

**FORT BEND COUNTY
COMMISSIONERS COURT AGENDA REQUEST FORM**
Return Completed Form to: Agenda Coordinator, County Judge's Office

Date Submitted: September 2, 2009	Submitted by: Stanford Polk, Supervisor
	Department: CSCD
Court Agenda Date: September 8, 2009	Phone Number: 281-238-3236

SUMMARY OF ITEM: On April 14, 2009 Commissioners Court authorized the electronic transmission of a CJD grant application for \$150,000 to fund a Felony Drug Court (CARD), Misdemeanor DWI Court, and Misdemeanor Drug Court Program for the time period of September 1, 2009 through August 31, 2010. This grant would be a county grant administered by the Community Supervision and Corrections Department. On September 1, 2009 the office of the governor electronically informed Fort Bend County that the aforementioned application for funding has been awarded in the amount of \$150,000 with no county matching funds. The total grant sum is for offender treatment services only.

RENEWAL AGREEMENT/APPOINTMENT: YES NO

List Supporting Documents Attached: Copy of the CJD Grant Application, CJD electronic notification dated September 1, 2009; and April 14, 2009 Commissioners Court Minutes

FINANCIAL SUMMARY:

BUDGETED ITEM: YES NO

Annualized Dollars: One Time (X)

FUNDNG SOURCE: CJD Grant Recurring (X)

Account Number: 100570999 **Agency:** 5701A **Activity:** G570-10CARD

Instructions to submit Agenda Request Form:

- Completely fill out agenda form: incomplete forms will not be processed.
- Agenda Request Forms may be submitted by e-mail, fax, or inter-office mail, and all back-up information must be provided by Wednesday at 2:00 p.m. to all those listed below.
- All original back-up must be received in the County Judge's Office by 2:00 p.m. on Wednesday.

DISTRIBUTION:

Original Form Submitted with back up to County Judge's Office X (✓ when completed)

If by E-Mail to _____ If by Fax to (281) 341-8609

Distribute copies with back-up to all listed below. If by fax, send to numbers below:

<input type="checkbox"/> Auditor (281-341-3774)	<input type="checkbox"/> Comm. Pct. 1 (281-342-0587)
<input type="checkbox"/> Budget Officer (281-344-3954)	<input type="checkbox"/> Comm. Pct. 2 (281-403-8009)
<input type="checkbox"/> Facilities/Planning (281-633-7022)	<input type="checkbox"/> Comm. Pct. 3 (281-242-9060)
<input type="checkbox"/> Purchasing Agent (281-341-8642)	<input type="checkbox"/> Comm. Pct. 4 (281-980-9077)
<input type="checkbox"/> Information Technology (281-341-4526)	<input type="checkbox"/> County Clerk (281-341-8697)
<input type="checkbox"/> Other:	<input type="checkbox"/> County Atty (281-341-4557)

RECOMMENDATION / ACTION REQUESTED:

It is requested that Commissioners Court approve the CJD grant award from the Office of the Governor, Criminal Justice Division with no match funds. Furthermore, it is requested that Commissioners Court approve the County Judge to electronically accept the \$150,000 grant award, with no county matching funds, as the authorized county official.

Agency Name: Fort Bend County

Grant/App: 1919103

Start Date:
9/1/2009

Project Title: Felony Drug Court (CARD), Misdemeanor DWI Court and Misdemeanor Drug Court

Status: Pending AO Acceptance of Award [FUND HOLD]

End Date:
8/31/2010

9:15
AM

- Eligibility
- Profile
- Narrative
- Activities
- Measures
- Budget
- Documents
- Accept.Award
- Summary
- My.Mail
- My.Home
- Details
- Source.of.Match
- Budget.Summary

General Information and Instructions

Introduction






This **Budget** section of your application details budget line items for your proposed project. To create a new budget line item in the **New Budget Item** column. You will be directed to a different area on this page to make selections specific to each category. After making your selection, write a brief description of the line item in the **Expenditure Description** box and enter an amount of CJD funds, Cash Match, and if applicable, In Kind Match in the areas provided. In the percentage box, you can enter a percentage for Personnel or number of items to be purchased for Supplies and/or Equipment. When you have finished, click on the **New Budget Line Item** button. Repeat this process for each budget line item needed in each budget category. If you have any questions or need help with your entries, click on the '+' icon to expand the budget grid. You will notice that a *pencil* icon will display after expanding the grid. Click on the *pencil* icon to be directed to the editing section on this page and follow the instructions in this area to complete your entries.

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on the **Save and Continue** button, your work will be lost. When you click the **Save and Continue** button, you may receive messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all fields are complete and correct.


In addition, you have a 2-hour time limit for each tab where you will need to complete the information correctly and then click on the **Save and Continue** button. There is a timestamp in the upper-right hand corner of the page that notes when you first clicked on the **Save and Continue** button. From that point, you have 2 hours to complete the information on that tab correctly. If you do not complete the information on that tab (fill in the required fields) and then you click on the **Save and Continue** button, you will be redirected to the eGrants Home Page. If this happens, your data will not be saved in the system. You may also choose to compose a message on this page for CJD to be done by typing in the **Notes By Grantee / CJD** message box.


Getting Started

On this tab you will notice certain icons that are displayed.

-  = a **plus** icon - click on this icon to expand a list of items.
-  = a **minus** icon - click on this icon to collapse a list of items.
-  = a **new** icon - click on this icon to add a new item.
-  = a **pencil** icon - click on this icon to edit your selections.
-  = an **information** icon - this help icon is next to certain items that may need further explanation. Simply click on the icon to view the information provided in the pop up window.

Select and Enter Budget Line Item Details

	Budget Category	CJD Funds	Cash Match	In Kind Match	GPI	
	Personnel	\$0.00	\$0.00	\$0.00	\$0.00	
	Contractual and Professional Services	\$150,000.00	\$0.00	\$0.00	\$0.00	
	CJD-Defined Line Item		CJD Funds	Cash Match	In Kind Match	GPI
	Substance Abuse-Related Case Management, Counseling, Outpatient,					

 and/or Treatment Services		\$150,000.00	\$0.00	\$0.00	\$0.00
Travel and Training	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Supplies and Direct Operating Expenses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indirect Costs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00


Budget Summary Totals

CJD Funds:	Cash Match:	In Kind Match:	GPI:	Total Proj:
<input type="text" value="\$150,000.00"/>	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>	<input type="text" value="\$150,000.00"/>

Export Your Budget Detail Item(s)



Notes by Grantee/CJD:

Note from Grantee to CJD 

From: <egrants@governor.state.tx.us>
To: <werleann@co.fort-bend.tx.us>, <polkstan@co.fort-bend.tx.us>, <Tatyana.J...>
Date: 9/1/2009 5:38 PM
Subject: eGrants: Notification of Grant Award for Grant Number: 1919103

It is a pleasure to inform you that your application for funding has been awarded!

