



OFFICE OF JUVENILE JUSTICE (OJJ)
**Juvenile Detention Alternatives
 Initiative Grant Application**

Please read all instructions carefully.

For assistance, contact the Department of Social and Health Services
 (DSHS) Office of Juvenile Justice at (360) 902-7526 or FAX (360) 902-7527

CONTRACT NUMBER	FOR OJJ USE ONLY
PROGRAM AREA	DATE STAMP

1. APPLICANT: DO NOT USE PERSON'S NAME

AGENCY NAME	TELEPHONE NUMBER	FAX NUMBER
STREET ADDRESS	CITY	STATE
MAILING ADDRESS	CITY	STATE
		ZIP CODE

2. IMPLEMENTING AGENCY: ENTER AGENCY, DEPARTMENT OR CONTRACTOR DIRECTLY IMPLEMENTING THE PROJECT (DO NOT USE PERSON'S NAME)

NAME	TELEPHONE NUMBER
STREET ADDRESS	FEDERAL EMPLOYER IDENTIFICATION NUMBER OR SOCIAL SECURITY NUMBER (MANDATORY FOR FEDERAL TAX PURPOSES)
CITY	STATE
	ZIP CODE

3. PROJECT TITLE: ENTER BRIEF, DESCRIPTIVE PROJECT TITLE (LIMITED TO THREE LINES)

4. APPLICANT'S AGREEMENT

The applicant is applying for a grant award in the amount shown in the proposed BUDGET SUMMARY (Section 8 of this application) for the purposes identified in this application. By signing and submitting this application, the applicant agrees that this document, together with the GENERAL TERMS AND CONDITIONS AND CERTIFICATIONS (Attachment A of this application), becomes an offer to contract with Washington State Department of Social and Health Services (DSHS or the Department) which, if accepted, binds the applicant to the following:

The applicant agrees that this offer becomes a binding contract when a copy of this page is signed by the OJJ Director and returned to the applicant together with an Approved Budget and Special Conditions form provided, however:

- a. In the event any budget category amount differs from the amount shown in Section 8 of this application, as modified by the Approved budget and Special Conditions, that amount shall be considered to be a counteroffer. The Department shall consider the counteroffer accepted by the applicant unless rejected in writing within 30 days after the date of mailing of such counteroffer by the Office of Juvenile Justice (hereinafter referred to as OJJ) to the applicant
- b. Upon acceptance of this offer/counteroffer, the applicant shall be referred to as the "Contractor" and the Contractor agrees to accept and abide by the special terms and conditions.

NAME AND TITLE OF AUTHORIZED OFFICER (PERSON WITH LEGAL AUTHORITY: COUNTY COMMISSIONERS' CHAIRMAN OF THE BOARD, MAYOR, CITY/TOWN MANAGER, AGENCY DIRECTOR)

APPLICANT'S SIGNATURE	DATE
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ACCEPTANCE OF OFFER COUNTEROFFER FOR DSHS <input type="checkbox"/> Acceptance <input type="checkbox"/> Non-acceptance	OJJ CONTRACTING OFFICER'S SIGNATURE	DATE
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5. PROJECT DIRECTOR: PERSON IN DIRECT CHARGE OF PROJECT (DAY-TO-DAY OPERATIONS AND PREPARATION OF REQUIRED PROGRESS REPORTS)

NAME	TELEPHONE NUMBER
STREET ADDRESS	FAX NUMBER
CITY	E-MAIL ADDRESS
	STATE
	ZIP CODE

6. FINANCIAL OFFICER: PERSON IN CHARGE OF FISCAL MATTERS (ACCOUNTING, FUNDS MANAGEMENT, EXPENDITURE, VERIFICATIONS, FINANCIAL REPORTS)

NAME	TELEPHONE NUMBER
STREET ADDRESS	FAX NUMBER
CITY	E-MAIL ADDRESS
	STATE
	ZIP CODE

Omission of any required information or certification may be cause for denial of the application. The Department shall take a final approval/disapproval action on all applications within 90 days of receipt by the Department of a conforming application, together with all required certifications. The Department shall not consider an application conforming unless the applicant has completed all items in accordance with instructions and has submitted the necessary certifications. The applicant must submit two signed completed applications to: OFFICE OF JUVENILE JUSTICE, DEPARTMENT OF SOCIAL AND HEALTH SERVICES, PO BOX 45828, OLYMPIA WA 98504-5828.

