

Governor's Office of Crime Control & Prevention

Electronic Grant Application



Governor's Office of Crime Control & Prevention
300 E. Joppa Road
Suite 105
Towson, MD 21286

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Overview

The Governor's Office of Crime Control & Prevention (GOCCP) requires electronic submission of grant applications using our Electronic Grant Application software. This software was designed to be user-friendly and include numerous features that help streamline the grant application process and ensure the accuracy and completeness of submitted data.

Technical Requirements/Notes

- Internet Connection
- Windows-based operating system (Windows 9x or above)
- Screen display resolution of 800 x 600 pixels (or higher)
- **Proxy Server**

If your organization uses a proxy server, it may need to be properly configured in order to successfully connect to the grant application system. If in doubt, contact your network's IT staff.

Organization Number

- You must have the Organization ID Number of the **applying agency**.
- To obtain a copy of or request an Organization ID Number, please email changes@goccp-state-md.org
- If you have never received grant funds from the Governor's Office of Crime Control & Prevention, you must submit the required information (listed below) **on letterhead**, which **must be signed by the Authorized Official (AO)** (County Executive, Mayor, Commissioner, Town Administrator, Executive Director, President, or CEO) of the Parent Organization. Alternate authorized signatures are not permitted on this request.

The above noted letter must include:

1. Full, legal name and address (including phone and fax numbers, e-mail and a website address if applicable) of the organization that funds will be granted to.
2. Contact information for **Authorized Official of Parent Organization** (Name, title, address, phone, fax, and e-mail). - The authorized official is the person legally responsible for accepting grant funds for your organization (County Executive, Mayor, Commissioner, Town Administrator, Executive Director, President, or CEO).
3. If the Implementing Agency differs, in name or location, from the Parent Organization, include all of the Implementing Agency information (official name, address, phone, fax, e-mail, and website if applicable).
4. Contact information for the **Project Director** and **Financial Officer** of the applying organization, or Implementing if that is where they are physically assigned. (Name, title, address, phone, fax, and e-mail).

5. The Program Name or 4-digit acronym for the grant you are applying for (ex: Violence Against Women Act (VAWA))
6. All **new applicants** must submit a copy of the letter originally received by the Parent Organization from the IRS assigning a Federal EIN number (IRS determination letter). If the Implementing Organization has a different Federal EIN number than that of the Parent Organization, then they too must submit a copy of the IRS determination letter assigning a Federal EIN number. If you can not locate this letter you must contact the IRS for a copy.

To provide you with an Organization Number in a timely manner, initial submission of the required documents can be faxed to 410-321-3116, or emailed, as a PDF attachment, to changes@goccp-state-md.org. Either way the letter must be on letterhead and contain the original signature of the Authorized Official (AO).

Once these documents are accepted **you will receive your Organization Number via e-mail**. If there are any discrepancies you will be contacted via phone. This will allow for you to make any necessary corrections, or changes, before mailing the original hard copy of the letter and IRS document.

After receiving your Organization Number, **mail the original letter and IRS back-up** documentation to:

**Governor's Office of Crime Control & Prevention
300 E. Joppa Road, Suite 1105
Towson, MD 21286-3016**

Failure to follow the above instructions will prevent your organization from obtaining an Organization ID, which will prevent the ability to apply for grant funds.

Application Submission Requirements

In addition to electronic submission, applicants are required to submit hard/printed copies of the grant application with original signatures; the number of required copies is outlined in the Notice of Funding Availability (NOFA). Please attach any letters of support, appendices, and attachments to the printed, paper version. If the hard copies are not received by the date stated in the NOFA, the application will not be considered.

Technical Assistance

If you require technical assistance during business hours, please contact GOCCP IT staff at 410-821-2828 or by e-mail at changes@goccp-state-md.org. We welcome your comments and recommendation on how this system can be improved.

Using the System

Login/Connection

The GOCCP Electronic Grant Application software requires an active Internet connection. When using the system the system, please do not leave your session connected indefinitely; log off when you have finished using the system.

Data Entry Suggestions - Narrative Sections

To help ensure accuracy, applicants are encouraged to use word processing applications, such as WordPerfect or Microsoft Word, to create, edit, and spell check text for submission with grant application and grant award reports. Text from these programs can be copied into that narrative-based field in the application software.

Application Submission/Saving Data

The program does not require all data for a new application to be entered in a single session. It is possible to save partial data for a request or report and to use several sessions to complete the work. When all data has been entered, the data may be submitted to GOCCP for review by clicking on the appropriate submit command button. Once data has been submitted to GOCCP, the user will not be able to make edits to that particular submission.

