regulations. 5. Quarterly progress reports are due by the 15 <sup>th</sup> of each month following the end of the quarter, unless specific exceptions are provided in writing by the grant administrator. 6. Financial Status Reports and Requests for Funds must be submitted monthly by the 15 <sup>th</sup> of each month following the month requesting, unless specific exceptions are provided in writing by the grant administrator.																					
<b>Incorporated Documents:</b>		<b>Section E:</b> Audit Information Request;																			
<b>Section A:</b> Grant Conditions and Assurances;		<b>Section F:</b> Current/Former State Employee Disclaimer;																			
<b>Section B:</b> Description of Services, Scope of Work and Deliverables;		<b>Section G:</b> DHHS Confidentiality Addendum; and																			
<b>Section C:</b> Budget and Financial Reporting Requirements;		<b>Addendum A:</b> Victims of Domestic Violence Assurance																			
<b>Section D:</b> Request for Reimbursement;																					
<b>Authorized Subrecipient Official's Name and Title</b>	<b>Signature</b>		<b>Date</b>																		
Grants & Project Analyst II																					
Administrator, Division of Child & Family Services																					

**\*\* SAMPLE NOSA – DO NOT RESPOND OR SIGN \*\***

## SAMPLE SECTION A

### GRANT CONDITIONS AND ASSURANCES

#### General Conditions

1. Nothing contained in this Agreement is intended to, or shall be construed in any manner, as creating or establishing the relationship of employer/employee between the parties. The Recipient shall at all times remain an "independent contractor" with respect to the services to be performed under this Agreement. The Department of Health and Human Services (hereafter referred to as "Department") shall be exempt from payment of all Unemployment Compensation, FICA, retirement, life and/or medical insurance and Workers' Compensation Insurance as the Recipient is an independent entity.
2. The Recipient shall hold harmless, defend and indemnify the Department from any and all claims, actions, suits, charges and judgments whatsoever that arise out of the Recipient's performance or nonperformance of the services or subject matter called for in this Agreement.
3. The Department or Recipient may amend this Agreement at any time provided that such amendments make specific reference to this Agreement, and are executed in writing, and signed by a duly authorized representative of both organizations. Such amendments shall not invalidate this Agreement, nor relieve or release the Department or Recipient from its obligations under this Agreement.
  - The Department may, in its discretion, amend this Agreement to conform with federal, state or local governmental guidelines, policies and available funding amounts, or for other reasons. If such amendments result in a change in the funding, the scope of services, or schedule of the activities to be undertaken as part of this Agreement, such modifications will be incorporated only by written amendment signed by both the Department and Recipient.
4. Either party may terminate this Agreement at any time by giving written notice to the other party of such termination and specifying the effective date thereof at least 30 days before the effective date of such termination. Partial terminations of the Scope of Work in Section B may only be undertaken with the prior approval of the Department. In the event of any termination for convenience, all finished or unfinished documents, data, studies, surveys, reports, or other materials prepared by the Recipient under this Agreement shall, at the option of the Department, become the property of the Department, and the Recipient shall be entitled to receive just and equitable compensation for any satisfactory work completed on such documents or materials prior to the termination.
  - The Department may also suspend or terminate this Agreement, in whole or in part, if the Recipient materially fails to comply with any term of this Agreement, or with any of the rules, regulations or provisions referred to herein; and the Department may declare the Recipient ineligible for any further participation in the Department's grant agreements, in addition to other remedies as provided by law. In the event there is probable cause to believe the Recipient is in noncompliance with any applicable rules or regulations, the Department may withhold funding.

#### Grant Assurances

A signature on the cover page of this packet indicates that the applicant is capable of and agrees to meet the following requirements, and that all information contained in this proposal is true and correct.