The Criminal Justice Division is working to ensure that communities throughout the state receive the resources to make Texas a safer place by creating and supporting programs that protect people from crime, reduce the number of crimes committed, and promote accountability, efficiency, and effectiveness within the criminal justice system. Your project contributes to these efforts.

See the instructions below for specific information about activating your award. Please call the Criminal Justice Division at (512) 463-1919 if you have any questions. Thank you for your work and best wishes for a successful project.

Instructions for Activating Your Grant

To activate your agency's grant, the Authorized Official should log on to eGrants at <https://cjdonline.governor.state.tx.us> and go to the 'My Home' page. In the 'Project Status' column, locate the application(s) marked 'Pending Acceptance of Award'. Click on the grant number and proceed to the 'Accept Award' tab. At the bottom of this page you may click the appropriate tab to 'Accept' or 'Decline' the award for your grant.

[Print This Page](#)

Agency Name: Fort Bend County
Grant/App: 1919103 **Start Date:** 9/1/2009 **End Date:** 8/31/2010

Project Title: Felony Drug Court (CARD), Misdemeanor DWI Court and Misdemeanor Drug Court
Status: Pending AO Acceptance of Award

Eligibility Information

Introduction

The Criminal Justice Division (CJD) publishes funding opportunities, known as **Requests for Applications (RFA)**, through the Texas Secretary of State. Click [here](#) to visit the Secretary of State's website to locate the RFAs in the appropriate Texas Register issue.

In addition, CJD requires all applicants and grantee organizations to adhere to the *Texas Administrative Code (TAC)* as adopted. Click [here](#) to view the current TAC, or click [here](#) to view the previous versions of the TAC.

Submission Process

When applying for a grant pursuant to an **RFA** published in the *Texas Register* by CJD, applicants must submit their applications according to the requirements provided in the **RFA**. CJD may also consider applications for grants that are not submitted pursuant to an **RFA**. Applicants will be selected in accordance with *1 TAC, §3.7*.

Selection Process

All applications submitted to CJD are reviewed for eligibility, reasonableness, availability of funding, and cost-effectiveness. For applications submitted pursuant to an **RFA**, the executive director will select a review group, COG, or other designee to prioritize the applications and submit a priority listing to the executive director, who will render the final funding decision. A review group may include staff members, experts in a relevant field, and members of an advisory board or council. For more information regarding the selection process, see *1 TAC, §3.7*.

Funding Decisions

All grant funding decisions rest completely within the discretionary authority of CJD. The receipt of an application for grant funding by CJD does not obligate CJD to fund the grant or to fund it at the amount requested.

Neither the approval of a project nor any grant award shall commit or obligate CJD in any way to make any additional, supplemental, continuation, or other award with respect to any approved project or portion thereof.

CJD makes no commitment that a grant, once funded, will receive priority consideration for subsequent funding. For more information regarding the application process, see *1 TAC, §3.7* and *3.9*.

Adoptions by Reference

All grantees receiving federal and state funds must comply with the applicable statutes, rules, regulations, and guidelines related to the funding source under which the grant is funded. In instances where both federal and state requirements apply to a grantee, the more restrictive requirement applies. For more information regarding grant funding, see *1 TAC, §3.19*.

Community Plans

Each community, consisting of a single county or a group of counties, must file with a COG a community plan that addresses the community's criminal justice priorities. A community plan should assess local trends and data; identify problems, resources, and priorities; develop effective strategies; and set goals and objectives. For more information

regarding community plans, see 1 TAC, §3.51.

Juvenile Justice and Youth Projects

Juvenile justice projects or projects serving delinquent or at-risk youth, regardless of the funding source, must address at least one of the priorities developed in coordination with the Governor's Juvenile Justice Advisory Board to be eligible for funding. For more information regarding these priorities, see 1 TAC, §3.53.

Monitoring

CJD will monitor the activities of grantees as necessary to ensure that grant funds are used for authorized purposes in compliance with all applicable statutes, rules, regulations, guidelines, and the provisions of grant agreements, and that grantees achieve grant purposes. Grantees must make available to CJD or its agents all requested records relevant to a monitoring review. For more information regarding monitoring, see 1 TAC, §3.2601.

Your organization's Texas Payee/Taxpayer ID Number:

[REDACTED]

Application Eligibility Certify:

Created on:3/19/2009 9:17:12 AM By:Stanford Polk

Profile Information

Introduction

The **Profile Details** section collects information about your organization such as the name of your agency and project title, the geographic area your project will serve and information about your grant officials.

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct.

In addition, you have a 2-hour time limit for each tab where you will need to complete the information correctly and then click the **Save and Continue** button. There is a timestamp in the upper-right hand corner of the page that notes when you first clicked on the tab. From that point, you have 2 hours to complete the information on that tab correctly. If you do not complete the information correctly (for the required fields) and then you click on the **Save and Continue** button, you will be redirected to the eGrants Home Page. If this happens, your data will not be saved in the system. You may also choose to compose a message on this page for CJD to review. This can be done by typing in the **Notes By Grantee / CJD** message box.

Email Addresses & Grant Officials Information

Designating Grant Officials Within your Application:

Enter a valid and unique email address for each grant official and click the **Verify Email and Set Official to the Project** button. If you receive an error message regarding an email address, the grant official you are trying to assign to the project has not registered for a user account in eGrants. Please inform the agency's grant official or designee that they must log in to the [eGrants system](#), and register for a user account. If you need technical assistance, please contact the [eGrants Helpdesk](#) by email.

Updating Grant Officials on Active Grants:

To reassign a grant official - **Authorized Official, Financial Officer, Project Director, or Grant Writer** - to your grant project, ensure that the new official registers for a user account in eGrants **first**. Next, go to the Request Adjustment tab and check the box indicating you would like to Designate a New Grant Official, provide a brief explanation for the change in the Grant Adjustment Justification box, and then click the 'Create Adjustment Request' button. This will open the Profile.Details tab allowing you to make the appropriate changes. After you have entered a valid email address for the new Official, go to the Certify.Adjustment tab and click on the 'Certify Adjustment' button to send your request to CJD for review. If your organization is designating a new Authorized Official, check your records to see if a revised Resolution is required. Upload the approved Resolution to your grant project on the 'Summary / Upload Files' sub-tab. If you need technical assistance, please contact the [eGrants Helpdesk](#) by email.

Getting Started

On this tab you will notice a certain icon that is displayed.

- = an **information** icon - this help icon is next to certain items that may need further explanation. Simply click and review the information provided in the pop up window.

