

FY 2015/2016
DPS-VOCA
Pre-Application
Conference

Today's Environment

- FY 15 Cap Increase
 - Strategic Planning
- Discretionary Training Grant
 - Training Needs Assessment
- Future Cap Proposals
- New Regulations
- Uniform Requirements
- Federal Level Performance Measures
- State level coordination for services
- Victims' Rights Enforcement Fund

Background of VOCA

- Crime Victim Fund established in 1984
- Receives deposits of fines and penalties levied against criminals convicted of federal crimes (not tax dollars)
- Provides funds for state victim compensation and assistance programs, federal victim witness programs, Children's Justice Act, and others

FY 15/16 VOCA Funding

- Competitive process
- Approximately \$27 million available
- FY15/16 agreements may be renewed for an additional 12-month period (FY16/17):
Anticipate holding a renewal and open/competitive process for FY 16/17

Federal VOCA Priorities

The following victim populations have minimum support criteria:

- Sexual abuse, 10% or greater
- Child abuse, 10% or greater
- Domestic violence, 10% or greater
- Previously under-served, 10% or greater

No state-level priorities have been identified

Primary Purpose of VOCA

- Respond to the emotional and physical needs of crime victims (**healing** goal)
- Assist primary and secondary victims of crime to stabilize their lives after a victimization (**economic restabilization** goal)
- Assist victims to understand and participate in the criminal justice system (**justice** goal)
- Provide victims of crime with a measure of safety and security (**safety** goal)

Eligible services:

- Crisis Counseling
- Follow-up Contact
- Therapy
- Crisis Counseling via phone/hotline
- Group Treatment /Support
- Shelter/Safe House
- Information, Referral, Connection
- Criminal Justice Support/Advocacy
- Emergency Financial Assistance
- Emergency Legal Advocacy
- Assistance in Filing Compensation Claims
(Required for VOCA Subrecipients)
- Personal Advocacy
- Telephone Contact (information & referral)
- Other

DPS-VOCA Application Process

- Request For Grant Application (8/10/15)
- Application Deadline (3:00 pm 9/25/15)
- Review & Evaluation
- Funding Recommendations (11/16/15)

Applicant Organization Eligibility Requirements:

- Be a Public or Nonprofit agency
- Have a record of effective services
- Meet program match requirements (waivers)
- Recruit and maintain volunteers
- Promote community efforts to aid victims
- Help victims apply for compensation benefits
- Inform victims of their legal rights

Eligibility Requirements cont.:

- Comply with Federal rules regulating grants
- Ensure access to Federally Assisted Programs*
- Maintain civil rights statistical information on victims
- Comply with State criteria
- Provide services to victims of Federal crimes
- Not charge victims for VOCA-funded services
- Maintain client/counselor confidentiality
- Maintain confidentiality of research information

Eligible Subrecipient Organizations:

- Victim Service Organizations
- Criminal Justice Agencies
- Faith-Based Organizations
- State Crime Victim Compensation Agencies
- Hospital & Emergency Medical Facilities
- Others

Ineligible Subrecipient Organizations:

- Federal Agencies
- In-patient Treatment Facilities

Allowable Costs for Direct Services:

- Immediate Health & Safety
- Mental Health Assistance
- Assistance with Participation in Criminal Justice Proceedings
- Enhancements associated with Forensic Exams
- Costs necessary and essential to providing direct services
- Special Services
- Personnel Costs
- Restorative Justice (must be requested by victim)

Other Allowable Costs and Services:

- Skills training for staff
- Training materials
- Training Related Travel
- Equipment and furniture
- Purchasing or leasing vehicles

Other Allowable Costs cont.:

- Advanced Technologies
- Contracts for Professional Services
- Operating Costs
 - Indirect Costs
- Supervision of Direct Service Providers
- Repair and/or Replacement of Essential Items
- Public Presentations (outreach)

Non-Allowable Costs and Activities:

- Lobbying and Administrative Advocacy
- Perpetrator Rehabilitation and Counseling
- Needs Assessments, Surveys, Evaluations, and Studies
- Prosecution Activities
- Fundraising Activities

Non-Allowable Costs cont.:

- Property Loss
- Medical Costs
- Relocation Expenses
- Administrative Staff Expenses
- Development of Protocols, Interagency Agreements & other Working Agreements
- Sending Crime Victims to Conferences
- Crime Prevention Activities

Sub-recipient Responsibilities:

- Beginning the Project
- Financial and Program Reporting
- Submitting Agreement Amendment Requests in a timely manner
- Providing Notice of Crime Victim Service Availability

Sub-recipient Responsibilities cont.:

- Disclosing Findings of Discrimination Against Funded Agencies
- Reporting Suspected Fraud, Waste, and Abuse
- Adhering to Audit Responsibilities
- Adhering to the FY 2015/2016 General Conditions and any Special Conditions

VOCA's Web-based Automated Grants System (WAGS)

<http://crime.azvictims.org/AZVOCA/>

The Arizona Department of Public Safety
Welcomes you to the
Web-Based Automated Grants System

LOGIN

[Click here to login to the Web-Based Automated Grants System](#)

Use this link if you have already created an application in this system or to access your current Agreement.

**Access to Created Applications
(and current Agreements)**

VOCA ASSISTANCE GRANT APPLICATION

In accordance with the Victims of Crime Act of 1984 (VOCA), the Arizona Department of Public Safety makes funding available for crime victim assistance grants.

VOCA Assistance Applications must be submitted by 3:00:00 PM on Friday, September 25, 2015.

[Click here to request a New VOCA Online Grant Application](#)

[Click here for a printable version of the Request For VOCA Assistance Grant Application \(RFGA\)](#)

New Application Link (create)

Printable RFGA

For technical questions related to the online system contact Kate Henderson, Grant Coordinator, via email at khenderson@azdps.gov. For application specific questions contact Kate Henderson via email at khenderson@azdps.gov.

VOCA TRAINING GRANT APPLICATION

In accordance with the Victims of Crime Act of 1984 (VOCA), the Arizona Department of Public Safety makes funding available for crime victim assistance training grants. To determine eligibility, contact DPS before requesting an application.

VOCA Training Applications must be submitted by 5:00:00 PM on Wednesday, September 30, 2015.

[Click here to request a new VOCA Online Training Grant Application](#)

To determine eligibility prior to requesting an application, or for technical or application specific questions, contact Kate Henderson, Grant Coordinator, via email at khenderson@azdps.gov.

VOCA RECOVERY ACT GRANT APPLICATION

In accordance with the Victims of Crime Act of 1984 (VOCA) and the American Recovery and Reinvestment Act (Recovery Act) of 2009, the Arizona Department of Public Safety makes funding available for crime victim assistance grants.

You cannot request an application at this time. The previous deadline for submitting an application was 3:00:00 PM on Monday, August 16, 2010.

For technical questions related to the online system contact Kate Henderson, Grant Coordinator, via email at khenderson@azdps.gov. For application specific questions contact Kate Henderson via email at khenderson@azdps.gov.

The Arizona Department of Public Safety is an equal opportunity employer, services, and programs provider.

