



NCAI Fund Victim Services Micro-grant Program

Step 2: Full Application Template #1

For a tribe that does not have a victim services program

Due date: August 21, 2020

Application Timeline and Requirements

- 1) Eligible applicants must complete **Step 1: Statement of Interest web form** (<https://tribalvictimservices.org/statement-of-interest/>).
- 2) The NCAI Fund will review all Statements of Interest to determine eligibility to apply.
- 3) Eligible applicants will be invited to complete **Step 2: Full Application on Monday, July 13, 2020**. Step 2 of the application requires a project proposal and summary budget. A detailed budget will be developed with technical assistance at a later date.
- 4) Step 2 is due on **August 21, 2020**.
- 5) If applying as a consortia or designee, Tribal Authorization documents will be required.
- 6) The Final Application will require applicants to identify their target service population and provide a detailed description of potential activities to be funded by a micro-grant.
- 7) Step 2 review will include the viability of the proposal, geographic distribution, and risk of non-compliance with federal statutes.
- 8) The Notice of Award will be sent by **October 2020**.

INSTRUCTIONS FOR USING THIS TEMPLATE

The questions from the NCAI Fund Victim Services Micro-grant Program Full Application (Step 2) are marked in bold text. The text that follows are sample answers for a hypothetical tribal applicant. You should tailor your answers to fit the unique circumstances and needs of your community. The Full Application requires a summary project proposal, but please provide as much detail as possible.

Your proposed activities must comply with the NCAI Fund Victim Services Micro-grant solicitation. Funding can be used for a wide range of program activities and services to crime victims, including conducting a needs assessment or developing a strategic plan, purchasing equipment or supplies, or other support for new or existing victim services programs. However, activities cannot include crime prevention activities, services for criminal offenders, or costs associated with law enforcement and prosecution. (See **Allowable and Unallowable Costs Chart:** https://tribalvictimservices.org/wp-content/uploads/2020/05/AppendixA_allowablecosts.pdf)

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NCAI FUND'S VICTIM SERVICES MICRO-GRANT PROGRAM

* All Fields are Required

This application is not editable once it is submitted. You can access technical assistance resources [here](#).

Status: In Progress

About the Funding & Eligibility

The NCAI Fund received an award from the U.S. Department of Justice (DOJ) Office for Victims of Crime (OVC) to make subgrants to eligible Indian tribes. The intent of this funding is to support tribal nations who have not been able to access the tribal set-aside funding from OVC previously. **Recipients of this funding will be required to comply with all applicable federal policies and regulations.**

Use of Funds

Funding can be used for a wide variety of activities related to supporting victims of crime in your community. Please reference the chart of allowable and unallowable costs.


With this funding, your tribal nation can:

- Assess the need for additional programming and services for victims of crime or develop a strategic plan to improve or expand existing victim services
- Purchase equipment and supplies necessary for victim services programming or victim services grant management.
- Implement program activities, including personnel costs, to support victims of crimes.

¹This funding opportunity is currently limited to those entities who have not received funding from OVC in FY 18 or FY 19. Entities who have applied to the OVC FY 2020 Tribal Victim Services Set-Aside Program **may apply** for this funding, as long as the proposed use of funding is for different activities than the FY 2020 Tribal Victim Services Set-Aside Program.

Applicant Tribe/Organization Information

Information on your organization's statement of interest has been auto-filled below. Please update any information that is no longer current and complete all required fields.

Entity Name Sample Applicant	Entity DUNS Number * 987654321	Applicant Organization Type *  Tribe	
Address *	City *	State * Georgia	Zip *

Applicant Tribe/Organization Point of Contact

Grant Admin

Grant Admin information cannot be edited via this application. If you need to make changes please [click here](#).

First Name	Last Name	Phone	Email
Sally	Sample	123-456-7890	ssample2220@gmail.com

Program Contact

First Name	Last Name	Phone	Email
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Authorization

Do you have the authority to apply for grants on behalf of your tribal nation?

Yes No

If you are submitting as a Consortium or Designee, which Tribal Nation(s) do you represent?

Attachments

If you are applying as a Consortium or Designee, you will be required to submit documentation showing that your organization has the authority to apply for this federal funding opportunity on the Tribe's behalf. If you have this authorization, please upload it below. If you do not have the required documentation, you will be required to submit it before receiving your Letter of Agreement.