Applicant Agency Name: Fort Bend County
Project Title: Felony Drug Court (CARD), Misdemeanor DWI Court and Misdemeanor Drug Court
Division or Unit to Administer the Project: Fort Bend County Community Supervision and Corrections Department
Address Line 1: 4520 Reading Road Suite B
Address Line 2:
City/State/Zip: Rosenberg Texas 77471
Payment Address Line 1: 301 Jackson Street
Payment Address Line 2:
Payment City/State/Zip: Richmond Texas 77469
Start Date: 9/1/2009
End Date: 8/31/2010

Regional Council of Governments(COG) within the Project's Impact Area: Houston-Galveston Area Council
Headquarter County: Fort Bend
Counties within Project's Impact Area: Austin,Fort Bend,Harris,Matagorda,Waller,Wharton

Grant Officials:

Authorized Official

User Name: Robert Hebert
Email: werleann@co.fort-bend.tx.us
Address 1: 309 South 4th Street, Suite 719
Address 1:
City: Richmond, Texas 77469
Phone: 281-341-8608 Other Phone: 281-341-8634
Fax: 271-341-8609
Agency:
Title: The Honorable
Salutation: Judge

Project Director

User Name: Stanford Polk
Email: polkstan@co.fort-bend.tx.us
Address 1: 4520 Reading Road Suite B
Address 1:
City: Rosenberg, Texas 77471
Phone: 281-238-3236 Other Phone: 281-633-7200
Fax: 281-238-3235
Agency:
Title: Mr.
Salutation: Mr.

Financial Official

User Name: Robert Sturdivant
Email: Tatyana.Johnson@co.fort-bend.tx.us
Address 1: 309 S. 4th Street, Suite 533
Address 1:
City: Richmond, Texas 77469
Phone: 281-341-3760 Other Phone: 281-341-3769
Fax: 281-341-3774
Agency:
Title: Mr.
Salutation: Mr.

Grant Writer

User Name: Stanford Polk
Email: polkstan@co.fort-bend.tx.us
Address 1: 4520 Reading Road Suite B
Address 1:
City: Rosenberg, Texas 77471
Phone: 281-238-3236 Other Phone: 281-633-7200

Fax: 281-238-3235
Agency:
Title: Mr.
Salutation: Mr.

Grant Vendor Information

Introduction

The **Grant Vendor** section of the application collects grant payment information for your organization. The following items will be auto-filled from previous data you supplied in eGrants: Organization Type, State Payee Identification Number, and Data Universal Numbering System (DUNS) identifier (if applicable).

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct.

In addition, you have a 2-hour time limit for each tab where you will need to complete the information correctly and then click the **Save and Continue** button. There is a timestamp in the upper-right hand corner of the page that notes when you first clicked on the tab. From that point, you have 2 hours to complete the information on that tab correctly. If you do not complete the information correctly (for the required fields) and then you click on the **Save and Continue** button, you will be redirected to the eGrants Home Page. If this happens, your data will not be saved in the system. You may also choose to compose a message on this page for CJD to review. This can be done by typing in the **Notes By Grantee / CJD** message box.

Direct Deposit

In order to receive payments from CJD, complete the Vendor Direct Deposit Authorization and Application for Payee Identification Number forms which can be downloaded from the Texas Comptroller's at <https://fmx.cpa.state.tx.us/fm/forms/index.php> and Form W-9 which can be downloaded from the Internal Revenue Services' at <http://www.irs.gov/>. Send these completed and signed forms to the Office of the Governor, Financial Services Division, Post Office Box 12428, Austin, Texas 78711.

Getting Started

On this tab you will notice a certain icon that is displayed.

- = an **information** icon - this help icon is next to certain items that may need further explanation. Simply click and review the information provided in the pop up window.

Organization Type: County

Organization Option: applying to provide services to all others

Applicant Agency's State Payee Identification Number (e.g., Federal Employer's Identification (FEI) Number or Vendor ID): 17460019692080

Data Universal Numbering System (DUNS):

Payment Address Line 1: 301 Jackson Street

Payment Address Line 2:

Payment City/State/Zip: Richmond Texas 77469

Narrative Information

Introduction

The **Narrative** section is the description of your project. It is important that the information you provide about your project is clear and as concise as possible.

Note: All applicants must certify to the eligibility requirements specific to the fund source. The minimum requirements to complete this page are the **Program Requirements, Problem Statement, Supporting Data, Goal Statement,**


and **Project Summary** sections. We recommend that you complete any sections applicable to your project to assist in the application review process.

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct.

In addition, you have a 2-hour time limit for each tab where you will need to complete the information correctly and then click the **Save and Continue** button. There is a timestamp in the upper-right hand corner of the page that notes when you first clicked on the tab. From that point, you have 2 hours to complete the information on that tab correctly. If you do not complete the information correctly (for the required fields) and then you click on the **Save and Continue** button, you will be redirected to the eGrants Home Page. If this happens, your data will not be saved in the system. You may also choose to compose a message on this page for CJD to review. This can be done by typing in the **Notes By Grantee / CJD** message box.

Getting Started

On this tab you will notice a certain icon that is displayed.

-  = an **information** icon - this help icon is next to certain items that may need further explanation. Simply click and review the information provided in the pop up window.

Primary Mission and Purpose

The State Criminal Justice Planning (421) Fund supports programs designed to reduce crime and improve the criminal justice system.

Funding Levels

The anticipated funding levels for the Fund 421 program are as follows:

- Minimum Award - None
- Maximum Award - None
- The Fund 421 program does not require a grantee to provide matching funds.

For more information regarding grantee match, please click on the **Budget** tab, and then click on the **Source of Match**

Note: *If you voluntarily include matching funds that exceed the minimum match requirement, you will be held to that match for the grant period.*

Juvenile Justice Program Requirements

Preferences for Juvenile Justice - Preference will be given to applicants who demonstrate cost effective programs for comprehensive and effective approach to services that compliment the Governor's strategies.

Juvenile Justice Board Priorities - Juvenile justice projects or projects serving delinquent or at-risk youth will address the following priorities developed in coordination with the Governor's Juvenile Justice Advisory Board to be eligible for funding.

Prevention and Early Intervention at First Offense - Fund programs or other initiatives designed to positively impact youth involvement in the juvenile justice system or at their first offense and divert them from a path of serious, violent and chronic Programs may include support for school resource officers, alcohol and substance abuse education, mentoring and after

Disproportionate Minority Contact (DMC) - Decrease DMC, which exists if minority youth have a higher rate of contact with the justice system than do non-Hispanic white youth. Fund programs or other initiatives designed to address the disproportionate juvenile members of minority groups who come into contact with the juvenile justice system.

Gang Prevention and Intervention - Fund programs that address issues related to juvenile gang activity and the recruitment members. These issues include information sharing and prevention and intervention efforts directed at reducing gang-related

Specialized Treatment Services - Fund programs that address the use and abuse of illegal substances, prescription and drugs and alcohol. Counseling and professional therapy may also be provided to sex offenders and youth with anger management

Juvenile Justice System Impact - Fund programs designed to impact offender accountability or improve the practices, procedures within the juvenile justice system including rehabilitating and educating youth who have been involved in the

system so that future involvement in criminal activity is deterred.