[Public Forms and Information](#)

Useful Links

- [DOJ EEO Guidelines](#)
- [State of Arizona Travel Rates](#)
- [Strategic Planning Manual](#)
- [Victims' Rights Condensed \(English\)](#)
- [Victims' Rights Condensed \(Spanish\)](#)
- [DPS-VOCA Guidelines Effective 7/2013](#)
-  [DPS-VOCA Guidelines Effective 8/2015](#)
- [General Conditions Effective 2/2013](#)
- [Federal and State Statutes and Regulations Governing the AZDPS VOCA Grant Program](#)
- [AZ DPS-VOCA Civil Rights Compliance Webpage](#)
- [Victims of Crime Act \(VOCA\) Assistance Funds Webinar \(recording\)](#)
-  [FY 2015 Federal Per Diem Rates](#)
-  [Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards \(Uniform Guidance\)](#)

VOCA Core Measures

- [Child Abuse Core Measures](#)
- [Domestic Violence Core Measures](#)
- [Sexual Assault Core Measures](#)
- [Sexual Assault Hotline Core Measures](#)
- [Victim Witness Core Measures](#)
-  [Victim Assistance Subgrantee Report \(OVC\)](#)

Public Forms and Information Screen

The Arizona Department of Public Safety
Welcomes you to the
Web-Based Automated Grants System

LOGIN

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VOCA RECOVERY ACT GRANT APPLICATION

**Request for Grant Application
FY 2015/2016
DPS-VOCA CRIME VICTIM ASSISTANCE GRANTS
Award period: October 1, 2015 through September 30, 2016
Victims of Crime Act (VOCA) Assistance Funds
CFDA 16.575**

The Department of Public Safety's Administration of VOCA Funds

The mission of the Department of Public Safety's (DPS) VOCA Administration Unit is to support the provision of a full range of direct services to victims of crime in Arizona. This is accomplished by assisting, training, and monitoring crime victim service providers throughout the state. It is enabled by the Federal Victims of Crime Act (VOCA) assistance grant.

What is the Victims of Crime Act (VOCA)?

The Victims of Crime Act (VOCA) was signed into law in 1984. The Act created a fund, administered by the Department of Justice, for victim assistance grants to the states. Federal funding received for victim service programs varies from year to year, depending on the amount of federal fines collected, using no tax dollars.

What Will This FY 2015/2016 Request for Grant Application Fund?

VOCA requires that priority shall be given to victims of sexual abuse, domestic abuse, child abuse, and previously underserved populations, with a minimum of 10% of each federal fiscal year's grant being allocated to each of these crime victim categories. A crime victim is defined as a person who has suffered physical, sexual, financial, or emotional harm resulting from the commission of a crime.

Eligible nonprofit and government programs providing **direct** dedicated services include, but are not limited to, sexual assault victims, survivors of homicide victims, victims of robbery, DUI accident victims, domestic violence victims, and physically and sexually abused children. Services are defined as those efforts that assist victims with emotional and physical needs to stabilize their lives, provide a measure of safety and security, and enhance victims' experiences within the criminal and juvenile justice systems.

The following **cannot** be funded with VOCA or matching funds: administrative/clerical positions, grant writing, protocol development, criminal justice investigative efforts, needs assessment, or prevention or offender related programs.

What is the Award Period?

Request Web-Based Automated Grants System Access Eligibility Requirements

The following are the general requirements for eligibility. This section will allow you to make an early determination of your general eligibility.

1. The applicant organization is a Public
 Non-Profit
 Native American

The Applicant will: (please indicate Yes or No)

2. Demonstrate record of providing effective services Y N
- If no, demonstrate that 25-50% of agency's financial support is from non-federal sources. Y N
-
3. Provide match contributions of cash or in-kind in the amount described below: Y N
Public agency or non-profit organization 20%
Native American Tribe 5%
-
4. Utilize volunteers. Y N
If no, a waiver has been approved by DPS. Y N
-
5. Assist crime victims in applying for Crime Victims Compensation. Y N
-
6. Promote community efforts to aid crime victims. Y N
-
7. Comply with federal and state rules regulating grants. Y N
-
8. Maintain statutorily required data on victims served. Y N
-
9. Provide services to federal crime victims. Y N
-
10. Provide services to crime victims at no charge through the VOCA Y N

Request Web-Based Automated Grants System Application

Enter Existing Login and Password

If you have an existing agreement enter your login and password here to create a new application for the current fiscal year.

Login

Password

Existing Users

Choose a Login and Password

New applicants, please choose a login and password below. The login and password are required to access your on-line application.

Some password tips:

- Your password must be between 7 and 10 characters long.
- A good password does not contain words that can be found in a standard dictionary.
- A good password is easy to remember so it does not need to be written down. A way to help with this is to think of a sentence and use the first character of every word in the password. For example, the sentence 'It's raining today and I forgot my umbrella' could be used to construct the password: 'irtaifmu'.
- A good password combines both alphabetical and numeric characters. For example, the password 'irtaifmu' could be improved by adding a number: 'irtaifmu8'.

Login

Password

Confirm Password

New Users

Continue



Request Web-Based Automated Grants System Access Questions

New Agencies

Please fill out the following information:

Agency Information

The applicant organization is a

- Public
 Non-Profit
 Native American

Agency

ABC Agency

Project Title

Counseling Services

Contact Person Information

Salutation

Mr. ▼

First Name

James

Middle Initial

Last Name

Smith

Address

123 Any Street

City

Anytown

State

AZ ▼

Zip Code

85009

Telephone

(123) 123-1234

Extension

Facsimile

(123) 123-1235

Title

Program Coordinator

Email Address

johnsmith@cox.net

Continue

Application Request Confirmation

Thank you. Your VOCA grant application was created at 2:20:14 PM on 8/18/2015.

The edit period for this application is between 8/10/2015 8:00:00 AM and 9/25/2015 3:00:00 PM.

You can now [login here](#) using the Login and Password that you just specified.

If you have any questions, please write to:

**Arizona Department of Public Safety
Victims of Crime Act Grant
Department of Public Safety
PO Box 6638, Mail Drop 1320
Phoenix, Arizona 85005**

or send e-mail to [Kate Henderson](#), VOCA Grant Coordinator.
You may also call Kate Henderson at (602) 223-2661.

[Home Screen](#)

 Instructions

Please Make a Selection from the Following List

FY 2016

[Mansfield Park](#)

Application

VOCA Application

Special Features

[View the Grantee Directory](#)

View a directory listing of other Agencies with active projects.

[WAGS Evaluation](#)

[Register for a Grant Training Workshop](#)

Use this link to register for an upcoming grant workshop.

[Public Forms and Information](#)

Request Web-Based Automated Grants System Application



Enter Existing Login and Password

If you have an existing agreement enter your login and password here to create a new application for the current fiscal year.

Login
Password

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Choose a Login and Password

New applicants, please choose a login and password below. The login and password are required to access your on-line application.

Some password tips:

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- A good password is easy to remember so it does not need to be written down. A way to help with this is to think of a sentence and use the first character of every word in the password. For example, the sentence 'It's raining today and I forgot my umbrella' could be used to construct the password: 'irtaifmu'.
- A good password combines both alphabetical and numeric characters. For example, the password 'irtaifmu' could be improved by adding a number: 'irtaifmu8'.

Login
Password
Confirm Password

Continue

Request Web-Based Automated Grants System Application

Existing agreements in previous fiscal year

If you would like to base your new application off an agreement in the previous fiscal year, choose the agreement from the following drop down box.

Victim Assistance Program ▼

Create a new VOCA application not based on a previous agreement

[Create New Application](#)

Continue

Previous = FY 14/15

If you would like to base your FY 15/16 application off an application from FY 14/15, choose the application (by project name) from the drop down box. This will copy forward all of the data from the screens in the FORMS and NARRATIVE sections.

If you opt to Create New Application, you will need to start fresh with all of the screens.

