APPROVED: OMB NO. 1121-0142

EXPIRES 12/31/11



U.S. Department of Justice Office of Justice Programs Office for Victims of Crimes

SUBGRANT AWARD REPORT

The purpose of this report is to collect basic information on subgrant recipients and their programs in a manner that is convenient to report and analyze. This report must be completed in full and submitted by the State agency (grantee) within ninety (90) days from the date of the award of a subgrant to a local victim assistance program. A Subgrant Award Report must be completed for each project receiving Victims of Crime Act funding. Send the original and one (1) copy to: Office for Victims of Crimes, 810 7th St., NW, Washington, D.C. 20531

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1. a. SUBGRANTEE AGENCY NAME AND ADDRESS (Including Zip Code):			2. FEDERAL GRANT NUMBER:	
			3. PURPOSE OF VOCA SUBGRANT AWARD: (Check one)	
			a. [] START UP A NEW VICTIM SERVICES PROJECT	
			b. CONTINUE A VOCA FUNDED VICTIM PROJECT FUNDED IN	
b. TELEPHONE NUMBER AND AREA CODE:			A PREVIOUS YEAR	
c. CONGRESSIONAL DISTRICT:			c. EXPAND OR ENHANCE AN EXISTING PROJECT NOT FUNDED BY VOCA IN THE PREVIOUS YEAR d. START UP A NEW NATIVE AMERICAN VICTIM SERVICES PROJECT	
4. a. CRIME VICTIM ASSISTANCE FUNDS AWARDED: \$			e. EXPAND OR ENHANCE AN EXISTING NATIVE AMERICAN PROJECT	
b. STATE AWARD NUMBER:				
c. PROJECT BEGIN DATE:				5 SUBGRANT MATCH (Financial support from other sources):
d. PROJECT END DATE:			a. VALUE OF IN-KIND MATCH:	
6. THESE VOCA FUNDS WILL PRIMARILY BE USED TO: (Check one)			b. Cash Match:	
a. D EXPAND SERVICES INTO A NEW GEOGRAPHIC AREA				c. TOTAL MATCH \$
b. C OFFER NEW TYPES OF SERVICES			7 FOR THIS VICTIM SERVICES PROGRAM WITH THE	
c. [] SERVE ADDITIONAL VICTIM POPULATIONS			7. FOR THIS VICTIM SERVICES PROGRAM INDICATE:	
d. CONTINUE EXISTING SERVICES TO CRIME VICTIMS			a. NUMBER OF PAID STAFF (Full-time equivalents)	
e. C OTHER (Specify)			b. HAS THE VICTIM SERVICE PROGRAM RECEIVED A VOLUNTEER	
8. IDENTIFY THE AMOUNT OF THE VOCA GRANT THAT WILL BE USED			WAIVER?	
TO MEET THE PRIORITY AND UNDERSERVED REQUIREMENTS			1. 🗆 YES 🗆 NO	
b. DOMESTIC VIOLENCE \$				2. IF NO, INDICATE THE NUMBER OF VOLUNTEER STAFF
c. SEXUAL ASSAULT			(Full-time equivalents)	
d. UNDERSERVED			9. TYPE OF IMPLEMENTING AGENCY (Check the appropriate boxes)	
1. DUI/DWI CRASHES \$			•	
2. SURVIVORS OF HOMICIDE VICTIMS \$				a. CRIMINAL JUSTICE - GOVERNMENT:
3. ASSAULT \$				1. □ LAW ENFORCEMENT 4. □ COURT
4. ADULTS MOLESTED AS CHILDREN \$				2. □ PROSECUTION 5. □ CORRECTIONS 3. □ PROBATION 6. □ OTHER
5. ELDER ABUSE \$, S 3111E11	
6. ROBBERY \$				b. NONCRIMINAL JUSTICE - GOVERNMENT:
7. OTHER VIOLENT CRIMES \$				1. □ SOCIAL SERVICES 4. □ HOSPITAL 2. □ MENTAL HEALTH 5. □ OTHER
0. PLEASE PROVIDE THE TOTAL AMOUNTS OF FUNDING ALLOCATED TO			2. I MENIAL HEALTH 5. I OTHER 3. I PUBLIC HOUSING	
VICTIM SER	RVICES BASED ON THE SUBI	RANTEES CURRENT FISCAL	. •	c. PRIVATE NON-PROFIT:
			1. □ HOSPITAL 4. □ SHELTER	
	UNDING SOURCES	CURRENT YEAR		2. RAPE CRISIS 5. MENTAL HEALTH AGENCY
T	RAL (Excluding VOCA)			3. D RELIGIOUS ORGANIZATION 6. DOTHER
b. VOCA FUNDS c. STATE			d. □. NATIVE AMERICAN TRIBE OR ORGANIZATION:	
d. LOCAL			☐ 1. ON RESERVATION ☐ 2. OFF RESERVATION	
e. OTHER				e. □ OTHER:
G. GINIEI.	-			
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1. IDENTIFY TH	IE VICTIM(S) TO BE SERVED	THROUGH THIS VOCA-FUNDS	ED PR	OJECT (VOCA grant plus Match) BY CHECKING THE TYPE OF CRIME(S):
a.	CHILD PHYSICAL ABUSE		g.	ADULTS MOLESTED AS CHILDREN
b.	CHILD SEXUAL ABUSE		h.	SURVIVORS OF HOMOCIDE VICTIMS
c. d.	DUI/DWI CRASHES DOMESTIC VIOLENCE		1.	ROBBERY
e. e.	ADULT SEXUAL ASSAULT		J. K.	ASSAULT
f.	ELDER ABUSE		1.	OTHER VIOLENT CRIMES OTHER
				Office
CHECK THE	SERVICES TO BE PROVIDED	BY THIS VOCA-FUNDED PRO	JECT	(VOCA grant plus Match)
a.	ODICIO COLLUCTIONI		h.	CRIMINAL JUSTICE SUPPORT/ADVOCACY
b. FOLLOWUP CONTACT i		i.	FORENSIC EXAMS	
c. THERAPY d. GROUP TREATMENT		1.	EMERGENCY LEGAL ADVOCACY	
d. GROUP TREATMENT e. CRISIS HOTLINE COUNSELING		K.	ASSISTANCE IN FILING COMPENSATION CLAIMS	
1 CHELTEDICASS HOUSE		n.	PERSONAL ADVOCACY	
	INFORMATION AND REFERR	AL (In person)	- m.	TELEPHONE CONTACTS (Information and referral) OTHER
<u> </u>				