Victim Assistance Program Requirements

Preferences for Victim Assistance - Preference will be given to applicants that promote comprehensive victim restoration incorporating an emphasis on cultural competency in underserved populations. Applicants are also encouraged to streamline administrative and reporting processes by consolidating grant requests whenever possible in lieu of submitting multiple requests.

Culturally Competent Victim Restoration - Applicants agree to promote collaboration and coordination among local agencies that involve multiple disciplines and support a seamless delivery of a continuum of services that focus on each individual's physical, mental, and emotional health while incorporating an emphasis on cultural competency in underserved populations. This type of approach is advocacy, law enforcement, prosecution, and other government and non-government services within a professional environment of cooperation and respect among service providers.

Provide a detailed description of how multiple disciplines within your community (city, county, district, etc.) fit into the program or enter 'N/A' if Victim Assistance does not apply to this project.

NA

Criminal Justice Program Requirements

Preferences for Criminal Justice Projects - Preference will be given to applicants that support law enforcement activities and improvements to technology.

Prohibition on Serving Certain Adult Offenders - Applicants will not serve adult offenders charged with, given deferred prosecution, or convicted of violent or other serious crimes including murder, arson, robbery, sexual assault, aggravated sexual assault, felony drug crimes, crimes against children, kidnapping, aggravated kidnapping, and manslaughter, unless the executive director grants an exception.

Eligible Activities - Applicant assures that its proposed project meets at least one of the following areas to be eligible:

- **Law Enforcement** - Supports state and local law enforcement agencies that address violent crime or statistically significant crime initiatives at the local level. Law enforcement agencies applying for equipment only or agencies applying for law enforcement training must apply under this program area unless they are seeking to purchase or enhance technology.
- **Prosecution and Court** - Programs that improve the prosecution of serious and violent crimes, including those that result in arrest to disposition.
- **Technology** - Programs that implement or expand a law enforcement agency's ability to report and analyze criminal intelligence assures that any criminal intelligence databases developed under this program will comply with 28 CFR Part 23.
- **Drug Treatment** - Programs that target substance abuse treatment for juveniles or adults who have been court-ordered to participate, including drug courts and projects that serve as alternatives to incarceration.

Note: Drug Courts are not eligible under the Drug Treatment activity area.

Criminal Justice Projects

Program Income - Applicant agrees to comply with all federal and state rules and regulations for program income and a program income that is generated as a result of the project's activities. Applicant agrees to report program income to CJD for formal grant adjustment and to secure CJD approval prior to use of the program income. Applicant agrees to use program income for allowable costs and agrees to expend program income immediately after CJD's approval of a grant adjustment and prior to reimbursement of CJD funds.

- **Deduction Method** - Program income shall be deducted from total allowable costs to determine the net allowable costs. Program income shall be used for current costs unless CJD authorizes otherwise. Program income which the grantee did not receive at the time of the award shall be used to reduce the CJD award and grantee match rather than to increase the funds available for the project.
- **Asset Seizures and Forfeitures** - Program income from asset seizures and forfeitures is considered earned when the asset has been adjudicated to the benefit of the plaintiff (e.g., law enforcement entity).

Uniform Crime Reporting - Applicant assures that they are current and will maintain timely reporting of required crime data to the Texas Department of Public Safety, have been current for the three previous years, and will continue reporting throughout the project.

Criminal History Reporting - Applicant assures that they are currently reporting and will maintain timely reporting of all required information under the Texas Code of Criminal Procedure, Chapter 60.

Constitutional Compliance - Applicant assures that they will engage in no activity that violates Constitutional law including but not limited to race.

Policies and Procedures – The drug court will develop and maintain written policies and procedures for the operation

Information Sharing – The applicant will submit a copy of any project evaluations, evaluation plans, recidivism studies reports that are completed during the grant period to CJD.

Jurisdiction - Provide the name of the court administering the Drug Court program (e.g., 999th Judicial District Court, County Criminal Court, or City of Somewhere Municipal Court). If this has not been decided enter 'To Be Determined', if item does not apply.

County Court at Law #4 DWI Court, County Court at Law #3 Misdemeanor Drug Court, Felony Drug Court (CARD)

Drug Court Date - If the Drug Court has commenced operations, provide the date that this Drug Court was established. Enter the date [mm/dd/yyyy]:

1/23/2002

Drug Court Type

- Adult - Programs serving adults (either pre-adjudication, post-adjudication, or reentry).
- Family - Programs serving parents who enter the drug court in relation to suits affecting the parent-child relationship, child welfare / CPS cases, child support cases, or other civil matters.
- Juvenile - Programs serving juveniles (either pre-adjudication, post-adjudication, or reentry).

Select the type of drug court that will be operated:

- Adult
- Family
- Juvenile
- N/A

Will the drug court accept **DWI offenders**?

Select the appropriate response:

- Yes
- No
- N/A

Presiding Judge - The presiding judge of a drug court funded with Drug Court funds must be an active judge holding a master's degree. Persons eligible for appointment may not be a former or retired judicial officer. Is the presiding judge of the drug court holding elective office or a master's degree?

Select the appropriate response:

- Yes
- No
- N/A

Enter the name of the **Presiding Judge** for the Drug Court. If this has not been decided enter 'To Be Determined', or if item does not apply.

CARD:Honorable Judge Ross Sears, Misd DWI Court:Honorable Judge Sandy Bielstein: Misd Drug Court:Honorable Susan Lowery

Enter the name of the **Drug Court Coordinator**. If this has not been decided enter 'To Be Determined', or enter 'N/A' if item does not apply.

Jim Syptak and Larry Elkins, Coordinators. Stanford Polk, Supervisor

Note: The Drug Court Coordinator usually monitors the operation of the Drug Court, supervises Drug Court staff, participates in court judicial staff meetings, prepares and oversees Drug Court contracts with service providers, maintains data on Drug Court and communicates with legal staff, government officials, social service agencies, and the public regarding matters of the Drug Court.

Has the drug court ever applied for **federal funding**?

Select the appropriate response:

- Yes
- No
- N/A

Has the drug court ever received **federal funding**?

Select the appropriate response:

- Yes
- No
- N/A

If you selected **Yes** above, provide the federal award amount, grant period [mm/dd/yyyy to mm/dd/yyyy], and explain be used to support or expand the project and not replace existing funds.

Enter the federal funding description:

Fort Bend County Felony Drug Court (CARD) was awarded a federal grant in the amount of \$499,838.00. The grant period was 04/02/2002 through 03/13/2005. The federal grant expired on 03/31/2005. Fort Bend County will use CJD funds to continue to provide treatment services for participants involved in the Felony Drug Court (CARD), Misdemeanor Drug Court and the Misdemeanor DWI Court Programs. CJD funds will also be used to increase the number of participants served through these three programs.

----- **END RESERVED AREA** -----

Civil Rights Liaison

A civil rights liaison who will serve as the grantee's civil rights point of contact and who will be responsible for ensuring meets all applicable civil rights requirements must be designated. The designee will act as the grantee's liaison in civil r CJD and with the federal Office of Justice Programs.