1. Adopt and maintain a system of internal controls which results in the fiscal integrity and stability of the organization, including the use of Generally Accepted Accounting Principles (GAAP).
2. Compliance with state insurance requirements for general, professional, and automobile liability; workers' compensation and employer's liability; and, if advance funds are required, commercial crime insurance.
3. These grant funds will not be used to supplant existing financial support for current programs.
4. No portion of these grant funds will be subcontracted without prior written approval unless expressly identified in the grant agreement.
5. Compliance with the requirements of the Civil Rights Act of 1964, as amended, and the Rehabilitation Act of 1973, P.L. 93-112, as amended, and any relevant program-specific regulations, and shall not discriminate against any recipient or employee because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions).
6. Compliance with the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted there under contained in 28 CFR part 35.
7. Compliance with the Clean Air Act (42 U.S.C. 7401-7671q.) and the Federal Water Pollution Control Act (33 U.S.C. 1251-1387), as amended— Contracts and subgrants of amounts in excess of \$150,000.00 must contain a provision that requires the non-Federal awardee to agree to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act (42 U.S.C. 7401-7671q) and the Federal Water Pollution Control Act as amended (33 U.S.C. 1251-1387). Violations must be reported to the Federal awarding agency and the Regional Office of the Environmental Protection Agency (EPA).
8. Compliance with Title 2 of the Code of Federal Regulations (CFR) and any guidance in effect from the Office of Management and Budget (OMB) related (but not limited to) audit requirements for subrecipients that expend \$750,000.00 or more in Federal awards during the subrecipient's fiscal year must have an annual audit prepared by an independent auditor in accordance with the terms and requirements of the appropriate circular. **To acknowledge this requirement, Section E of this notice of subaward must be completed.**

9. Certification that neither the Recipient nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency. This certification is made pursuant to regulations implementing Executive Order 12549, Debarment and Suspension, 28 C.F.R. pt. 67 § 67.510, as published as pt. VII of May 26, 1988, Federal Register (pp. 19150-19211).
10. No funding associated with this grant will be used for lobbying.
11. Disclosure of any existing or potential conflicts of interest relative to the performance of services resulting from this grant award.
12. Provision of a work environment in which the use of tobacco products, alcohol, and illegal drugs will not be allowed.
13. An organization receiving grant funds through the Nevada Department of Health and Human Services shall not use grant funds for any activity related to the following:
  - Any attempt to influence the outcome of any federal, state or local election, referendum, initiative or similar procedure, through in-kind or cash contributions, endorsements, publicity or a similar activity.
  - Establishing, administering, contributing to or paying the expenses of a political party, campaign, political action committee or other organization established for the purpose of influencing the outcome of an election, referendum, initiative or similar procedure.
  - Any attempt to influence:
    - The introduction or formulation of federal, state or local legislation; or
    - The enactment or modification of any pending federal, state or local legislation, through communication with any member or employee of Congress, the Nevada Legislature or a local governmental entity responsible for enacting local legislation, including, without limitation, efforts to influence State or local officials to engage in a similar lobbying activity, or through communication with any governmental official or employee in connection with a decision to sign or veto enrolled legislation.
  - Any attempt to influence the introduction, formulation, modification or enactment of a federal, state or local rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity through communication with any officer or employee of the United States Government, the State of Nevada or a local governmental entity, including, without limitation, efforts to influence state or local officials to engage in a similar lobbying activity.
  - Any attempt to influence:
    - The introduction or formulation of federal, state or local legislation;
    - The enactment or modification of any pending federal, state or local legislation; or
    - The introduction, formulation, modification or enactment of a federal, state or local rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity, **by preparing, distributing or using** publicity or propaganda, or by urging members of the general public or any segment thereof to contribute to or participate in any mass demonstration, march, rally, fundraising drive, lobbying campaign or letter writing or telephone campaign.
  - Legislative liaison activities, including, without limitation, attendance at legislative sessions or committee hearings, gathering information regarding legislation and analyzing the effect of legislation, when such activities are carried on in support of or in knowing preparation for an effort to engage in an activity prohibited pursuant to subsections 1 to 5, inclusive.
  - Executive branch liaison activities, including, without limitation, attendance at hearings, gathering information regarding a rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity and analyzing the effect of the rule, regulation, executive order, program, policy or position, when such activities are carried on in support of or in knowing preparation for an effort to engage in an activity prohibited pursuant to subsections 1 to 5, inclusive.
14. An organization receiving grant funds through the Nevada Department of Health and Human Services may, to the extent and in the manner authorized in its grant, use grant funds for any activity directly related to educating persons in a nonpartisan manner by providing factual information in a manner that is:
  - Made in a speech, article, publication, or other material that is distributed and made available to the public, or through radio, television, cable television or other medium of mass communication; and
  - Not specifically directed at:
    - Any member or employee of Congress, the Nevada Legislature or a local governmental entity responsible for enacting local legislation;
    - Any governmental official or employee who is or could be involved in a decision to sign or veto enrolled legislation; or
    - Any officer or employee of the United States Government, the State of Nevada or a local governmental entity who is involved in introducing, formulating, modifying or enacting a Federal, State or local rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity.