Please Make a Selection from the Following List

FY 2016

Victim Services Program	Application	VOCA Application
---	-------------	------------------

FY 2015

Victim Services Program	Application	Cancelled
---	-------------	-----------

Victim Services Program	Application	Closed Agreement
---	-------------	------------------

Victim Services Program	Agreement Amendment Request	Amended Agreement
---	-----------------------------	-------------------

Victim Services Program	Agreement Amendment Request	VOCA Agreement Amendment Request
---	-----------------------------	----------------------------------

Victim Services Program the sequel	Agreement Amendment Request	VOCA Agreement Amendment Request Submitted - Waiting Approval
--	-----------------------------	---

FY 2014

Victim Services Program	Application	VOCA Application Closed (Original submittal)
---	-------------	--

Victim Services Program	Modified Application	Closed Agreement
---	----------------------	------------------

Victim Services Program	Agreement Amendment Request	Closed Agreement
---	-----------------------------	------------------

FY 2013

Victim Services Program	Application	Closed Agreement
---	-------------	------------------

FY 2012

Victim Services Program	Application	Closed Agreement
---	-------------	------------------

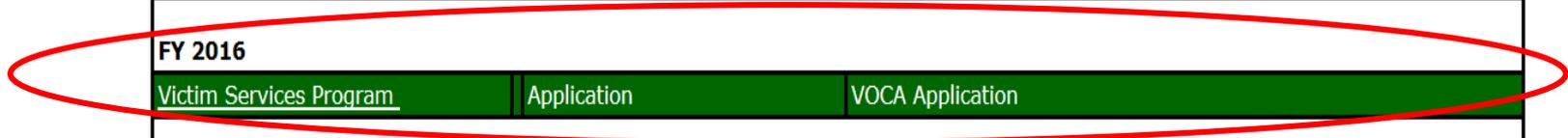
[Site Visit Menu](#)

Special Features

[View the Grantee Directory](#)

View a directory listing of other Agencies with active projects

Copied from FY 14/15 App →



Request Web-Based Automated Grants System Application

1 Existing applications in current fiscal year

If you would like to base your new application off an application in the current fiscal year, choose the application from the following drop down box.

Victim Assistance Program ▼

Current = FY 15/16

2 Existing agreements in previous fiscal year

If you would like to base your new application off an agreement in the previous fiscal year, choose the agreement from the following drop down box.

Victim Assistance Program ▼

Previous = FY 14/15

3 Create a new VOCA application not based on a previous agreement

[Create New Application](#)

(blank/empty)

Continue

If you are going to create more than one application and have already started one for FY 15/16, you now have three options in creating that second application.

1) You may base your second application on the one that you have already started for FY 15/16. This will copy over the information you have already provided in the Applicant Summary and Certification Information Screens.

2) You may base your second application on a FY 14/15 application. This will copy forward all of the data from the screens in the FORMS and NARRATIVE sections.

3) You may create an entirely new application where you will have to start fresh with all of the screens.

Please Make a Selection from the Following List

FY 2016

Victim Services Program	Application	VOCA Application
---	-------------	------------------

FY 2015

Victim Services Program	Application	Cancelled
Victim Services Program	Application	Closed Agreement
Victim Services Program	Agreement Amendment Request	Amended Agreement
Victim Services Program	Agreement Amendment Request	VOCA Agreement Amendment Request
Victim Services Program the sequel	Agreement Amendment Request	VOCA Agreement Amendment Request Submitted - Waiting Approval

FY 2014

Victim Services Program	Application	VOCA Application Closed (Original submittal)
Victim Services Program	Modified Application	Closed Agreement
Victim Services Program	Agreement Amendment Request	Closed Agreement

FY 2013

Victim Services Program	Application	Closed Agreement
---	-------------	------------------

FY 2012

Victim Services Program	Application	Closed Agreement
---	-------------	------------------

[Site Visit Menu](#)

Special Features

[View the Grantee Directory](#)

View a directory listing of other Agencies with active projects

- **Green (Application)**
- **Gray (Closed Application or Agreement)**
- **Blue (Approved Agreement or Amended Agreement)**
- **Red (Pending Agreement Amendment Request)**

Excellent Victim Services Victim Services Program

Forms	Printable Version	Narratives	Printable Version
Applicant Summary		Victim Services Summary	
Certification Information		Volunteer Detail	
Agency Service Information		Problem Statement and Service Needs	
Jurisdiction		Project Summary	
Prorate VOCA Project Funds		Interagency Coordination	
Source of Funding		Community Collaboration	
		Performance Measures	

Budget	Printable Budget	Printouts	
Salaries and Wages	Printable Position Descriptions	DPS/VOCA Guidelines Effective 2/2007	
Fringe Benefits		DPS/VOCA Guidelines Effective 2/2013	
Travel		Child Abuse Core Measures	
Professional and Outside Services		Domestic Violence Core Measures	
Equipment		Sexual Assault Core Measures	
Training and Related Travel		Sexual Assault Hotline Core Measures	
Other Operating Expenses		Victim Witness Core Measures	
Match		General Conditions Effective 2/2009	
Budget Summary		Strategic Planning Manual	
Budget Prioritization and Justification			

Do not submit until all sections have been completed, saved, and checked for errors.

This Application must be completed and submitted by 3:00:00 PM on Friday, September 25, 2015.

Submit

Check Errors

35 points

Excellent Victim Services Victim Services Program

Forms [Printable Version](#)

- [Applicant Summary](#)
- [Certification Information](#)
- [Agency Service Information](#)
- [Jurisdiction](#)
- [Prorate VOCA Project Funds](#)
- [Source of Funding](#)

Narratives [Printable Version](#)

- [Victim Services Summary](#)
- [Volunteer Detail](#)
- [Problem Statement and Service Needs](#)
- [Project Summary](#)
- [Interagency Coordination](#)
- [Community Collaboration](#)
- [Performance Measures](#)

Budget [Printable Budget](#) [Printable Position Descriptions](#)

- [Salaries and Wages](#)
- [Fringe Benefits](#)
- [Travel](#)
- [Professional and Outside Services](#)
- [Equipment](#)
- [Training and Related Travel](#)
- [Other Operating Expenses](#)
- [Match](#)
- [Budget Summary](#)
- [Budget Prioritization and Justification](#)

Printouts

- [DPS/VOCA Guidelines Effective 2/2007](#)
- [DPS/VOCA Guidelines Effective 2/2013](#)
- [Child Abuse Core Measures](#)
- [Domestic Violence Core Measures](#)
- [Sexual Assault Core Measures](#)
- [Sexual Assault Hotline Core Measures](#)
- [Victim Witness Core Measures](#)
- [General Conditions Effective 2/2009](#)
- [Strategic Planning Manual](#)

DUE DATE!

Do not submit until all sections have been completed, saved, and checked for errors.

This Application must be completed and submitted by 3:00:00 PM on Friday, September 25, 2015.

Submit

Check Errors

Applicant Summary
Excellent Victim Services; Victim Services Program

Applicant Agency

Agency Name

Excellent Victim Services

Address

123 Any Street

City

Anytown

State

AZ

Zip Code + 4

12345-1234

Telephone

(123) 456-7890

Extension

123

Facsimile

(987) 654-3210

Website Address Example: http://www.myagency.org

www.excellentvictimservices.com

Organizational Unit

Crime Victim Services Unit

Payment Shipping Address

123 Any Street

City

Anytown

State

AZ

Zip Code

12345-1234

Telephone

(123) 456-7890

Extension

456

Service History

Number of years agency has been providing victim services.

15

Agency Information

Federal Employer Identification Number

86-0000000

Unemployment

Reimbursing

Contributing

Is your agency enrolled in the Dun & Bradstreet Data Unification Numbering System (DUNS)?

Yes No If yes, provide the DUNS Number

123456

Is your agency registered in the Central Contractor Registration (CCR) database?