Enter the Name of the Civil Rights Liaison:

J.C. Whitten

Enter the Address for the Civil Rights Liaison:

309 South 4th Street Suite 719 Richmond, Texas 77469

Enter the Phone Number for the Civil Rights Liaison [(999) 999-9999]:

281-344-2950

Certification

Each applicant agency will certify to the specific criteria detailed above under **Program Requirements for Juvenile Justice Assistance, Criminal Justice**, and (if applicable) **Drug Court Program Requirements** to be eligible for funding under Criminal Justice (421) Fund Program Solicitations.

X I certify to all of the above eligibility requirements.

Problem Statement:

Please provide a detailed account in the Problem Statement section of the existing issues your project will target.

Enter your problem statement:

Supporting Data:

Provide as much supporting data, to include baseline statistics and the sources of your data, which are pertinent to where the grant project is located and/or targeted. Do not use statewide data for a local problem or national data for a statewide problem.

Enter your supporting data:

Community Plan:

For projects that have a local or regional impact target area, provide information regarding the community plan need (s) that your project will address.

Enter your community planning needs:

Goal Statement:

Provide a brief description of the overall goals and objectives for this project.

Enter a description for the overall goals and objectives:

Cooperative Working Agreement (CWA):

When a grantee intends to carry out a grant project through cooperating or participating with one or more outside organizations, the grantee must obtain authorized approval signatures on the cooperative working agreement (CWA) from each participating organization. Grantees must maintain on file a signed copy of all cooperative working agreements, and they must submit to CJD a list of each participating organization and a description of the purpose of each **CWA**. Cooperative working agreements do not involve an exchange of funds.

For this project, provide the name of the participating organization(s) and a brief description of the purpose(s) for the **CWA(s)**. You should only provide information here that this project's successful operation is contingent on for the named service or participation from the outside organization.

Note: A **Sample CWA** is available for your convenience.

Enter your cooperating working agreement(s):

Continuation Projects:

For continuation projects only, if your current or previous year's project is **NOT** on schedule in accomplishing the stated objectives, briefly describe the major obstacles preventing your organization from successfully reaching the project objectives as stated within your previous grant application. (Data may be calculated on a pro-rated basis depending on how long the current or previous year's project has been operating.)

Enter your current grant's progress:

Project Summary:

Briefly summarize the entire application, including the project's problem statement, supporting data, goal, target group, activities, and objectives. Be sure that the summary is easy to understand by a person not familiar with your project and that you are confident and comfortable with the information if it were to be released under a public information request.

Enter your summary statement for this project:

Project Activities Information

Introduction






The **Project Activities** section of the application gathers information about the type of activities your project will incorporate.

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct.

In addition, you have a 2-hour time limit for each tab where you will need to complete the information correctly and then click the **Save and Continue** button. There is a timestamp in the upper-right hand corner of the page that notes when you first clicked on the tab. From that point, you have 2 hours to complete the information on that tab correctly. If you do not complete the information correctly (for the required fields) and then you click on the **Save and Continue** button, you will be redirected to the eGrants Home Page. If this happens, your data will not be saved in the system. You may also choose to compose a message on this page for CJD to review. This can be done by typing in the **Notes By Grantee / CJD** message box.

Getting Started

On this tab you will notice certain icons that are displayed.

-  = a **pencil** icon - click on this icon to edit your selections.
-  = a **pencil** icon with a **red slash** through it - click on this icon to cancel your edits.
-  = a **red delete** icon - click on this icon to delete the item.
-  = a **diskette** icon - click on this icon to save your work. When this icon appears, it is your queue to save the item that you are working on; otherwise, your data will be lost.
-  = an **information** icon - this help icon is next to certain items that may need further explanation. Simply click and review the information provided in the pop up window.

Juvenile Justice

Juvenile Justice Board Priorities

Select the Juvenile Justice Priority that best fits your project, or select 'N/A' if Juvenile Justice does not apply to this prc

- Prevention and Early Intervention at First Offense
- Gang Prevention and Intervention
- Specialized Treatment Services
- Juvenile Justice System Impact
- N/A

calculated and reviewed during business meetings. Program effectiveness is measured through employment rate of graduates, termination reasons, graduation rates, and retention rates. Recidivism rates are tracked each year to determine the programs long-term effects on participants. Through recidivism rates, the programs success can be compared to other programs to determine the cost benefit of each program. In July 2007 the Fort Bend County Community Supervision and Corrections Department contracted with the National Drug Court Institute who provided technical assistance to the Felony Drug Court, Misdemeanor DWI Court and the Misdemeanor Drug Court Programs. This resource maybe use in the future to determine effectiveness and enhancement of each program. Provide the total cost for operating your project during the previous fiscal year. (This should include all salaries, travel, treatment services, office supplies, etc.)

620900

List the sources and amounts of non-CJD funding used to support this project during the previous fiscal year. (This may state funds and any other charges to participants.)

Local County Funds: \$43,731.00 TAIP Expenditures: \$103,121.00 CARD Participation Fees: \$43,384.00 CARD Treatment Co-payment: \$12,990.00 DWI Court Fees: \$16,138.00 TDCJ-CJAD Drug Court Grant and Basic Supervision Funds: \$188,491.00 Private Donations: \$2,131.00 Access to Recovery: \$28,954.00 Treatment Providers' DSHS Funding: \$27,875. Misdemeanor Drug Court Drug Testing Fees: \$7,621

List the treatment resources used for this project (e.g., ATR, TAIP, in-house, etc.).

In addition to CJD funds, treatment resources includes Access to Recovery (ATR), TAIP, local funds and when available treatment providers' DSHS funding. Due to the limited amount of ATR funding allocated to Fort Bend County this resource has been utilized on a limited bases.

Fees collected by your County in accordance with Chapter 102.0178, Code of Criminal Procedure, for offenses found in Code (DWI) and Chapter 481, Health and Safety Code (controlled substances):

Provide the total collected in the previous fiscal year by your county. (The party responsible for collecting court assesse county may be the treasurer, county clerk, or district clerk.)

12598

Of the fees collected in your county, provide the amount that was directed to your project?

0

Describe how your project used those fees?

The above amount is the total collected through 03/26/09. Currently these fees are on reserve and will be used to supplement treatment,drug testing, general supervision and any other applicable services associated with the programs.