This provision does not prohibit a recipient or an applicant for a grant from providing information that is directly related to the grant or the application for the grant to the granting agency.

To comply with reporting requirements of the Federal Funding and Accountability Transparency Act (FFATA), the subrecipient agrees to provide the Department with copies of all contracts, subgrants, and or amendments to either such documents, which are funded by funds allotted in this agreement. **Compliance with this section is acknowledged by signing the subaward cover page of this packet.**

**SAMPLE SECTION B**

**Description of Services, Scope of Work and Deliverables**

**Subrecipient**, hereinafter referred to as Subrecipient, agrees to provide the following services and reports according to the identified timeframes:

**Scope of Work for Subrecipient**

Crater Lake Victim Advocacy, hereinafter referred to as Subrecipient, agrees to provide the following services and reports according to the identified timeframes:

**Child Abuse Scope of Work for Crater Lake Victim Advocacy**

<b>Goal 1: Assist 200 victims in becoming self-sufficient.</b>					
<b>Target Number</b>	<b>Target Number Duplicated?</b>	<b>Objectives</b>	<b>Activities</b>	<b>Due Date</b>	<b>Documentation Needed for Measurement</b>
<b>100</b>	No	1. Provide advocacy	1.1 Operate hotline 1.2 Crisis intervention 1.3 Safety planning 1.4 Basic needs assessment	6/30/26	1. Electronic records system with ability to track victims who received advocacy services.
<b>50</b>	No	2. Provide education on criminal justice process	2.1 VOCA compensation education 2.2 (TPO) education 2.3 Legal resources education and referral	6/30/26	2. Case notes documenting information provided and referrals made
<b>50</b>	Yes, with ML Grant	3. Provide weekly life skills classes for victims.	3.1 Parenting classes 3.2 Budgeting/debt management classes 3.3 Employment readiness classes	6/30/26	3. Group sign-in sheets
<b>Total Service Numbers to be Reported</b>					<b>200</b>

**Underserved Scope of Work for Crater Lake Victim Advocacy**

<b>Goal 2: Assist 50 victims to improve mental health related to victimization.</b>					
<b>Target Number</b>	<b>Target Number Duplicated?</b>	<b>Objectives</b>	<b>Activities</b>	<b>Due Date</b>	<b>Documentation Needed for Measurement</b>
<b>20</b>	No	1. Provide mental health counseling	1.1 Psychiatric evaluation 1.2 Counseling sessions	6/30/26	1. Paper counseling charts with case notes.
<b>30</b>	No	2. Provide case management	2.1 Complete Social history 2.2 Case plans 2.3 Referrals	6/30/26	2. System tracking number of victims enrolled
<b>Total Service Numbers to be Reported</b>					<b>50</b>

**SAMPLE SECTION C**

**Budget and Financial Reporting Requirements**

Identify the source of funding on all printed documents purchased or produced within the scope of this subaward, using a statement similar to: "This publication (journal, article, etc.) was supported by the Nevada Department of Health and Human Services from Victims of Domestic Violence Fees. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Department."

Any activities performed under this subaward shall acknowledge the funding was provided through the Department by Victims of Domestic Violence Fees.