Yes No If yes, provide the Commercial and Government Entity (CAGE) Number

12ab34cd

- Basic agency information
- Payment shipping address
- Contact person
- Civil Rights contact person
- Crime Victim Compensation Coordinator

Certification Information
Excellent Victim Services; Victim Services Program

Project Director (Contract Signatory)

Salutation <input type="text"/>	First Name <input type="text"/>	Middle Initial <input type="text"/>	Last Name <input type="text"/>	
Address <input type="text"/>		City <input type="text"/>	State AZ <input type="text"/>	Zip Code <input type="text"/>
Telephone <input type="text"/>	Extension <input type="text"/>	Facsimile <input type="text"/>		
Email Address <input type="text"/>		Title <input type="text"/>		

Financial Contact

Salutation <input type="text"/>	First Name <input type="text"/>	Middle Initial <input type="text"/>	Last Name <input type="text"/>	
Address <input type="text"/>		City <input type="text"/>	State AZ <input type="text"/>	Zip Code <input type="text"/>
Telephone <input type="text"/>	Extension <input type="text"/>	Facsimile <input type="text"/>		
Email Address <input type="text"/>		Title <input type="text"/>		

Authorizing Official (Contract Signatory)

Salutation <input type="text"/>	First Name <input type="text"/>	Middle Initial <input type="text"/>	Last Name <input type="text"/>	
Address <input type="text"/>		City <input type="text"/>	State AZ <input type="text"/>	Zip Code <input type="text"/>
Telephone <input type="text"/>	Extension <input type="text"/>	Facsimile <input type="text"/>		
Email Address <input type="text"/>		Title <input type="text"/>		

- Act as signatories
- Prohibits same individuals and/or funded personnel

Agency Service Information

Excellent Victim Services; Victim Services Program

Service Impact and Victim Population

This VOCA Grant will primarily be used to: (check one)

- Expand services into a new geographic area
- Offer new types of services
- Serve additional victim populations
- Continue existing services to crime victims
- Other

Purpose of VOCA Grant: (check one)

- Start up a new victim services project
- Continue a VOCA-funded victim project funded in a previous year
- Expand or enhance an existing project not funded by VOCA in the previous year
- Start up a new Native American victim services project
- Expand or enhance an existing Native American project

If awarded, these funds will support direct service staff providing services to the following victims:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Child Physical Abuse | <input type="checkbox"/> Economic Exploitation and Fraud |
| <input type="checkbox"/> Child Sexual Abuse | <input type="checkbox"/> Kidnapping |
| <input type="checkbox"/> DUI/DWI Crashes | <input type="checkbox"/> Stalking |
| <input type="checkbox"/> Domestic Violence | <input type="checkbox"/> ID Theft |
| <input type="checkbox"/> Adult Sexual Assault | <input type="checkbox"/> Arson |
| <input type="checkbox"/> Elder Abuse | <input type="checkbox"/> Burglary/Theft |
| <input type="checkbox"/> Adults Molested as Children | <input type="checkbox"/> Criminal Damage/Property Crimes |
| <input type="checkbox"/> Survivors of Homicide Victims | <input type="checkbox"/> Harassment (not DV or SA related) |
| <input type="checkbox"/> Robbery or Bank Robbery | <input type="checkbox"/> Other Violent Crimes <input type="text"/> |
| <input type="checkbox"/> Assault | <input type="checkbox"/> Other <input type="text"/> |

- Service impact and population
- Service identification
- Staffing/Volunteers



Jurisdiction

Excellent Victim Services; Victim Services Program

SERVICE AREA

Mark the appropriate option button to indicate the county in which the main office is located (only mark one); Mark the check box to indicate the county(ies) in your agency service area (mark all that apply).

(Circle Symbol) County in which the main office is located

(Square Symbol) County(ies) in agency service area

- | | | | | |
|---|---|--|--|--|
| <input type="radio"/> <input type="checkbox"/> Apache | <input type="radio"/> <input type="checkbox"/> Cochise | <input type="radio"/> <input type="checkbox"/> Coconino | <input type="radio"/> <input type="checkbox"/> Gila | <input type="radio"/> <input type="checkbox"/> Graham |
| <input type="radio"/> <input type="checkbox"/> Greenlee | <input type="radio"/> <input type="checkbox"/> La Paz | <input checked="" type="radio"/> <input type="checkbox"/> Maricopa | <input type="radio"/> <input type="checkbox"/> Mohave | <input type="radio"/> <input type="checkbox"/> Navajo |
| <input type="radio"/> <input type="checkbox"/> Pima | <input type="radio"/> <input type="checkbox"/> Pinal | <input type="radio"/> <input type="checkbox"/> Santa Cruz | <input type="radio"/> <input type="checkbox"/> Tribal/Reservation Only | <input type="radio"/> <input type="checkbox"/> Yavapai |
| <input type="radio"/> <input type="checkbox"/> Yuma | <input type="radio"/> <input type="checkbox"/> McKinley, NM | <input type="radio"/> <input type="checkbox"/> Washington, UT | | |

U.S. CONGRESSIONAL DISTRICTS

Indicate the U.S. Congressional District(s) that will be served through this project by clicking the box next to the appropriate District. Check all that apply.

[Arizona Congressional Districts](#)

- | | | | |
|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> District 1 | <input type="checkbox"/> District 2 | <input type="checkbox"/> District 3 | <input type="checkbox"/> District 4 |
| <input type="checkbox"/> District 5 | <input type="checkbox"/> District 6 | <input type="checkbox"/> District 7 | <input type="checkbox"/> District 8 |
| <input type="checkbox"/> District 9 | | | |



- Service area
 - Main office location
 - Service area for victims
- Congressional district
 - Mark all that apply

Prorate VOCA Project Funds

Excellent Victim Services; Victim Services Program

Refer to Instructions screen to complete this section.

Dollars	Percent		Dollars	Percent	
\$0	50	% Child Physical Abuse	\$0	0	% Economic Exploitation and Fraud
\$0	50	% Child Sexual Abuse	\$0	0	% Kidnapping
\$0	0	% DUI/DWI Crashes	\$0	0	% Stalking
\$0	0	% Domestic Violence	\$0	0	% ID Theft
\$0	0	% Adult Sexual Assault	\$0	0	% Arson
\$0	0	% Elder Abuse	\$0	0	% Burglary/Theft
\$0	0	% Adults Molested as Children	\$0	0	% Criminal Damage/Property Crimes
\$0	0	% Survivors of Homicide Victims	\$0	0	% Harassment (not DV or SA related)
\$0	0	% Robbery or Bank Robbery	\$0	0	% Other Violent Crimes
\$0	0	% Assault	\$0	0	% Other

Total Percentage

100 %

Save

Check Errors

- Allocate % to victim type
- Dollar amounts will appear once budget screens are completed

 Instructions

Source of Funding

Excellent Victim Services; Victim Services Program

Refer to Instructions screen to complete this section.

Source of Funding - Fiscal Year Budget	Funding Source Type	Date Range 10/1/2014 - 9/30/2015	Date Range 10/1/2015 - 9/30/2016
VOCA	Federal	\$0	\$8,000
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	Federal	<input type="text"/>	<input type="text"/>
<input type="text"/>	State	<input type="text"/>	<input type="text"/>
<input type="text"/>	Local	<input type="text"/>	<input type="text"/>
<input type="text"/>	Other	<input type="text"/>	<input type="text"/>

+New New row(s)

Total Victim Services Budget

- FY 14/15 populates from previous year's agreement (if copied from last year)
- FY 15/16 projections
- Identify cash match source(s)
- Victim Services program only
- +New to add rows

Excellent Victim Services Victim Services Program

Forms	Printable Version	Narratives	Printable Version
Applicant Summary		Victim Services Summary	
Certification Information		Volunteer Detail	
Agency Service Information		Problem Statement and Service Needs	
Jurisdiction		Project Summary	
Prorate VOCA Project Funds		Interagency Coordination	
Source of Funding		Community Collaboration	
		Performance Measures	

Budget	Printable Budget	Printouts	
Salaries and Wages	Printable Position Descriptions	DPS/VOCA Guidelines Effective 2/2007	
Fringe Benefits		DPS/VOCA Guidelines Effective 2/2013	
Travel		Child Abuse Core Measures	
Professional and Outside Services		Domestic Violence Core Measures	
Equipment		Sexual Assault Core Measures	
Training and Related Travel		Sexual Assault Hotline Core Measures	
Other Operating Expenses		Victim Witness Core Measures	
Match		General Conditions Effective 2/2009	
Budget Summary		Strategic Planning Manual	
Budget Prioritization and Justification			



310 points

Goals/Core Measures



Do not submit until all sections have been completed, saved, and checked for errors.

This Application must be completed and submitted by 3:00:00 PM on Friday, September 25, 2015.