----- **END RESERVED AREA** -----

Selected Project Activities:

ACTIVITY PERCENTAGE: DESCRIPTION

Drug Court - Adult	100.00	<p>Provide court supervised substance abuse treatment to adult offenders as an alternative to traditional criminal or civil sanctions The programs are special "Problem-Solving" courts given the responsibility to handle cases involving drug-using/and DWI offenders through intense supervision, random alcohol/drug testing, alcohol/drug treatment and immediate sanctions and incentives. Initially, offenders are under daily contact from members of the Court Teams, which includes weekly court appearances and office visits with supervision officers. Participants are referred to drug/alcohol treatment within twenty fours hours of entering the program. Treatment options utilized by the Courts are intensive outpatient, supportive outpatient, individual counseling, 12 step meetings, psychological counseling and residential alcohol/drug treatment. With the exception of participatants in the DWI Court Program, all must complete Moral Reconciliation Therapy, which is a cognitive behavior program. Participants may also be referred to educational and job training based on individual needs. Graduated sanctions, including jail time, are imposed for noncompliance. Sanctions include admonishments by the court, more restrictive conditions, curfew, and phase demotion within the program. Electronic monitoring, jail time, community service, and prison for a day program, along with writing assignments are also utilized. Conversely, incentives are applied for continual compliance. Incentives include certificates of achievement, gifts and gift certificates, praise from the bench, court applause, less restrictive conditions within the program, promotion within program, and ultimate dismissal of the case if eligible. A defendant who has met his/her requirements for the week will be a Lifesaver for that week. Participants also participate in a monthly group social.</p>
-----------------------	--------	--

Geographic Area:

Fort Bend County

Target Audience:

The Felony Drug Court (CARD) targets non-violent offenders who are charged with a felony offense where the underlying circumstances of the offense involve substance abuse. The Misdemeanor Drug Court targets an individual charged with a Misdemeanor drug offense. The DWI Court targets individuals who have been charged with a subsequent misdemeanor DWI and first time offenders who through a screening process have been determined to have a serious problem with alcohol.

Gender:

Male and female offenders are eligible for the programs

Ages:

Age seventeen (17) or older

Special Characteristics:

Prospective participants should exhibit a level of commitment to change behavior that is indicative of someone seeking to break the cycle of their addiction and raise the level of their ability to remain a law abiding citizen.

Measures Information

Introduction





The **Project Measures** section of the application collects data to track the performance of your proposed project toward its stated objectives. Output measures demonstrate the level of activity of a project. Outcome measures demonstrate the impact of a project in a targeted area, reflecting the extent to which the goals and objectives of the project have been achieved. Output and outcome measures displayed on this page correspond to activities selected or created on the **Activities** page.

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct.

In addition, you have a 2-hour time limit for each tab where you will need to complete the information correctly and then click the **Save and Continue** button. There is a timestamp in the upper-right hand corner of the page that notes when you first clicked on the tab. From that point, you have 2 hours to complete the information on that tab correctly. If you do not complete the information correctly (for the required fields) and then you click on the **Save and Continue** button, you will be redirected to the eGrants Home Page. If this happens, your data will not be saved in the system. You may also choose to compose a message on this page for CJD to review. This can be done by typing in the **Notes By Grantee / CJD** message box.

Getting Started

On this tab you will notice certain icons that are displayed.

-  = a **pencil** icon - click on this icon to edit your selections.
-  = a **pencil** icon with a **red slash** through it - click on this icon to cancel your edits.
-  = a **diskette** icon - click on this icon to save your work. When this icon appears, it is your queue to save the item that you are working on; otherwise, your data will be lost.
-  = an **information** icon - this help icon is next to certain items that may need further explanation. Simply click and review the information provided in the pop up window.

Progress Reporting Requirements

All programs will be required to report the output and outcome measures for this program to Texas A&M University, Pul Institute ().

Objective Output Measures

OUTPUT MEASURE	CURRENT DATA	TARGET LEVEL
Number of new enrollments in the program.	72	100
Number of participants in the program. ("Participants" should include the number in the program at the beginning of the reporting period plus the number of enrollments - example: total number served.)	199	200
Number of people assessed for eligibility to participate in the program.	388	565

Custom Objective Output Measures

CUSTOM OUTPUT MEASURE	CURRENT DATA	TARGET LEVEL
-----------------------	--------------	--------------

Objective Outcome Measures

OUTCOME MEASURE	CURRENT DATA	TARGET LEVEL
Number of participants employed or enrolled in school at time of drug court graduation (part time or full time).	48	70
Number of participants that earn a GED, high school diploma, or vocational training credential while in the program.	8	15
Number of participants that successfully complete the program.	52	80

Custom Objective Outcome Measures

CUSTOM OUTCOME MEASURE	CURRENT DATA	TARGET LEVEL
------------------------	--------------	--------------

Documents Information

Introduction


The **Supporting Documentation** section of the application contains general grantee requirements. Please select or enter the appropriate responses in the areas below.

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct.

In addition, you have a 2-hour time limit for each tab where you will need to complete the information correctly and then click the **Save and Continue** button. There is a timestamp in the upper-right hand corner of the page that notes when you first clicked on the tab. From that point, you have 2 hours to complete the information on that tab correctly. If you do not complete the information correctly (for the required fields) and then you click on the **Save and Continue** button, you will be redirected to the eGrants Home Page. If this happens, your data will not be saved in the system. You may also choose to compose a message on this page for CJD to review. This can be done by typing in the **Notes By Grantee / CJD** message box.

Getting Started

On this tab you will notice a certain icon that is displayed.

-  = an **information** icon - this help icon is next to certain items that may need further explanation. Simply click

and review the information provided in the pop up window.

Certification and Assurances

Each applicant must click on this link to review the standard

Resolution from Governing Body

Except for state agencies, each applicant must provide information related to the resolution from its governing body, such as council, county commissioners' court, school board, or board of directors. Please ensure that the resolution approved by the governing body addresses items one through four below.

1. Authorization by your governing body for the submission of the application to CJD that clearly identifies the name of the project for which funding is requested;
2. A commitment to provide all applicable matching funds;
3. A designation of the name and/or title of an authorized official who is given the authority to apply for, accept, renege, or terminate a grant (Note: If a name is provided, you must update CJD should the official change during the grant period);
4. A written assurance that, in the event of loss or misuse of grant funds, the governing body will return all funds to the state.

Upon approval from your agency's governing body, upload the approved resolution to eGrants by clicking on the **Upload** button located in the **Summary** tab.

Contract Compliance

Will CJD grant funds be used to support any contracts for professional services?

Select the Appropriate Response:

- Yes
 No

For applicant agencies that selected **Yes** above, describe how you will monitor the activities of the sub-contractor(s) for the contract provisions (including equipment purchases), deliverables, and all applicable statutes, rules, regulations, and policies governing this project.

Enter a description for monitoring contract compliance:

All contract provisions related to case management will be monitored by conducting on-site visits at the contractor's office. Furthermore, clients' files (if applicable) will be reviewed for compliance with contract provisions. These on-site visits will be documented and conducted in accordance with the CSCD approved contract monitoring plan as required by TDCJ-CJAD.

Lobbying

For applicant agencies requesting grant funds in excess of \$100,000, have any federally appropriated funds been paid or attempted to be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, amendment, or modification of any federal contract, grant loan, or cooperative agreement?

Note: Pursuant to Texas Government Code §556.005, a political subdivision or private entity that receives state funds is prohibited from using state funds to pay a person required to register as a lobbyist or for lobbying expenses. A political subdivision or private entity that receives state funds is not eligible to receive additional state funds.