Subrecipient agrees to adhere to the following budget:

<b>Approved Budget Categories:</b>	
1. Personnel	
2. Travel/Training	
3. Operating	
4. Equipment	
5. Contractual/Consultant	
6. Other	
<b>TOTAL DIRECT COSTS</b>	
7. Indirect Costs	
<b>TOTAL APPROVED BUDGET</b>	<b>\$0.00</b>

- Department of Health and Human Services policy allows no more than 10% flexibility of the total not to exceed amount of the subaward, within the approved Scope of Work/Budget. Subrecipient will obtain written permission to redistribute funds within categories. **Note: the redistribution cannot alter the total amount of the subaward. Modifications in excess of 10% require a formal amendment.**
- Equipment purchased with these funds belongs to the federal program from which this funding was appropriated and shall be returned to the program upon termination of this agreement.
- Travel expenses, per diem, and other related expenses must conform to the procedures and rates allowed for State officers and employees. It is the Policy of the Board of Examiners to restrict contractors/ Subrecipients to the same rates and procedures allowed State Employees. The State of Nevada reimburses at rates comparable to the rates established by the US General Services Administration, with some exceptions (State Administrative Manual 0200.0 and 0320.0).
- "The program Contract Monitor or Program Manager shall, when federal funding requires a specific match, maintenance of effort (MOE), "in-kind", or earmarking (set-aside) of funds for a specific purpose, have the means necessary to identify that the match, MOE, "in-kind", or earmarking (set-aside) has been accomplished at the end of the grant year. If a specific vendor or subrecipient has been identified in the grant application to achieve part or all of the match, MOE, "in-kind", or earmarking (set-aside), then this shall also be identified in the scope of work as a requirement and a deliverable, including a report of accomplishment at the end of each quarter to document that the match, MOE, "in-kind", or earmarking (set-aside) was achieved. These reports shall be held on file in the program for audit purposes, and shall be furnished as documentation for match, MOE, "in-kind", or earmarking (set-aside) reporting on the Financial Status Report (FSR) 90 days after the end of the grant period."

**The Subrecipient agrees to:**

- Request reimbursement according to the schedule specified below for actual expenses related to the Scope of Work during the subaward period.
  - Total reimbursement through this subaward will not exceed \$ **Enter Total Amount**.
  - Requests for Reimbursement will be accompanied by supporting documentation, including a line item description of expenses incurred.
  - Additional expenditure detail and/or supporting documentation will be provided to the Department upon request.
  - Expenditures must comply with any statutory guidelines, the DHHS Grant Instructions and Requirements, and the State Administrative Manual.
- Provide a complete financial accounting of all expenditures to the Department within 30 days of the CLOSE OF THE SUBAWARD PERIOD.
  - Any un-obligated funds shall be returned to the Department at that time, or if not already requested, shall be deducted from the final award.
  - Any work performed after the SUBAWARD PERIOD will not be reimbursed.
  - If a Request for Reimbursement (RFR) is received after the 30-day closing period, the Department may not be able to provide reimbursement.
  - If a credit is owed to the Department after the 30-day closing period, the funds must be returned to the Department within 30 days of identification.

**The Department agrees to:**

- Identify specific items the program must provide or accomplish to ensure successful completion of this project.
- Provide technical assistance, upon request from the Subrecipient.
- Issue prior approval of reports or documents to be developed.

**Both parties understand:**

- All reports of expenditures and requests for reimbursement processed by the Department are SUBJECT TO AUDIT.
- This subaward agreement may be TERMINATED by either party prior to the date set forth on the Notice of Subaward, provided the termination shall not be effective until 30 days after a party has served written notice upon the other party. This agreement may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Agreement shall be terminated immediately if for any reason the Department, state, and/or federal funding ability to satisfy this Agreement is withdrawn, limited, or impaired.

**Financial Reporting Requirements**

- A Request for Reimbursement is due on a monthly basis, based on the terms of the subaward agreement, no later than the 15<sup>th</sup> of the month.
- Reimbursement is based on actual expenditures with accompanying proof of payment.
- Payment will not be processed unless all reporting requirements are current.
- Reimbursement may only be claimed for expenditures approved within the Notice of Subaward.
- The Department reserves the right to hold reimbursement under this subaward until any delinquent forms, reports, and expenditure documentations are submitted to and accepted by the Department.