SUBGRANT AWARD REPORT INSTRUCTIONS

DEFINITIONS:

The following words are defined to provide consistency in completing the Subgrant Award Report form.

Child - A person under the age of 18 or as otherwise defined by State law.

Elder Abuse - abuse perpetrated by a caretaker upon an elderly individual who depends on others for support and assistance.

Victim Services Program - all services and activities offered on behalf of victims of crime, including the VOCA grant and match.

VOCA - Funded Project - VOCA funds plus match.

- a. Provide the name and a two-line address of the agency receiving the VOCA funds. This item refers to the agency providing the direct services to victims of crime, not a pass-through or conduit agency.
 - b. Provide the area code and telephone number.
 - List the Congressional District and any other District(s) affected by the VOCA-funded program or project.
- Provide the Federal grant award number from which this subgrant os made. This number can be found in "item 4" of the OJP "Award" document, Form 4000/2. Note: If funds are awarded from more than one Ferderal VOCA grant award to this victim agency, a Subgrant Award Report must be completed and submitted for each award.
- Check the appropriate box.
- a. Provide the total dollar amount of VOCA funds awarded. Do not report sums less than one dollar.
 - Provide the State award number assigned to this VOCA award.
 Note: Each number must be different.
 - c. Indicate the date the VOCA-funded project begins.
 - d. Indicate the date the VOCA-funded project
- 5. a. Provide the value of in-kind match
 - b. Provide the value of cash match
 - Indicate the total match available to this VOCA-funded project.
 Note:Do not report sums less than one dollar.

All VOCA awards must be matched (20 percent), either with in-kind or cash match, except for VOCA subgrants made in the Virgin Islands, Puerto Rico, American Samoa, Guam, Northern Marianas, and Palau. Match must run concurrently with the VOCA-funded project and must be designated exclusively for direct victim services as determined by VOCA. No Federal funds may be to match this VOCA subgrant.

This is computed by dividing the amount of the award from item 4.(a) by .80 and subtracting the amount of the award from the figure obtained. (For example, a \$30,000 award divided by .80 equals \$37,500, less \$30,000 award equals \$7,500 match.)