JDAI GRANT APPLICATION

AGENCY NAME	DATE																																								
PROJECT TITLE																																									
7. PROJECT PERIOD																																									
<p>A project period is one year and may not exceed one year except by prior agreement with the Department.</p> <p>Proposed project period is from _____ to _____</p>																																									
8. BUDGET SUMMARY																																									
<p>The proposed project budget is shown below. If the proposal is accepted for contracting, the budget on the Approved Budget and Special Conditions form supersedes the proposed budget shown below.</p> <p>The following items are allowable costs under this contract:</p> <ul style="list-style-type: none"> • Travel (JDAI Quarterly Meetings, State and National Conferences, Model Site Visits) • Local Coordination to implement the eight (8) JDAI strategies • Detention Alternatives Programs • Data Collection and Analysis • Indirect (up to 10% of direct charges), as noted below. 																																									
<p>BUDGET CATEGORIES</p> <p>Enter the category totals from Section 10. BUDGET DETAILS. The sum of categories A - F is entered as TOTAL DIRECT CHARGES. If indirect costs are claimed, enter the amount in G. These may not exceed ten (10) percent of the TOTAL DIRECT CHARGES. Add TOTAL DIRECT CHARGES and INDIRECT CHARGES, and enter the sum on TOTAL PROJECT COSTS line.</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">A. Personnel</td><td style="width:15%;"></td><td style="width:15%;"></td></tr> <tr><td style="padding: 2px;">B. Supplies</td><td></td><td></td></tr> <tr><td style="padding: 2px;">C. Other services and charges</td><td></td><td></td></tr> <tr><td style="padding: 2px;">D. Capital outlay/equipment</td><td></td><td></td></tr> <tr><td style="padding: 2px;">E. Travel</td><td></td><td></td></tr> <tr><td style="padding: 2px;">F. Contractual services</td><td></td><td></td></tr> <tr><td style="padding: 2px;">TOTAL DIRECT CHARGES</td><td></td><td></td></tr> <tr><td style="padding: 2px;">G. Indirect charges</td><td></td><td></td></tr> <tr><td style="padding: 2px;">TOTAL PROJECT COST</td><td></td><td></td></tr> </table>	A. Personnel			B. Supplies			C. Other services and charges			D. Capital outlay/equipment			E. Travel			F. Contractual services			TOTAL DIRECT CHARGES			G. Indirect charges			TOTAL PROJECT COST															
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<p>SOURCE OF FUNDS</p> <p>1. May not exceed amount approved by the Washington State Partnership Council on Juvenile Justice.</p> <p>2. Must be funds specifically appropriated for project in applicant's budget</p> <p>Project income must be applied to project operational costs or deducted from the grant award. It is important that all anticipated project income be included in the budget.</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">1. Federal</td><td style="width:15%;"></td><td style="width:15%;"></td><td style="width:15%;"></td><td style="width:15%;"></td></tr> <tr><td style="padding: 2px;">2. Match</td><td></td><td></td><td></td><td style="text-align: right;">%</td></tr> <tr><td style="padding: 2px;"></td><td></td><td></td><td></td><td style="text-align: right;">%</td></tr> <tr><td style="padding: 2px;">TOTAL PROJECT FUNDS</td><td></td><td></td><td></td><td style="text-align: right;">%</td></tr> </table>	1. Federal					2. Match				%					%					%					%					%					%	TOTAL PROJECT FUNDS				%
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9. PROJECT SUMMARY: GIVE A BRIEF NARRATIVE SUMMARY OF THE PROJECT.																																									

JDAI GRANT APPLICATION

AGENCY NAME	DATE
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PROJECT TITLE

10. BUDGET DETAILS: CATEGORY A. PERSONNEL

This category is for services rendered by all personnel employed by the project. Costs incurred include salaries, benefits, uniforms, and special clothing.

SALARIES AND WAGES: Payment for personal services rendered in accordance with rates, hours, terms and conditions as authorized by law or stated in employment contracts.

OVERTIME, HAZARDOUS DUTY, ETC.

PERSONAL BENEFITS: FICA, retirements, insurance, etc.

UNIFORMS AND CLOTHING: Only uniforms for special clothing required by the nature of the employment and paid for by the employer may be listed.

NOTE: Project funds may not be used to pay a percentage of the compensation of any person who was employed by the implementing agency before the project starting date without prior specific authorization from the Department separate from the grant approval. Specific authorization is not required if a person currently employed by the applicant or the implementing agency is transferred from his/her prior position to the project if the transfer creates a personnel vacancy to be filled by hiring a new employee.

LIST POSITION TITLES	ANNUAL SALARY	PERCENT OF TIME TO PROJECT	ITEM TOTAL
		%	
		%	
		%	
		%	
		%	
		%	
		%	
		%	
		%	
		%	
		%	
		%	
CATEGORY TOTAL		%	

JUSTIFICATION AND EXPLANATION: Justify all positions in terms of days and/or hours required to perform the GOALS, OBJECTIVES, AND TASKS set forth. Calculate fringe benefits for each position or class of positions.