**Department of Health and Human Services  
Division of Child and Family Services - Grants Management Unit  
Request for Funds Reimbursement and Financial Reporting**

Agency Ref #   
 Budget Account: \_\_\_\_\_  
 Category \_\_\_\_\_  
 Job #   
 ALN \_\_\_\_\_

**SAMPLE SECTION D  
Request for Reimbursement**

<b>Program Name:</b>	<b>Subrecipient Name:</b>
<b>Address:</b> 4126 Technology Way 3rd Floor Carson City, NV 89706-2009	<b>Address:</b>
<b>Subgrant Period:</b>	<b>Subrecipient's:</b> EIN: Vendor #:

**REQUEST FOR REIMBURSEMENT and FINANCIAL REPORT  
(must be accompanied by cost allocation and back-up documentation)**

Month:	Calendar Year:	Original	Revised			
Approved Budget Category	A Approved Budget	B Total Prior Requests	C Current Request	D Year to Date Total	E Budget Balance	F Percent Expended
1 Personnel	\$0.00	\$0.000	\$0.000	\$0.000	\$0.00	-
2 Travel/Training	\$0.00	\$0.000	\$0.000	\$0.000	\$0.00	-
3 Operating	\$0.00	\$0.000	\$0.000	\$0.000	\$0.00	-
4 Equipment	\$0.00	\$0.000	\$0.000	\$0.000	\$0.00	-
5 Contractual/Consultant	\$0.00	\$0.000	\$0.000	\$0.000	\$0.00	-
6 Other	\$0.00	\$0.000	\$0.000	\$0.000	\$0.00	-
7 Indirect	\$0.00	\$0.000	\$0.000	\$0.000	\$0.00	-
<b>Total</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>-</b>

**Additional Financial Reporting  
(must be accompanied by cost allocation and back-up documentation)**

Budget Item	Required Amount	Total Prior Months	Current Amount	Year-to-Date Total	Budget Balance	Percent Provided
1 NO MATCH REQUIRED	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-

I, an authorized signatory for the agency, certify to the best of my knowledge and belief that this report is true, complete and accurate; that the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the grant award; and that the amount of this request is not in excess of current needs, or cumulatively for the grant term, in excess of the total approved grant award. I am aware that any false, fictitious or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims, or otherwise. I verify that the cost allocation and backup documentation attached is correct. I acknowledge that all costs included in this RFF are allowable, allocable, necessary, and reasonable and any questioned costs remain my agencies fiscal responsibility.

Authorized Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE ONLY - DEPARTMENT OF HEALTH AND HUMAN SERVICE - OFFICE USE ONLY**

Program contact necessary?  Yes  No Contact Person: \_\_\_\_\_

Reason for contact: \_\_\_\_\_

Recommended for Payment By: \_\_\_\_\_ Date: \_\_\_\_\_

Fiscal Review/Approval By: \_\_\_\_\_ Date: \_\_\_\_\_

**SAMPLE SECTION E**

**Audit Information Request**

1. Non-Federal entities that **expend** \$750,000.00 or more in total federal awards are required to have a single or program-specific audit conducted for that year, in accordance with 2 CFR § 200.501(a).
2. Did your organization expend \$750,000.00 or more in all federal awards during your organization's most recent fiscal year? YES  NO
3. When does your organization's fiscal year end? \_\_\_\_\_
4. What is the official name of your organization? \_\_\_\_\_
5. How often is your organization audited? \_\_\_\_\_
6. When was your last audit performed? \_\_\_\_\_
7. What time-period did your last audit cover? \_\_\_\_\_
8. Which accounting firm conducted your last audit? \_\_\_\_\_

**Compliance with this section is acknowledged by signing the subaward cover page of this packet.**

**SAMPLE SECTION F**

**Notification of Utilization of Current or Former State Employee**

For the purpose of State compliance with NRS 333.705, subrecipient represents and warrants that if subrecipient, or any employee of subrecipient who will be performing services under this subaward, is a current employee of the State or was employed by the State within the preceding 24 months, subrecipient has disclosed the identity of such persons, and the services that each such person will perform, to the issuing Agency. Subrecipient agrees they will not utilize any of its employees who are Current State Employees or Former State Employees to perform services under this subaward without first notifying the Agency and receiving from the Agency approval for the use of such persons. This prohibition applies equally to any subcontractors that may be used to perform the requirements of the subaward. The provisions of this section do not apply to the employment of a former employee of an agency of this State who is not receiving retirement benefits under the Public Employees' Retirement System (PERS) during the duration of the subaward.

