

APPLICATION FOR CONTINUATION FUNDING FOR VAWA/STOP RELATED SERVICES FY 2015-2016

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I. APPLICATION PROCESS INFORMATION

A. Background

The Florida Coalition Against Domestic Violence (FCADV), contracts with the Florida Department of Children and Families to administer and manage the funding to victim service providers, law enforcement agencies, prosecution offices, court systems and other agencies providing services relating to domestic violence, sexual assault and stalking issues. In accordance with these responsibilities, each provider is required to submit an application providing details about the services to be provided and the budget

required to fund these services. Based on these applications, FCADV enters into subcontracts with the providers for the delivery of services. The requirements for the application process for 2015-2016 are outlined in this document.

B. Who May Apply

FCADV invites to apply for continuation funding those providers who currently receive VAWA/STOP funds on July 1, 2014 – June 30, 2015 cycle.

C. How to Apply

All instructions, forms, and guidance material needed to submit an application are available on the FCADV website: <u>http://www.fcadv.org/fy.php</u>. Each provider should download the forms needed and save them as new files for the purposes of completing the application.

Please provide FCADV with one electronic copy of the application, including all appropriate documentation outlined in these instructions.

The electronic version of the entire application must be sent via your agency's box.net account. The electronic version of the application must be submitted using a combination of Word, Excel, and PDF files.

Applications must be received by FCADV by 11:59 PM (E.S.T.) on May 22, 2015.

Applications should be uploaded to your agency's box.net account. Please contact your contract manager for username and passwords if necessary.

D. Application Review Process

FCADV will review all applications; contract managers will assist each provider regarding any questions or additional information that may be needed.

E. Technical Assistance

A list of guidelines is posted on the FCADV website at: <u>www.fcadv.org/quality/guidelines</u>. The guidelines page will be updated throughout the application process to answer any questions that may arise. Providers are also encouraged to refer to the guidelines page if they have a question regarding the completion of their application.

In addition, providers may contact the Contract Managers at (850) 425-2749 regarding the instructions, forms, or completion of their application. Providers may also email questions to <u>Contract_Manager@fcadv.org</u>.

II. WHAT AN APPLICATION MUST INCLUDE

The application must include the following information listed below in sections A-H. The requested information should be submitted in the order below for easy review. Each section shall be clearly labeled and correspond with headings A-H. Each provider will be required to submit a new budget.

A. Provider Contact Information

The provider shall provide addresses, telephone numbers, fax numbers, and email addresses for all staff that help facilitate the provider's operations. This information shall be supplied using the *Provider Contact Information Form*. A copy of this form is located on the FCADV web site: <u>http://www.fcadv.org/fy.php</u>.

B. Acknowledgement and Certification

This document shall be reviewed and signed by the authorized official of the business office.

It is important to note that by signing the Acknowledgment and Certification, the provider is agreeing to:

- Terms and Conditions as outlined
- Non-supplanting of funding agreement
- Certification that all information in the application is complete and correct

C. List of Anticipated Subcontractors

The provider must provide a listing of any subcontractors that are anticipated for the contract period. For each anticipated subcontractor, the provider must address the type of services to be provided by subcontract, and whether the service was provided under a subcontract for the FY 2015-2016 contract period. The name of the subcontractor, if known, must be provided. In the event the name of the subcontractor is not known at the time the application is submitted, the provider must provide a brief description of the process that will be used to identify and select the subcontractor. The list of anticipated subcontractors shall be supplied using the *Subcontractors Information Form*. A copy of this form is located on the FCADV web site: http://www.fcadv.org/fy.php.

D. Services Activity Narrative

A narrative is required to explain delivery of service(s) that your agency will be providing.

The narrative shall provide an overview of the services to be provided under this contract. The provider shall use the following page format requirement for the development of the services activity narrative:

- 1. Double spaced
- 2. 81/2 x 11 inch paper
- 3. One inch margins
- 4. Type no smaller than 11 point, Times New Roman or Arial font
- 5. No more than two (2) pages

The provider shall also provide information for any additional services to be provided.

E. Budget Information

Please be aware that budget figures are tentative and will not be finalized until after the legislative session when the final Appropriations Bill has been passed.

Funding Category

STOP Violence Against Women Act (VAWA/STOP)

Funds are allocated from the U.S. Department of Justice for victim service providers, prosecutors, law enforcement, and the courts to implement coordinated multidisciplinary approaches to address domestic violence, sexual assault, and stalking.

Match

STOP funds require a local match.

In order to receive STOP funding, service providers must provide match. STOP match must come from local dollars, either cash or in-kind. Federal dollars are not allowable to use as match. The formula for determining STOP match is: award amount divided by .75 multiplied by 25%.

a. Example: \$10,000 STOP grant funding divided by .75 X 25% = \$3,333 required matching funds. Total program budget would then equal \$13,333.

F. Inter-Agency Agreements

Copies of any Inter-Agency Agreements entered into between the provider and other organizations.

G. Civil Rights Compliance

The provider shall complete the Civil Rights Compliance Questionnaire as part of the application process. A copy of the Civil Rights Compliance Questionnaire is located on the FCADV web site at: <u>http://www.fcadv.org/quality/fy</u>

H. Insurance

Provide a copy of the current insurance certificate for your agency.