JDAI GRANT APPLICATION

AGENCY NAME	DATE		
PROJECT TITLE			
10. BUDGET DETAILS: CATEGORY B. SUPPLIES			
<p>This category is for articles and commodities which are consumed or materially altered when used. The following are types of supplies.</p> <p>OFFICE SUPPLIES: For example, office stationery, forms, small items of equipment, and maps, films, books, periodicals, and tapes.</p> <p>OPERATING SUPPLIES: For example, chemicals, drugs, medicines, laboratory supplies, cleaning and sanitation supplies, fuel, household and institutional supplies, and clothing. (Federal OJP funds may not be used to purchase food and/or beverages for any meeting, conference, training, or other event. Providing food and/or beverages to youth as part of programmatic activity is not subject to this restriction because such activity does not fall within the definition of a conference, training, or meeting.)</p> <p>REPAIR AND MAINTENANCE SUPPLIES: For example, building materials and supplies, paints and painting supplies, plumbing supplies, electrical supplies, motor vehicle repair materials and supplies, other repair and maintenance supplies, and small tools.</p>			
ITEMIZED LISTING (DESCRIPTION OF THE ITEM)	UNIT	UNIT COST	ITEM TOTAL
CATEGORY TOTAL			
10. BUDGET DETAILS: CATEGORY C. OTHER SERVICES AND CHARGES			
<p>This category is for services other than PERSONNEL which are required in the administration of the project. Such services may be provided by some agency of the government unit or by private business organizations. The following are types of services and charges classified under this category.</p> <p>COMMUNICATION: For example, telephone, telegraph, and postage.</p> <p>TRANSPORTATION: For example, freight and express charges, and messenger service.</p> <p>ADVERTISING</p> <p>PUBLIC UTILITY SERVICE</p> <p>PRINTING AND BINDING</p> <p>REPAIRS AND MAINTENANCE</p> <p>INSURANCE</p> <p>RENTALS: For example, buildings, and equipment and machinery.</p> <p>MISCELLANEOUS: For example, tuition and other training fees, dues, subscriptions and memberships, and taxes.</p>			
ITEMIZED LISTING (WORD OR WORDS DESCRIBING THE COST ITEM, I.E., POSTAGE)	UNIT	UNIT COST	ITEM TOTAL
CATEGORY TOTAL			

FDAI GRANT APPLICATION

AGENCY NAME	DATE
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PROJECT TITLE

10. BUDGET DETAILS: CATEGORY F. CONTRACTUAL SERVICES

The following types of personal services may be contracted:

- EVALUATION/RESEARCH
- LEGAL
- ACCOUNTING
- MEDICAL AND HEALTH SERVICES
- AUDITING
- SOCIAL SERVICES

ITEMIZED LISTING	UNIT	UNIT COST	ITEM TOTAL
CATEGORY TOTAL			

10. BUDGET DETAILS: CATEGORY G. INDIRECT CHARGES

Indirect costs may not exceed 10% of the total direct charges. Indirect costs include costs of operating the agency which are not directly attributed to this project (e.g., maintaining physical plant, depreciation, receptionist, agency administration salaries, etc.)

ITEMIZED LISTING (DESCRIBE THE COST ITEM)	UNIT	UNIT COST	ITEM TOTAL
CATEGORY TOTAL			

JDAI GRANT APPLICATION

AGENCY NAME	DATE
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PROJECT TITLE

11. STATEMENT OF WORK AND IMPLEMENTATION PLAN

The contractor agrees to perform the following minimum statement of work.

1. Each jurisdiction will have a JDAI Coordinator to participate in monthly Coordinator calls with the State Coordinator.
2. Conduct an annual JDAI System Assessment to be used in developing the Annual JDAI Implementation Plan (utilizing the assessment form/tool developed by the Statewide Coordinator).
3. Conduct a monthly call with key representatives of the jurisdiction and the State Coordinator to monitor progress in completing the JDAI Annual Implementation Plan.
4. Submit the AECF-JDAI Quarterly Report and annual Results Report, no later than 30 days after the end of each quarter to include:
 - Detention Population Report
 - Alternative Programs Report
 - Detention Referrals Screened Report
 - Detention Risk Assessment Instrument Override Report
5. Attend JDAI Quarterly Meetings, State and National JDAI Conferences (as held/applicable).
6. Conduct a minimum of four (4) JDAI Stakeholder Meetings per year.
7. Conduct a Detention Self-Inspection every two (2) years.
8. Submit quarterly progress and financial reports to the Office of Juvenile Justice on reporting forms provided by OJJ.
9. Submit a plan to address Racial and Ethnic Disparities (R.E.D.) in a coordinated effort, to be specifically designed for each site in collaboration with the Office of Juvenile Justice (OJJ) JDAI Coordinator and the R.E.D. Coordinator. The plan should be included in your application and should include:
 - Information on the previous year R.E.D. plan, steps taken and progress made.
 - Provide information regarding the desegregate data based on race and ethnicity that identifies racial and ethnic groups that are over represented and possible causes identified.
 - Identify any technical assistance needs regarding ability to address racial and ethnic disparities.

Attach the County JDAI Implementation Plan addressing the eight core strategies of JDAI, including at a minimum:

- Description of the current status of eight (8) JDAI strategies
- Objectives for the contract period (July 1, 2014 – June 30, 2015)
- Activities and tasks to meet objectives