Are any current or former employees of the State of Nevada assigned to perform work on this subaward?

YES  If "YES", list the names of any current or former employees of the State and the services that each person will perform.

NO  Subrecipient agrees that if a current or former state employee is assigned to perform work on this subaward at any point after execution of this agreement, they must receive prior approval from the Department.

Name

Services

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**Subrecipient agrees that any employees listed cannot perform work until approval has been given from the Department.**

**Compliance with this section is acknowledged by signing the subaward cover page of this packet.**

**\*\* SAMPLE NOSA – DO NOT RESPOND OR SIGN \*\***

**SAMPLE SECTION G**

**Confidentiality Addendum**

BETWEEN

**Nevada Department of Health and Human Services**

Hereinafter referred to as "Department"

and

**Subrecipient**

Hereinafter referred to as "Subrecipient"

This CONFIDENTIALITY ADDENDUM (the Addendum) is hereby entered into between Department and Subrecipient.

WHEREAS, Subrecipient may have access, view or be provided information, in conjunction with goods or services provided by Subrecipient to Department that is confidential and must be treated and protected as such.

NOW, THEREFORE, Department and Subrecipient agree as follows:

I. **DEFINITIONS**

The following terms shall have the meaning ascribed to them in this Section. Other capitalized terms shall have the meaning as described to them in the context in which they first appear.

1. **Agreement** shall refer to this document and that agreement to which this addendum is made a part.
2. **Confidential Information** shall mean any individually identifiable information, health information or other information in any form or media.
3. **Subrecipient** shall mean the name of the organization described above.
4. **Required by Law** shall mean a mandate contained in law that compels a use or disclosure of information.

II. **TERM**

The term of this Addendum shall commence as of the effective date of the primary inter-local or other agreement and shall expire when all information provided by Department or created by Subrecipient from that confidential information is destroyed or returned, if feasible, to Department pursuant to Clause VI.

III. **LIMITS ON USE AND DISCLOSURE ESTABLISHED BY TERMS OF CONTRACT OR LAW**

Subrecipient hereby agrees it shall not use or disclose the confidential information provided, viewed or made available by Department for any purpose other than as permitted by Agreement or required by law.

IV. **PERMITTED USES AND DISCLOSURES OF INFORMATION BY SUBRECIPIENT**

Subrecipient shall be permitted to use and/or disclose information accessed, viewed or provided from Department for the purpose(s) required in fulfilling its responsibilities under the primary agreement.

V. **USE OR DISCLOSURE OF INFORMATION**

Subrecipient may use information as stipulated in the primary agreement if necessary for the proper management and administration of Subrecipient; to carry out legal responsibilities of Subrecipient; and to provide data aggregation services relating to the health care operations of Department. Subrecipient may disclose information if:

1. The disclosure is required by law; or
2. The disclosure is allowed by the agreement to which this Addendum is made a part; or
3. The Subrecipient has obtained written approval from the Department.

VI. **OBLIGATIONS OF SUBRECIPIENT**

1. **Agents and Subcontractors.** Subrecipient shall ensure by subcontract that any agents or subcontractors to whom it provides or makes available information, will be bound by the same restrictions and conditions on the access, view or use of confidential information that apply to Subrecipient and are contained in Agreement.