Submit

Check Errors

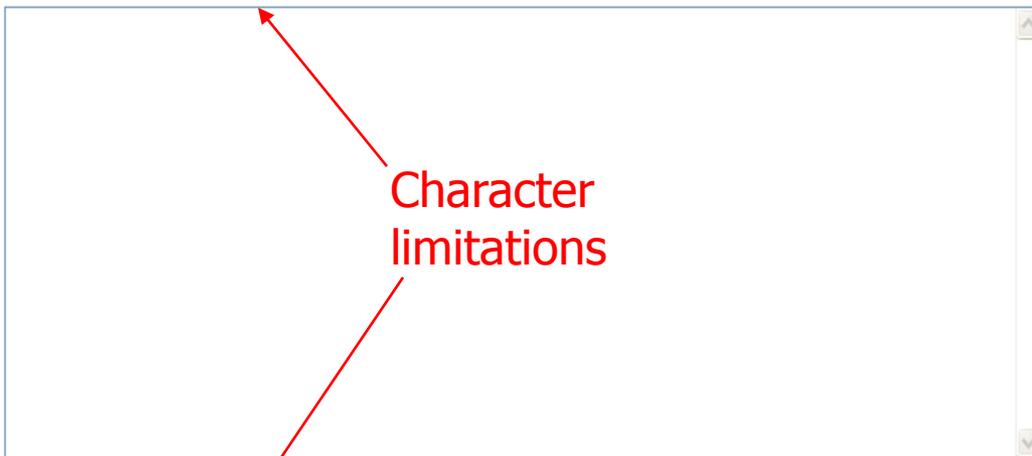
Victim Services Summary

Excellent Victim Services; Victim Services Program

Refer to Instructions screen to complete this section.

Mission Statement

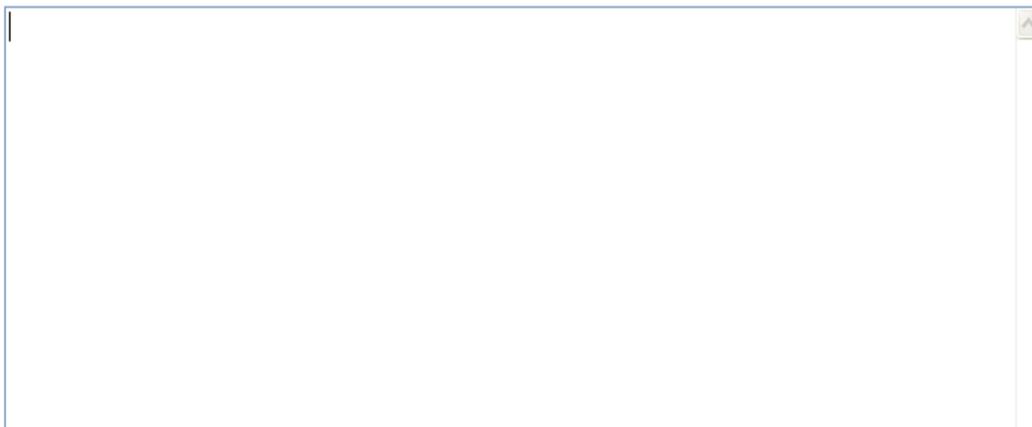
Limit your response to 1000 characters.



Character
limitations

Victim Statistics

Limit your response to 1000 characters.



■ Mission
Statement

■ Victim
Statistics

■ Agency
Profile

Volunteer Detail

Excellent Victim Services; Victim Services Program

Refer to Instructions screen to complete this section.

Volunteer Detail

Limit your response to 1500 characters.

Save

Check Errors

Identify agency's practices for recruiting, screening, and training volunteers

Identify the activities performed by volunteers as well as how volunteers are supervised

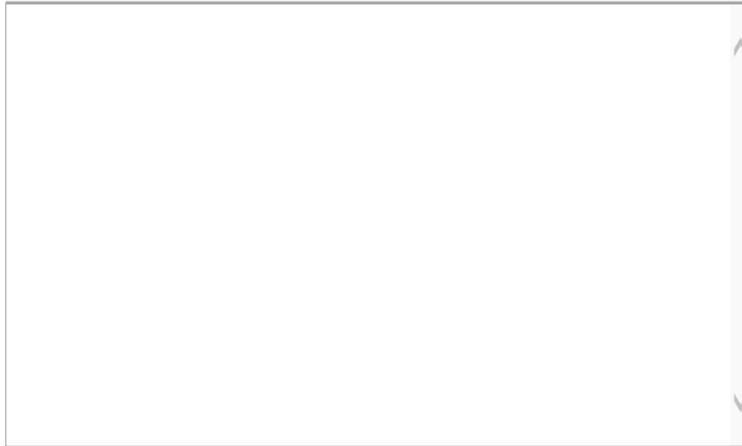
Problem Statement and Service Needs

Excellent Victim Services; Victim Services Program

Refer to Instructions screen to complete this section.

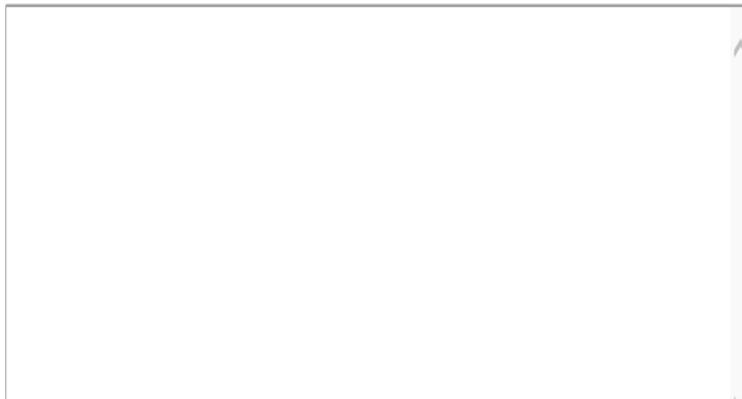
Problem Statement

Limit your response to 5000 characters.



Service Needs/Supporting Data

Limit your response to 5000 characters.



- Problem to be addressed (from the victim's perspective) with VOCA and match funding
- Local statistics and other data supporting the service need identified in the Problem Statement



Project Summary
Excellent Victim Services; Victim Services Program

Refer to Instructions screen to complete this section.

Project Summary

Limit your response to 3500 characters.

Save

Check Errors

Concise
synopsis of
proposed
project

Instructions

Interagency Coordination
Excellent Victim Services; Victim Services Program

Refer to the instructions screen to complete this section.

Limit your response to 1000 characters in each field.

Partnering Agency:

Applicant Agency Services/Activities:

Formal Agreement
 Y
 N

+New Interagency Coordination item(s)

Save

Check Errors

Efforts made to ensure continuum of care

Provide no more than three (3) examples

Instructions

Community Collaboration
Excellent Victim Services; Victim Services Program

Refer to Instructions screen to complete this section.

Limit your response to 1000 characters in each field.

Group Name:

Group Purpose:

Applicant Agency Role:

+New Community Collaboration item(s)

Save

Check Errors

Efforts to improve victim services through interagency training and coordination

Provide no more than three (3) examples

Goals (Performance Measures)
Excellent Victim Services; Victim Services Program

Refer to Instructions screen to complete this section.

Project Focus

- Child Abuse
- Domestic Violence
- Sexual Assault
- Sexual Assault Hotline
- Victim Witness
- Other

} Select a project focus

There are currently no goals in the system from which to choose.

Save

Check Errors

Goals (Performance Measures)

Excellent Victim Services; Victim Services Program

Refer to Instructions screen to complete this section.

Project Focus

- Child Abuse
 Domestic Violence
 Sexual Assault
 Sexual Assault Hotline
 Victim Witness
 Other

NOTE: Review the Core Performance Measures for your identified project focus before selecting goals

The 4 goal choices are:

- Goal 1: Respond to the emotional and physical needs [healing] of victims
- Goal 2: Assist primary and secondary victims of crime to stabilize [economic / restabilization] their lives after a victimization
- Goal 3: Assist victims to understand and participate in the criminal [justice] system
- Goal 4: Provide victims of crime with a measure of [safety] and security

+New Goal

Save

Check Errors

Performance Measures include:

- Inputs – number of victims requesting service
- Outputs – services/activities provided
- Outcomes – impact to victim
- Quality measures – satisfaction rating

Core Measures for Child Abuse programs

Note: The term victim is interchangeable with: victim; secondary victim; co-victim; and victim proxy (i.e. parent or guardian).