Native American Tribe/Organization Match is 5%, if the Tribe or Organization os located on a reservation. This is computed by dividing the amount of the award from the figure obtained. (For example, a \$30,000 award divided by .95 equals \$31,759, less \$30,000 award equals \$7,500 match.)

- Check the box that indicates how the VOCA funds will, primarily, be used. IF it will be used equally for two or more items, select 6.(e), "Other".
- 7. a.b. Within the victim services program, which includes the VOCA funds and match, indicates the number of paid staff (7.a.) and whether or not a volunteer waiver has been given (7.b.) if "No", indicate the number of volunteer staff. Use full-time equivalents when responding to these questions and round fractions to the nearest whole number. These numbers may be estimated or prorated.
- Indicate the amount of VOCA funds that are allocated to the priority and under served victims of crime.

- Check the appropriate boxes that best describes the agency listed in items 1.
- Report the total budget available to the victim services program, by source of funding. Do not report the entire agency budget, unless the entire budget is devoted to victim services. For example, if VOCA funds are awarded to support a victim advocate unit in a prosecutor's office, then only report the budget for the victim advocate unit. Note: Do not include in-kind match. Do not report sums less than one dollar.
- Check the box(es) that best identify type(s) of victims the VOCAfunded project will serve. "Other" in this category refers to victims of non-violent crime, <u>i.e.</u>, burglary, white collar, etc. Please specify.
- 12. Check the box(es) that best identifies the types of services or activities that will be provided by the VOCA-funded project, as described below. Note: Report only those services actually provided by the VOCA-funded project. Do not report services offered by another agency.
 - a. Crisis Counseling refers to in-person crisis intervention, emotional support, and guidance and counseling providing by advocates, counselors, mental health professionals, or peers. Such counseling may occur at the scene of a crime, immediately after a crime, or be provided on an on going-basis.
 - Follow-up Contact refers to in-person contacts, telephone contacts, and written communications with victims to offer emotional support, provide empathetic listening, check on a victim's progress, etc.
 - c. Therapy refers to intensive professional psychological and or psychiatric treatment for individuals, couples, and family members related to counseling to provide emotional support in crisis arising from the occurrence of crime. This includes the evaluation of mental health needs, as well as the actual delivery of psychotherapy.
- d. Group Treatment refers to the coordination and provision of supportive group activities and includes self-help, peer, social support, etc.
- Crisis Hotline Counseling typically refers to the operation of a 24hour telephone service, 7 days a week, which provides counseling, guidance, emotional support, information and referral, etc.
- Shelter/Safe House refers to offering short-and long-term housing and related support services to victims and families following a victimization.
- g. Information and Referral (in-person) refers to in-person contacts with victims during which time services and available support are identified.
- Criminal Justice Support/Advocacy refers to support, assistance, and advocacy provided to victims at any stage of the criminal justice process, to include post-sentencing services and support.
- Emergency Financial Assistance refers to cash outlays for transportation, food, clothing, emergency housing, etc.
- j. Emergency Legal Advocacy refers to the filling of temporary restraining orders, injunctions, and other protective orders, elder abuse petitions, and child abuse petitions but does not include criminal prosecution of the employment of attorneys for nonemergency purposes, such as custody disputes, civil suits, etc.
- k. Assistance in Filing Compensation Claims includes making victims aware of the availability of crime victim compensation, assisting the victims in completing the required forms, gathering the needed documentation, etc. It may also include follow-up contact with the victim compensation agency on behalf of the victim.
- Personal Advocacy refers to assisting victims in securing rights, remedies, and services from other agencies; locating emergency financial assistance, intervening with employers, creditors, and others on behalf of the victim; assisting in filing for losses covered by public and private insurance programs including workman's compensation, unemployment benefits, welfare, etc.; accompanying the victim to the hospital; etc.
- Telephone Contacts refers to contact with victims during which time services and available support are identified.
- Other refers to other VOCA allowable services and activities not listed.

Public reporting burden for this collection of information is estimated to average 3 minutes per response, including the time for reviewing instructions and entering the data into the Subgrant Subdial System. Send comments regarding this burden estimate or any other aspects of this collection of information, including suggestions for reducing this burded, to the State Compensation and Assistance Division, Office for Victims of Crime, U.S. Department of Justice, 633 Indiana Avenue, N.W., Washington, D.C. 20531, and to the Public Use Reports Project, 1121-0142, Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.