2. **Appropriate Safeguards.** Subrecipient will use appropriate safeguards to prevent use or disclosure of confidential information other than as provided for by Agreement.
3. **Reporting Improper Use or Disclosure.** Subrecipient will immediately report in writing to Department any use or disclosure of confidential information not provided for by Agreement of which it becomes aware.
4. **Return or Destruction of Confidential Information.** Upon termination of Agreement, Subrecipient will return or destroy all confidential information created or received by Subrecipient on behalf of Department. If returning or destroying confidential information at termination of Agreement is not feasible, Subrecipient will extend the protections of Agreement to that confidential information as long as the return or destruction is infeasible. All confidential information of which the Subrecipient maintains will not be used or disclosed.

**IN WITNESS WHEREOF**, Subrecipient and the Department have agreed to the terms of the above written Addendum as of the effective date of the agreement to which this Addendum is made a part.

**Compliance with this section is acknowledged by signing the subaward cover page of this packet.**

**SECTION H**  
**Matching Funds Agreement**

This Matching Funds Agreement is entered into between the Nevada Department of Health and Human Services (referred to as "Department") and Refuge for Women (referred to as "Subrecipient").

<b>Program Name</b>	VOCA Victim Assistance	<b>Subrecipient Name</b>	
<b>Federal Grant Number</b>		<b>Subaward Number</b>	
<b>Federal Amount</b>		<b>Contact Name</b>	
<b>Non-Federal (Match) Amount</b>		<b>Address</b>	
<b>Total Project</b>			
<b>Performance Period</b>	July 1, 2025 – June 30, 2026		

Under the terms and conditions of this Agreement, the Subrecipient agrees to complete the Project as described in the Description of Services, Scope of Work and Deliverables. Non-Federal (Match) funding is required to be documented and submitted with the Request for Reimbursement and will be verified during subrecipient monitoring. Non-Federal (Match) funding must be in compliance with CFR 200.306.

**§ 200.306 Cost sharing or matching.**

(b) For all Federal awards, any shared costs or matching funds and all contributions, including cash and third-party in-kind contributions, must be accepted as part of the non-Federal entity's cost sharing or matching when such contributions meet all the following criteria:

- (1) Are verifiable from the non-Federal entity's records.
- (2) Are not included as contributions for any other Federal award.
- (3) Are necessary and reasonable for accomplishment of project or program objectives.
- (4) Are allowable under Subpart E - Cost Principles of this part.
- (5) Are not paid by the Federal Government under another Federal award, except where the Federal statute authorizing a program specifically provides that Federal funds made available for such program can be applied to matching or cost sharing requirements of other Federal programs.
- (6) Are provided for in the approved budget when required by the Federal awarding agency; and
- (7) Conform to other provisions of this part, as applicable.

**FINANCIAL SUMMARY FOR MATCHING FUNDS**

**Total Amount Awarded**  
**Required Match Percentage**                      20%  
**Total Required Match**                                 \$

Approved Budget Category		Budgeted Match	
1	Personnel	\$	
2	Travel/Training	\$	
3	Operating	\$	
4	Equipment	\$	
5	Contractual/Consultant	\$	
6	Training	\$	
7	Other	\$	
	<b>Total</b>	\$	

Compliance with this section is acknowledged by signing the subaward cover page of this packet.

## SAMPLE APPENDIX A

### **Victims of Domestic Violence Assurance**

As the duly authorized representatives of the applicant organization, we certify that the applicant:

1. The organization is a non-profit corporation, incorporated and qualified in the State of Nevada and has filed all required reports with the Secretary of State and all filings are current.
2. The organization provides services exclusively for victims of domestic violence and only within the State of Nevada.
3. The organization, if operating a shelter, will make the shelter available to all programs throughout the State of Nevada.
4. The organization will provide shelter to victims any day, at any hour, except those counties whose population is less than 100,000.
5. The organization will provide facilities where food can be stored and prepared, except those counties whose population is less than 100,000.
6. The organization must be able to provide a telephone service capable of receiving emergency calls on any day, at any hour.
7. The organization will provide counseling or make referrals for counseling, for victims or spouses of victims and their children.
8. The organization will assist victims in obtaining legal, medical, psychological or vocational help.
9. The organization will provide education and training for members of the community on matters which relate to domestic violence.

Compliance with this section is acknowledged by signing the subaward cover page of this packet.