Goal 1: Healing

Knowledge: (choose at least one)

- 1 # and % of victims (or victim's proxy) reporting increased knowledge and understanding of violence, abuse and neglect and its effect on their life.
- 2 # and % of victims understanding the effects of trauma and victimization.
- 3 # and % of caregivers report increased awareness of resources for support/healing.

Engaging: (choice required)

- 1 # and % of victims participating in group or individual services.

Experiencing: (choose at least three)

- 1 # and % of victims reporting increased well-being and reduced anxiety level.
- 2 # and % of victims that report an increase in coping skills.
- 3 # and % of children who demonstrate improved emotional/behavioral status from intake to discharge.
- 4 # and % of children who demonstrate improved developmental status from intake to

5 # and % of children able to function appropriately at the shelter after receiving therapeutic services.

You may optionally provide any additional outcomes of your own choosing.

Goal 2: Economic Restabilization

No core outcome measures were identified. Identify at least one related outcome.

Goal 3: Justice

No core outcome measures were identified. Identify at least one related outcome.

Goal 4: Safety (choose at least one from either subcategory)

Knowledge:

1 # and % of children/adults with increased knowledge of resources that enhance safety and security.

2 # and % of victims that report they are learning skills to keep themselves safe.

Experiencing:

1 # and % of victims receiving services who report increased feelings of safety.

You may optionally provide any additional outcomes of your own choosing.

Quality Measures: (choose at least two from any subcategory)

Specific Satisfaction:

1 % of staff team members reporting satisfactory cooperation within the agency.

2 % of client satisfaction with crisis service.

3 % of guardians reporting satisfaction with emergency shelter services.

General Satisfaction:

1 % of victims reporting overall satisfaction with services.

Collaborator Satisfaction:

1 % of community collaborators reporting positive satisfaction with services provided.

2 % of community collaborators reporting satisfaction with interagency cooperation.

You may optionally provide any additional quality measures of your own choosing.

Core Measures for Child Abuse programs

Note: The term victim is interchangeable with: victim; secondary victim; co-victim; and victim proxy (i.e. parent or guardian).

Goal 1: Healing

Knowledge: (choose at least one)

- 1 # and % of victims (or victim's proxy) reporting increased knowledge and understanding of violence, abuse and neglect and its effect on their life.
- ✓ 2 # and % of victims understanding the effects of trauma and victimization.
- 3 # and % of caregivers report increased awareness of resources for support/healing.

Engaging: (choice required)

- 1 # and % of victims participating in group or individual services.

Experiencing: (choose at least three)

- 1 # and % of victims reporting increased well-being and reduced anxiety level.
- 2 # and % of victims that report an increase in coping skills.
- 3 # and % of children who demonstrate improved emotional/behavioral status from intake to discharge.
- 4 # and % of children who demonstrate improved developmental status from intake to

Goals (Performance Measures)

Excellent Victim Services; Victim Services Program

Refer to Instructions screen to complete this section.

Project Focus

- Child Abuse
- Domestic Violence
- Sexual Assault
- Sexual Assault Hotline
- Victim Witness
- Other

The 4 goal choices are:

- Goal 1: Respond to the emotional and physical needs [healing] of victims
- Goal 2: Assist primary and secondary victims of crime to stabilize [economic / restabilization] their lives after a victimization
- Goal 3: Assist victims to understand and participate in the criminal [justice] system
- Goal 4: Provide victims of crime with a measure of [safety] and security

 DELETE **Goal 1** 

 +New Goal

Goal 2
Goal 3
Goal 4

Save **Check Errors**

Performance Measure Details

Excellent Victim Services; Victim Services Program

[Return to the Performance Measures Menu screen](#)

Refer to Instructions screen to complete this section.

Goal
Respond to the emotional and physical needs [healing] of victims

Performance Measures	Measure	FY 2014	Projected FY 2016
Input			
Number of victims requesting service Required input	#	<input type="text" value="0"/>	<input type="text" value="0"/>
Output			
Number of victims receiving services Required output	#	<input type="text" value="0"/>	<input type="text" value="0"/>
<div style="border: 1px solid #ccc; height: 20px; width: 100%;"></div>	▼	<input type="text" value="0"/>	<input type="text" value="0"/>
Outcome			
<div style="border: 1px solid #ccc; height: 20px; width: 100%;"></div>	#	<input type="text" value="0"/>	<input type="text" value="0"/>
<div style="border: 1px solid #ccc; height: 20px; width: 100%;"></div>	%	<input type="text" value="0"/>	<input type="text" value="0"/>
<div style="border: 1px solid #ccc; height: 20px; width: 100%;"></div>	#	<input type="text" value="0"/>	<input type="text" value="0"/>
<div style="border: 1px solid #ccc; height: 20px; width: 100%;"></div>	%	<input type="text" value="0"/>	<input type="text" value="0"/>
<div style="border: 1px solid #ccc; height: 20px; width: 100%;"></div>	%	<input type="text" value="0"/>	<input type="text" value="0"/>
Quality - Other			
<div style="border: 1px solid #ccc; height: 20px; width: 100%;"></div>	%	<input type="text" value="0"/>	<input type="text" value="0"/>
Activities			
<div style="border: 1px solid #ccc; height: 20px; width: 100%;"></div>			

- Knowledge: #1
- Knowledge: #2
- Knowledge: #3
- Engaging: #1
- Experiencing: #1
- Experiencing: #2
- Experiencing: #3
- Experiencing: #4
- Experiencing: #5

Number of victims requesting service				#	0	0
				#	0	0
				%	0	0
Output						
Number of victims receiving services				#	0	0
				#	0	0
				%	0	0
Outcome						
Knowledge: #2				#	0	0
				%	0	0
Outcome - Other						
				#	0	0
				%	0	0
Q						
Specific Satisfaction: #1				%	0	0
Specific Satisfaction: #2						
Specific Satisfaction: #3						
General Satisfaction: #1						
Collaborator Satisfaction: #1				%	0	0
Collaborator Satisfaction: #2						
Activities						

+New 1 row(s)

Save

Check Errors

[Return to the Performance Measures Menu screen](#)

Excellent Victim Services Victim Services Program

Forms	Printable Version	Narratives	Printable Version
Applicant Summary		Victim Services Summary	
Certification Information		Volunteer Detail	
Agency Service Information		Problem Statement and Service Needs	
Jurisdiction		Project Summary	
Prorate VOCA Project Funds		Interagency Coordination	
Source of Funding		Community Collaboration	
		Performance Measures	
Budget	Printable Budget Printable Position Descriptions	Printouts	
* Salaries and Wages		DPS/VOCA Guidelines Effective 2/2007	
Fringe Benefits		DPS/VOCA Guidelines Effective 2/2013	
Travel		Child Abuse Core Measures	
* Professional and Outside Services		Domestic Violence Core Measures	
Equipment		Sexual Assault Core Measures	
* Training and Related Travel		Sexual Assault Hotline Core Measures	
Other Operating Expenses		Victim Witness Core Measures	
Match		General Conditions Effective 2/2009	
Budget Summary		Strategic Planning Manual	
Budget Prioritization and Justification			

140 points

Do not submit until all sections have been completed, saved, and checked for errors.

This Application must be completed and submitted by 3:00:00 PM on Friday, September 25, 2015.