Request Details

Briefly describe the issue that will be addressed through the grant funded program. Identify if there is a specific population being served (i.e. women, youth, elderly) and any current activities being conducted to support this population as crime victims. *

Please describe in detail how you would like to use the requested funding, including specific activities that will be conducted under this grant. *

This funding opportunity can be used to support a wide variety of programming and services for victims of crime in your community. Please select which activities your grant will include:

Needs Assessment *

Yes No

Have any victim services needs assessment activities been conducted in your community previously? If yes, please describe. *

Describe your tribe's plan for conducting the needs assessment, including how you will use the information to help crime victims *

Strategic Planning *

Yes No

Describe your tribe's plan for developing a strategic plan, including how the strategic plan may assist crime victims *

Would you like to receive additional resources to implement your tribe's strategic plan for crime victims *

Support for Victim Services *

Applicants should consider carefully whether all activities can be completed in the grant period, which will be from Oct. 1, 2020 - June 30, 2022. Please indicate the areas of service included in your proposed program (select all that apply): *

- Providing information to crime victims**
- Referral services for crime victims**
- Victim advocacy/accompaniment**
- Law enforcement interview advocacy/accompaniment**
- Intervention with employer, creditor, landlord or academic institution**
- Child and/or dependent care assistance**
- Transportation assistance**
- Interpreter services**
- Crisis intervention**
- Hotline/crisis line counseling**
- On-scene crisis response**
- Sexual Assault Response Team (SART) team development**
- Coordinated Community Response (CCR) team development**
- Updating tribal codes for victim services**
- Access to Traditional/Cultural Healing ceremonies for victims**
- Other**

If your proposed use of funding will support an existing victim services program, please describe your current victim services program. If this funding will be used to create a new victim services program, or if you are expanding your current victim services, please describe any planning or needs assessments you have already completed. *

Equipment and Supplies *

Yes No

Describe in detail what type of equipment and/or supplies you plan to purchase with the grant funds and

how these purchases will be used to advance your tribe's victim services programs. Please note that purchases must be made pursuant to your internal procurement policy that complies with federal law. If you do not have a procurement policy, technical assistance will be provided to help you develop one. *

Capabilities and Competencies

Who will be responsible for the day to day project implementation on this grant? Who will be responsible for financial management and procurement? Who will be responsible for reporting? Please include their title and number of years' experience. *

If staff will be hired for a position included in this grant, do you anticipate that the tribe will be able to recruit and hire this individual within the first three months of the grant? If not, please explain. *

Plan for Collecting Data Required for this Solicitation's Performance Measures If funded, the program will be required to submit a quarterly report of performance measurement data requested by OVC. Some of these measures include: Number of individuals receiving services Demographics of individuals receiving services (race, gender, age) Type of Victimization Number of requests or needs that may go unmet due to organizational capacity issues Do you anticipate any challenges collecting the required performance measurement data referenced above? *

Summary Budget

Indicate the amount of funding you are requesting under each budget category and include a brief description of how these funds will be spent. We anticipate that most awards will be between \$25,000-\$250,000. If you anticipate your project's actual need to be more than \$250,000 for your project, please explain in the space provided. In no case will an award exceed \$350,000. If funded, you will work with the NCAI Fund technical assistance team to complete a detailed budget for your program.

Please note that all summary budget fields require a value. Enter \$0 or N/A for any amount or description field that does not apply

Category	Amount	Description
Personnel *		
Fringe Benefits *		
Travel *		
Equipment/Supplies *		
Contracts and Consultants *		
Consultant/Contractor Travel *		
Other Costs *		
Indirect Costs *		
Total	\$170,825.20	

Sample Applicant acknowledges that if awarded, Sample Applicant will be required to comply with all applicable federal financial management policies and regulations. *

Yes No

Please note that if awarded an NCAI Fund Victim Services Micro-grant, you will be prompted to sign the Letter of Agreement electronically, using Sertifi. Please provide the name and contact information for the person who will sign the Letter of Agreement.

Signatory Title *

Signatory Name *

Signatory Email *

Please click here to request an alternate method of signing the letter of agreement.

This application is not editable once it is submitted. If you need to edit your application after submission please contact microgrants@ncai.org.