Select the Appropriate Response:

- Yes
 No
 N/A

For applicant agencies that selected either **No** or **N/A** above, have any non-federal funds been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal contract, loan, or cooperative agreement?

Select the Appropriate Response:

- Yes
 No
 N/A

Fiscal Year

Provide the begin and end date for the applicant agency's fiscal year (e.g., 09/01/20xx to 08/31/20xx).

Enter the Begin Date [mm/dd/yyyy]:

10/1/2009

Enter the End Date [mm/dd/yyyy]:

9/30/2010

Sources of Financial Support

Each applicant must provide the amount of grant funds expended during the most recently completed fiscal year for the

Enter the amount (\$) of Federal Grant Funds:

12227713

Enter the amount (\$) of State Grant Funds:

6940884

Single Audit

Has the applicant agency expended federal grant funding of \$500,000 or more, or state grant funding of \$500,000 or more during the most recently completed fiscal year?

Select the Appropriate Response:

Yes

No

Note: Applicants who expend less than \$500,000 in federal grant funding or less than \$500,000 in state grant funding during the Single Audit Act and cannot charge audit costs to a CJD grant. However, CJD may require a limited scope audit as a condition of award. See Circular A-133.

Applicant agencies that selected **Yes** above, provide the date of your organization's last annual single audit, performed by an external auditor (in accordance with the Single Audit Act Amendments of 1996 and OMB Circular A-133).

Enter the date of your last annual single audit:

5/30/2008

Equal Employment Opportunity Plan (EEOP)

Type I Entity: Defined as an applicant that meets one or more of the following criteria:

- the applicant has less than 50 employees;
- the applicant is a non-profit organization;
- the applicant is a medical institution;
- the applicant is an Indian tribe;
- the applicant is an educational institution, or
- the applicant is receiving a single award of less than \$25,000.

Requirements for a Type I Entity:

- The applicant is not required to prepare an EEOP because it is a Type I Entity as defined above, pursuant to 28 CFR 42.301, et seq., subpart E;
- the applicant will comply with applicable federal civil rights laws that prohibit discrimination in employment and in the provision of services.

Type II Entity: Defined as an applicant that meets the following criteria:

- the applicant has 50 or more employees, and
- the applicant is receiving a single award of \$25,000 or more, but less than \$500,000.

Requirements for a Type II Entity: Federal law requires a Type II Entity to formulate an EEOP and keep it on file.

- The applicant agency is required to formulate an EEOP in accordance with 28 CFR 42.301, et seq., subpart E;
- the EEOP is required to be formulated and signed into effect within the past two years by the proper authority;
- the EEOP is available for review by the public and employees or for review or audit by officials of CJD, CJD's designee, or the Inspector General.

- Civil Rights, Office of Justice Programs, U.S. Department of Justice, as required by relevant laws and regulations;
- the applicant will comply with applicable federal civil rights laws that prohibit discrimination in employment and in th services; and
 - the EEOP is required to be on file in the office of (enter the name and address where the EEOP is filed below):

Enter the name of the person responsible for the EEOP and the address of the office where the EEOP is filed:
Kent Edwards, Human Resource Director, 4520 Reading Road Suite A Rosenberg,Texas 77471

Type III Entity: Defined as an applicant that is NOT a Type I or Type II Entity.

Requirements for a Type III Entity: Federal law requires a Type III Entity to formulate an EEOP and submit it for appro Civil Rights, Office of Justice Programs, U.S. Department of Justice.

- The EEOP is required to be formulated and signed into effect within the past two years by the proper authority;
- the EEOP has been submitted to the Office of Civil Rights (OCR), Office of Justice Programs, U.S. Department of Just approved by the OCR, or it will be submitted to the OCR for approval upon award of the grant, as required by relevant I regulations; and
- the applicant will comply with applicable federal civil rights laws that prohibit discrimination in employment and in th services.

Based on the definitions and requirements above, the applicant agency certifies to the following entity type:
Select the appropriate response:

- Type I Entity
- Type II Entity
- Type III Entity

Debarment

Each applicant agency will certify that it and its principles:

- Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federa State or Federal Court, or voluntarily excluded from participation in this transaction by any federal department or agent
- Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered ag commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (fec local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property; or
- Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or lc commission of any of the offenses unenumerated in section 1.2(a) in the Certification and Assurances document cited abc **Introduction**; and have not within a three-year period preceding this application had one or more public transactions (local) terminated for cause or default.

Select the appropriate response:

- I Certify
- Unable to Certify

If you selected **Unable to Certify** above, please provide an explanation as to why the applicant agency cannot certify t
Enter the debarment justification:

Fiscal Capability Information

Introduction

This **Fiscal Capability** section of the application collects information from nonprofit corporations applying for CJD grant funds.

Note: If you are NOT a nonprofit corporation, this information is not applicable; therefore, the 'Printer Friendly' version will be blank for all information collected in the Fiscal Capability section.

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct.

In addition, you have a 2-hour time limit for each tab where you will need to complete the information correctly and then click the **Save and Continue** button. There is a timestamp in the upper-right hand corner of the page that notes when you first clicked on the tab. From that point, you have 2 hours to complete the information on that tab correctly. If you do not complete the information correctly (for the required fields) and then you click on the **Save and Continue** button, you will be redirected to the eGrants Home Page. If this happens, your data will not be saved in the system. You may also choose to compose a message on this page for CJD to review. This can be done by typing in the **Notes By Grantee / CJD** message box.

Organizational Information

Enter the Year in which the Corporation was Founded:

Enter the Date that the IRS Letter Granted 501(c)(3) Tax Exemption Status:

Enter the Employer Identification Number Assigned by the IRS:

Enter the Charter Number assigned by the Texas Secretary of State:

Accounting System

The grantee organization must incorporate an accounting system that will track direct and indirect costs for the organization (ledger) as well as direct and indirect costs by project (project ledger). The grantee must establish a time and effort system for personnel costs by project. This should be reported on an hourly basis, or in increments of an hour.

Is there a list of your organization's accounts identified by a specific number (i.e., a general ledger of accounts)?

Select the appropriate response:

- Yes
- No

Does the accounting system include a project ledger to record expenditures for each Program by required budget cost center?

Select the appropriate response:

- Yes
- No

Is there a timekeeping system that allows for grant personnel to identify activity and requires signatures by the employee supervisor?

Select the appropriate response:

- Yes
- No

If you answered 'No' to any question above in the Accounting System section, in the space provided below explain what you have taken to ensure accountability.

Enter your explanation:

Financial Capability

Grant agencies should prepare annual financial statements. At a minimum, current internal balance sheet and income statement are required. A balance sheet is a statement of financial position for a grant agency disclosing assets, liabilities, and retained earnings at a given point in time. An income statement is a summary of revenue and expenses for a grant agency during a fiscal year.

Has the grant agency undergone an independent audit?