Submit

Check Errors

Instructions

Salaries and Wages
Excellent Victim Services; Victim Services Program

Name and Title	Calculated Salary	VOCA Federal Amount	Match Type	Match Amount	Total Project Amount
Total Salaries and Wages					
	\$	\$		\$	\$

- +New** Personnel (Personnel Budget Detail Worksheet)
- +New** Volunteer (Volunteer Detail Worksheet)

Save **Check Errors**

■ + NEW for personnel (VOCA and/or match)

■ + NEW for volunteers (match)

Personnel Budget Detail Worksheet
Excellent Victim Services; Victim Services Program

[Return to Salaries and Wages](#)

Status

Existing position/staffed
 Existing position/vacant
 New position

Salutation

First Name

Middle Initial

Last Name

Classification

Educational Requirement

H.S. B.A. M.A./M.S.W Ph.D. J.D.D Other

Employment Begin Date

Employment End Date

Position Description (Please limit your response to 2000 characters)

	1st Quarter 10/1 - 12/31	2nd Quarter 1/1 - 3/31	3rd Quarter 4/1 - 6/30	4th Quarter 7/1 - 9/30	Total
Salary					
Rate per hour	\$ <input type="text" value="0"/>				
VOCA and Match hours per quarter	<input type="text" value="0"/>				
Non-VOCA hours per quarter	<input type="text" value="0"/>				
Total Hours	<input type="text" value="0"/>				
VOCA gross wages	\$ <input type="text" value="0"/>				

Fringe Benefits - Mandated

- Basic personnel information
- Position description
- Salary
 - VOCA hours per quarter
 - Non-VOCA hours per quarter

Total Hours	<input type="text" value="0"/>				
VOCA gross wages	<input type="text" value="\$0"/>				

Fringe Benefits - Mandated

FICA (7.65% of salary) Calculated Maximum FICA FICA

Unemployment*
 You have not yet chosen on the Forms Summary Page whether or not your agency is a reimbursing or contributing employer. Calculated Maximum Unemployment Unemployment
 Until that is done your unemployment amounts will equal 0.

Worker's Compensation (Rate per \$100) Calculated Maximum Worker's Compensation Worker's Compensation

Fringe Benefits - Voluntary

(Eligibility dates for voluntary insurance should be a consideration in budget development.)

Health Insurance

Dental Insurance

Disability Insurance

Life Insurance

Professional Malpractice Insurance

Fringe Benefits - Other

+New Other Fringe Benefit row(s)

Total

* \$7,000 = full-time rate; part-time is prorated

Save **Check Errors**

[Return to Salaries and Wages](#)

Fringe Benefits

Mandated

- FICA
- Unemployment
- Workers' Comp

Voluntary

- Health
- Dental
- Disability

Other

 Instructions

Volunteer Worksheet
Excellent Victim Services; Victim Services Program

[Return to Salaries and Wages](#)

Volunteer Title

Total Volunteer Value \$

Hourly Salary Rate \$

Position Description (Please limit your response to 2000 characters)

Comparable Gross Wages \$

Hours Devoted

FICA (at 7.65%) \$

Save

Check Errors

[Return to Salaries and Wages](#)

- Title
- Total Value
- Hourly salary rate
- Position description

Salaries and Wages

Excellent Victim Services; Victim Services Program

Name and Title	Calculated Salary	VOCA Federal Amount	Match Type	Match Amount	Total Project Amount
 Jane Doe Advocate	\$20,800	\$20,000	Cash	\$800	\$20,800
 Volunteer, Intern Counselor	\$3,000	\$0	In Kind	\$3,000	\$3,000
Total Salaries and Wages	\$23,800	\$20,000	VOCA Federal Amount	\$3,800	Match Amount
					\$23,800
					Total Project Amount

+New Personnel (Personnel Budget Detail Worksheet)

+New Volunteer (Volunteer Detail Worksheet)

Columns must equal



- Distinguish between VOCA Federal and Match amount
- Calculated salary & total project columns must equal

? Instructions

Fringe Benefits

Excellent Victim Services; Victim Services Program

Name	Description	Calculated Amount	VOCA Federal Amount	Match Type	Match Amount	Total Project Amount
Jane Doe	FICA	\$1,591	\$1,591	Cash	\$0	\$1,591
Jane Doe	Workers Compensation	\$312	\$312	Cash	\$0	\$312
Jane Doe	Health Insurance	\$1,400	\$0	Cash	\$1,400	\$1,400
Total Fringes		\$3,303	\$1,903		\$1,400	\$3,303

Save

Check Errors

- Name of individual and fringe description for each position is carried forward
- Indicate the VOCA Federal and Match Amounts
- Total Project Amount must equal the Calculated Amount

Travel

Excellent Victim Services; Victim Services Program

Description	Number of Miles	Mileage Rate	Calculated Total	VOCA Federal Amount	Match Type	Match Amount	Total Project Amount
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$0	\$ <input type="text"/>	<input type="radio"/> In Kind <input checked="" type="radio"/> Cash	\$ <input type="text"/>	\$ <input type="text"/>
Total Travel				\$0		\$0	\$0

+New row(s)

Columns must equal

Save

Check Errors

- Mileage costs (providing direct service)
- Agency's Board Approved Travel Policies or Federal Travel Rates
- Distinguish between VOCA Federal and match amount
- Match type

Instructions

Professional and Outside Services
Excellent Victim Services; Victim Services Program

Name	Hourly or Daily	Salary Rate	Hours or Days Devoted	Calculated Amount	VOCA Federal Amount	Match Type	Match Amount	Total Project Amount
Contractual rates may not exceed \$81.25 per hour or \$650 per day.				Total	\$0		\$0	\$0

+New

Save **Check Errors**

+NEW for contractor information

Contractor Information

Excellent Victim Services; Victim Services Program

[Return to Professional and Outside Services](#)

Contractor Company

Service Provided

Salutation

First Name

Middle Initial

Last Name

Address

City

State

Zip Code

[Return to Professional and Outside Services](#)

- Name of contracting agency
- Service being provided
- Name and address of contracting individual



Professional and Outside Services
Excellent Victim Services; Victim Services Program

Name	Hourly or Daily	Salary Rate	Hours or Days Devoted	Calculated Amount	VOCA Federal Amount	Match Type	Match Amount	Total Project Amount
John Doe	<input type="radio"/> Hourly <input type="radio"/> Daily	\$0.00	0	\$0	\$0	<input type="radio"/> In Kind <input checked="" type="radio"/> Cash	\$0	\$0

[Edit All Contractor Records](#)

Contractual rates may not exceed \$81.25 per hour or \$650 per day.

Total \$0 \$0 \$0

+New Outside Services row(s)

Save **Check Errors**

- Costs for consultant
- Hourly or daily rate (limits)
- Distinguish between what is requested from VOCA and used as match
- Match type

Instructions

Equipment
Excellent Victim Services; Victim Services Program

Item	Quantity	Purchase Price	Calculated Total	VOCA Federal Amount	Match Type	Match Amount	Total Project Amount
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$0	\$ <input type="text"/>	<input type="radio"/> In Kind <input checked="" type="radio"/> Cash	\$ <input type="text"/>	\$ <input type="text"/>
Total Equipment				\$0		\$0	\$0

+New Equipment row(s)

Save **Check Errors**

- Valued at \$5,000 or more
- Details of equipment to be purchased
- Distinguish between what is requested from VOCA or used as match
- Identify the match type

Instructions

Training and Related Travel
Excellent Victim Services; Victim Services Program

Description	Calculated Total	VOCA Federal Amount	Match Type	Match Amount	Total Project Amount
Total Cost		\$		\$	\$0

+New 1 Add New row(s)

Save

Check Errors

+New to add training

? Instructions

Training and Related Travel Detail

Excellent Victim Services; Victim Services Program

[Return to Training Related Travel](#)

Description	Airfare	Mileage	Registration Fee	Lodging Cost	Meals Cost	Number of Days	Calculated Total
	\$	\$	\$	\$	\$		\$
Training Related Travel Total							\$
	\$	\$	\$	\$	\$		\$
Conference Total							\$
Total Cost							\$0

+New 1 Add New row(s)

Save

Check Errors

[Return to Training Related Travel](#)

- Description of training by title or topic
- Costs for meals, lodging, registration fees

Instructions

Training and Related Travel
Excellent Victim Services; Victim Services Program

Description	Calculated Total	VOCA Federal Amount	Match Type	Match Amount	Total Project Amount
Domestic Violence Conference	\$0	\$0	<input type="radio"/> In Kind <input checked="" type="radio"/> Cash	\$0	\$0
Total Cost	\$0			\$0	\$0

+New Add New row(s)

Save **Check Errors**

- Distinguish between VOCA and match amount
- Identify the match type



Other Operating Expenses
Excellent Victim Services; Victim Services Program

Rent							
Description	Number of Months	Amount Per Month	Calculated Total	VOCA Federal Amount	Match Type	Match Amount	Total Amount

<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="radio"/> In Kind	\$ <input type="text"/>	\$ <input type="text"/>
					<input checked="" type="radio"/> Cash		

Utilities							
Description	Number of Months	Amount Per Month	Calculated Total	VOCA Federal Amount	Match Type	Match Amount	Total Amount

<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="radio"/> In Kind	\$ <input type="text"/>	\$ <input type="text"/>
					<input checked="" type="radio"/> Cash		

Supplies & Materials							
Description	Number of Months	Amount Per Month	Calculated Total	VOCA Federal Amount	Match Type	Match Amount	Total Amount

<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="radio"/> In Kind	\$ <input type="text"/>	\$ <input type="text"/>
					<input checked="" type="radio"/> Cash		

Communication Costs							
Type of Communication	Number of Months	Amount Per Month	Calculated Total	VOCA Federal Amount	Match Type	Match Amount	Total Amount

<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="radio"/> In Kind	\$ <input type="text"/>	\$ <input type="text"/>
					<input checked="" type="radio"/> Cash		

Printing						
Description	Amount Requested	VOCA Federal Amount	Match Type	Match Amount	Total Amount	

<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="radio"/> In Kind	\$ <input type="text"/>	\$ <input type="text"/>
			<input checked="" type="radio"/> Cash		

Emergency Expenses					
Description	Amount Requested	VOCA Federal Amount	Match Type	Match Amount	Total Amount

- Basic operating line items
- Pro-rate (if applicable)
- Monthly costs
- One-time costs
- Distinguish between VOCA and match amount
- Match type

Instructions

Match
Excellent Victim Services; Victim Services Program

Match Line Item	Category	Match Source	Match Type	Amount
Jane Doe	Salaries and Wages	<input type="text"/>	Cash	<input type="text" value="\$800"/>
Intern Counselor	Volunteer Salaries	<input type="text"/>	In Kind	<input type="text" value="\$3,000"/>
Jane Doe - Health Insurance	Fringe Benefits	<input type="text"/>	Cash	<input type="text" value="\$1,400"/>
				Total
				<input type="text" value="\$5,200"/>
Current Cash Match		Current In-Kind Match	Current Total Match	
<input type="text" value="\$2,200"/>		<input type="text" value="\$3,000"/>	<input type="text" value="\$5,200"/>	

- Identify source
- Verify match type identified correctly

Budget Summary

Excellent Victim Services; Victim Services Program

Budget Line Item	VOCA Federal Amount	Match Amount	Total Project Amount
Salaries and Wages	\$20,000	\$3,800	\$23,800
Fringe Benefits	\$1,903	\$1,400	\$3,303
Travel	\$0	\$0	\$0
Professional and Outside Services	\$0	\$0	\$0
Equipment	\$0	\$0	\$0
Other Operating Expenses	\$0	\$0	\$0
Current Totals	\$21,903	\$5,200	\$27,103
Current Percentages	81%	19%	100%

You are currently under-matched by the following amount: \$276.

You must do one of two things to reach your desired match amounts. You may either

1. Increase your Volunteer (In-Kind) match amount by \$276 or
2. To keep your current budget totals you may decrease your Federal Amount (in any budget category) by \$221 and increase your match by \$221 in order to reach the desired 80/20 split.

Based upon your current requested Federal amount of \$21,903 your Required Match is listed below. Any change to your requested Federal Amount will change your required match amount.

Required Totals	\$21,903	\$5,476	\$27,379
Required Percentages	80%	20%	100%

Check Errors

■ Verify match amount

■ System identified options



Budget Prioritization and Justification

Excellent Victim Services; Victim Services Program

Refer to Instructions screen to complete this section.

Personnel Prioritization

Limit your response to 5000 characters.

A large, empty rectangular text input area with a light blue border and a vertical scrollbar on the right side.

All Other Justification

Limit your response to 10000 characters.

A large, empty rectangular text input area with a light gray border and a vertical scrollbar on the right side.

Personnel

- Rank order
- Justify with supporting information (new)

All Other

- Rank order
- Justify with supporting information
- Explain pro-rating if used

Match

- Explain how match funds will be applied to project
- Explain pro-rating if used

Excellent Victim Services Victim Services Program

Forms	Printable Version	Narratives	Printable Version
Applicant Summary		Victim Services Summary	
Certification Information		Volunteer Detail	
Agency Service Information		Problem Statement and Service Needs	
Jurisdiction		Project Summary	
Prorate VOCA Project Funds		Interagency Coordination	
Source of Funding		Community Collaboration	
		Performance Measures	

Budget	Printable Budget	Printouts	
	Printable Position Descriptions		
Salaries and Wages		DPS/VOCA Guidelines Effective 2/2007	
Fringe Benefits		DPS/VOCA Guidelines Effective 2/2013	
Travel		Child Abuse Core Measures	
Professional and Outside Services		Domestic Violence Core Measures	
Equipment		Sexual Assault Core Measures	
Training and Related Travel		Sexual Assault Hotline Core Measures	
Other Operating Expenses		Victim Witness Core Measures	
Match		General Conditions Effective 2/2009	
Budget Summary		Strategic Planning Manual	
Budget Prioritization and Justification			

Do not submit until all sections have been completed, saved, and checked for errors.

This Application must be completed and submitted by 3:00:00 PM on Friday, September 25, 2015.

Submit

Check Errors

 **Instructions**

[Show all Instructions](#)

Congratulations, your Application has been successfully submitted.

Excellent Victim Services Victim Services Program

Forms	Printable Version	Narratives	Printable Version
Budget	Printable Budget Printable Position Descriptions	Printouts	
		DPS/VOCA Guidelines Effective 2/2007	
		DPS/VOCA Guidelines Effective 2/2013	
		Child Abuse Core Measures	
		Domestic Violence Core Measures	
		Sexual Assault Core Measures	
		Sexual Assault Hotline Core Measures	
		Victim Witness Core Measures	
		General Conditions Effective 2/2009	
		Strategic Planning Manual	

 **Instructions**

Please Make a Selection from the Following List

Child Crisis Advocacy	Currently Undefined	VOCA Application
Special Features WAGS Evaluation Public Forms and Information		

 **Instructions**

[Show all Instructions](#)

Congratulations, your Application has been successfully submitted.

Excellent Victim Services Victim Services Program

Forms

[Printable Version](#)

Narratives

[Printable Version](#)

Budget

[Printable Budget](#)
[Printable Position Descriptions](#)

Printouts

[DPS/VOCA Guidelines Effective 2/2007](#)

[Child Abuse Core Measures](#)

[Domestic Violence Core Measures](#)

[Sexual Assault Core Measures](#)

[Sexual Assault Hotline Core Measures](#)

[Victim Witness Core Measures](#)

[General Conditions Effective 2/2009](#)

[Strategic Planning Manual](#)



Review

[Printable Review](#)

[Review Summary](#)

[Budget Recommendations](#)

Reminders

Applications due by 3:00 pm on
September 25, 2015

Questions may be addressed to
Kate Henderson
602-223-2661 (khenderson@azdps.gov)

Helpful Hints

- Review the Guidelines, Strategic Planning Manual, Instruction Screens and General Conditions
- Required core measures must be included
- Pop-up blockers must be disabled for the system messages to be seen
- Use instruction screens
- Use only one browser session (do not open two browsers at once)
- Use navigational links (Not the browser arrows)
- Save, save, save
- Automatic time-out after 45 minutes
- Create budgets on paper/Excel prior to entering data
- Utilize word processing for long text (cut & paste/spell check/character count)
- Verify all pages with check for errors

Thank you for attending!
Please complete your evaluations