Select the appropriate response:

- Yes
- No

Does the organization prepare financial statements at least annually?

Select the appropriate response:

- Yes
- No

According to the organization's most recent Audit or Balance Sheet, are the current total assets greater than the liabilities?

Select the appropriate response:

- Yes
- No

If you selected 'No' to any question above under the Financial Capability section, in the space provided below explain what was taken to ensure accountability.
Enter your explanation:

Budgetary Controls

Grant agencies should establish a system to track expenditures against budget and / or funded amounts.

Are there budgetary controls in effect (e.g., comparison of budget with actual expenditures on a monthly basis) to include grant funds in excess of:

a) Total funds authorized on the Statement of Grant Award?

Yes

No

b) Total funds available for any budget category as stipulated on the Statement of Grant Award?

Yes

No

If you selected 'No' to any question above under the Budgetary Controls section, in the space provided below please explain what will be taken to ensure accountability.

Enter your explanation:

Internal Controls

Grant agencies must safeguard cash receipts, disbursements, and ensure a segregation of duties exist. For example, or not have authorization to sign checks and make deposits.

Are accounting entries supported by appropriate documentation (e.g., purchase orders, vouchers, receipts, invoices)?

Select the appropriate response:

Yes

No

Is there separation of responsibility in the receipt, payment, and recording of costs?

Select the appropriate response:

Yes

No

If you selected 'No' to any question above under the Internal Controls section, in the space provided below please explain what will be taken to ensure accountability.

Enter your explanation:

Budget Details Information

Introduction

This **Budget** section of your application details budget line items for your proposed project. To create a new budget line item, click on the icon in the **New Budget Item** column. You will be directed to a different area on this page to make selections specific to the budget category. After making your selection, write a brief description of the line item in the **Expenditure Description** box and enter the amount of CJD funds, Cash Match, and if applicable, In Kind Match in the areas provided. In the percentage box, you can enter a percentage for Personnel or number of items to be purchased for Supplies and/or Equipment. When you have finished, click on the **Add New Budget Line Item** button. Repeat this process for each budget line item needed in each budget category. If you need to edit your entries, click on the '+' icon to expand the budget grid. You will notice that a *pencil* icon will display after expanding the grid. Click on the *pencil* icon to be directed to the editing section on this page and follow the instructions in this area to complete your edits.






Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct.

In addition, you have a 2-hour time limit for each tab where you will need to complete the information correctly and

then click the **Save and Continue** button. There is a timestamp in the upper-right hand corner of the page that notes when you first clicked on the tab. From that point, you have 2 hours to complete the information on that tab correctly. If you do not complete the information correctly (for the required fields) and then you click on the **Save and Continue** button, you will be redirected to the eGrants Home Page. If this happens, your data will not be saved in the system. You may also choose to compose a message on this page for CJD to review. This can be done by typing in the **Notes By Grantee / CJD** message box.

Getting Started

On this tab you will notice certain icons that are displayed.

-  = a **plus** icon – click on this icon to expand a list of items.
-  = a **minus** icon – click on this icon to collapse a list of items.
-  = a **new** icon – click on this icon to add a new item.
-  = a **pencil** icon - click on this icon to edit your selections.
-  = an **information** icon - this help icon is next to certain items that may need further explanation. Simply click and review the information provided in the pop up window.

Budget Information by Budget Line Item:

CATEGORY	SUB CATEGORY	DESCRIPTION	CJD	CASH MATCH	IN-KIND MATCH	GPI	TOTAL	UNIT/%
Contractual and Professional Services	Substance Abuse-Related Case Management, Outpatient, and/or Treatment Services	Fort Bend County will contract with Fort Bend Regional Council to provide outpatient substance abuse counseling to include individual and group counseling and to be available to address and interpret clinical issues and questions that may arise. Fort Bend Regional Council is designated to serve the Misdemeanor DWI Court Program, approximately 50% of the Felony Drug Court Program and a portion of the Misdemeanor Drug Court Program.	\$110,000.00	\$0.00	\$0.00	\$0.00	\$110,000.00	0
		Fort Bend County will contract with The Turning Point to provide outpatient substance abuse counseling to include individual						

Contractual and Professional Services	Substance Abuse-Related Case Management, Counseling, Outpatient, and/or Treatment Services	and group counseling and to be available to address and interpret clinical issues and questions that may arise. The Turning Point is designated to serve approximately 50% of the Felony Drug Court Program and a portion of the Misdemeanor Drug Court Program.	\$40,000.00	\$0.00	\$0.00	\$0.00	\$40,000.00	0
---------------------------------------	--	--	-------------	--------	--------	--------	-------------	---

Source of Match Information

Introduction

The **Source of Match** section of your application collects information regarding the source and amount of **Cash Match** and **In Kind Match**. Please enter the description and amounts of match in the spaces provided below and select whether the item is 'Cash Match' or 'In-Kind Match'. After entering an item click on the **Add New Item** button. When an item has been added, it will appear in the 'Edit the Source(s) of Match Reported' table. You may edit each of the items added to this table by clicking on the 'pencil' icon. If you edited an item in the table, click on the 'diskette' icon to save your edited entries.



For further information regarding matching funds refer to 1 TAC, §3.3; for program income refer to 1 TAC, §3.73 and §3.87.

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct.

In addition, you have a 2-hour time limit for each tab where you will need to complete the information correctly and then click the **Save and Continue** button. There is a timestamp in the upper-right hand corner of the page that notes when you first clicked on the tab. From that point, you have 2 hours to complete the information on that tab correctly. If you do not complete the information correctly (for the required fields) and then you click on the **Save and Continue** button, you will be redirected to the eGrants Home Page. If this happens, your data will not be saved in the system. You may also choose to compose a message on this page for CJD to review. This can be done by typing in the **Notes By Grantee / CJD** message box.

Getting Started

On this tab you will notice certain icons that are displayed.

-  = a **pencil** icon - click on this icon to edit your selections.
-  = an **information** icon - this help icon is next to certain items that may need further explanation. Simply click and review the information provided in the pop up window.

Detail Source of Match/GPI:

DESCRIPTION	MATCH TYPE	AMOUNT
-------------	------------	--------

Summary Source of Match/GPI:

Total Report	Cash Match	In Kind	GPI Federal Share	GPI State Share
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Budget Summary Information

Budget Summary Information by Budget Category:

CATEGORY	CJD	CASH MATCH	IN-KIND MATCH	GPI	TOTAL
Contractual and Professional Services	\$150,000.00	\$0.00	\$0.00	\$0.00	\$150,000.00

Budget Grand Total Information:

CJD	CASH MATCH	IN-KIND MATCH	GPI	TOTAL
\$150,000.00	\$0.00	\$0.00	\$0.00	\$150,000.00

Condition Of Fundings Information

DESCRIPTION	CREATED	MET	HOLD FUND
	8/18/2009 8:48:24 PM		True

You are logged in as **User Name:** Stanpolk