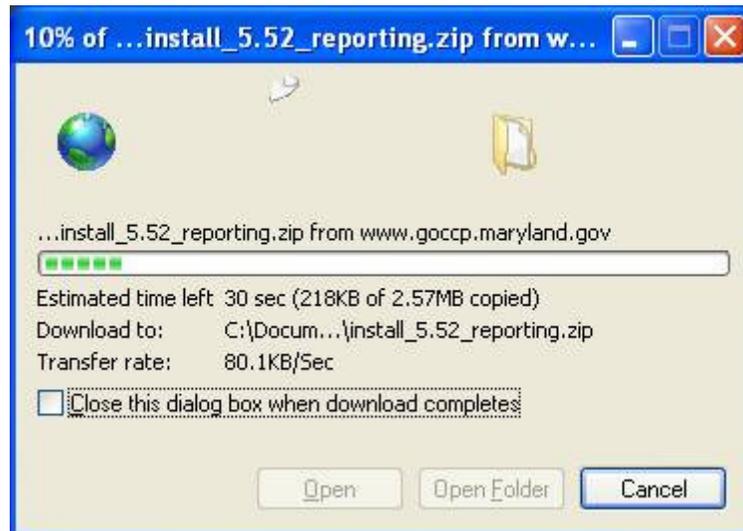
Navigation tools

The following icons/buttons are used to navigate and perform actions throughout the Electronic Reporting software:

	Add new record		Delete a record
	Save edits		Delete/Cancel edits
	Move forward one record		Move back one record
	Move forward ten records		Move back one record
	Move forward last record		Move back to first record
		Spell Checker	

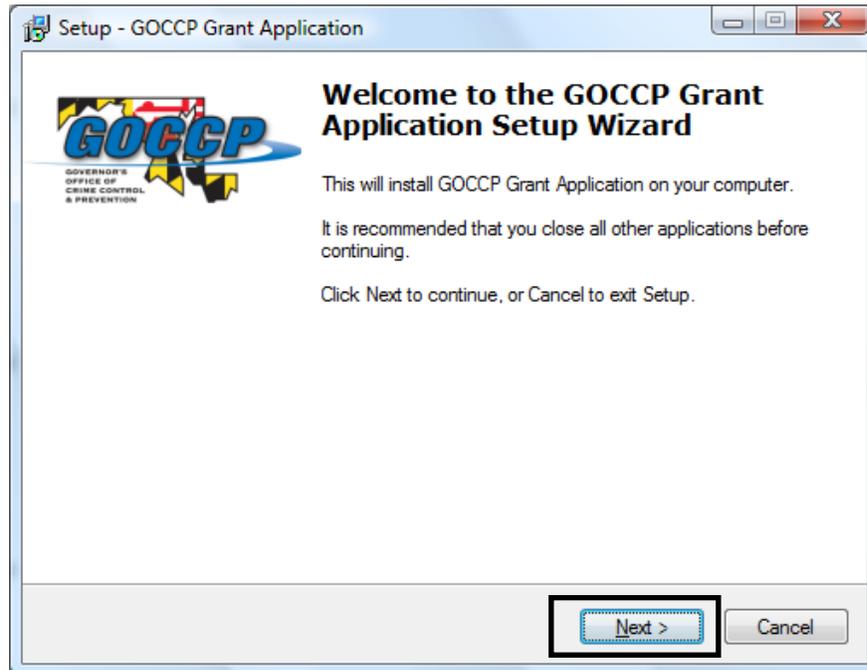
Downloading and installing the application

- From your web browser, go to <http://www.goccp.maryland.gov>
- Click on the “Grants and Programs/Grantee’s Area” link.
- Click the “Apply for a grant” link.
- Click the “Download Grant Application software” link. (The current version number and the date it was posted to the website are displayed.)
- When prompted, select the save option to save the installation file to your computer. **We recommend saving the installation file directly to your desktop for easier access.**
- A dialog box, displaying the download progress, may be displayed on screen.



- When the download is complete, close your web browser. You are ready to install the electronic application program.
- Navigate to the location where you saved the installation file (named “InstallGOCCP.exe”). Double click on the file/icon. The installation wizard will begin to help guide you through the rest of the installation process.

- On the “Welcome” menu click the **Next** button.



- When prompted to “Choose Destination Location”, select the default destination folder C:\GOCCP, by clicking the Next button. (Check with your Systems Administrator if you have questions about the appropriate destination folder).
- On the “Select Program Manager Group” menu, click on the **Next** button to add the GOCCP Grant Application icons to the “Grant Application” Program Manager Group.
- On the “Ready to Install” menu, click the **Install** button to install the GOCCP Grant Application software.
- When prompted, click “Finish” on to complete the installation.
- The wizard will automatically exit.
- You are now ready to complete your grant application on-line.

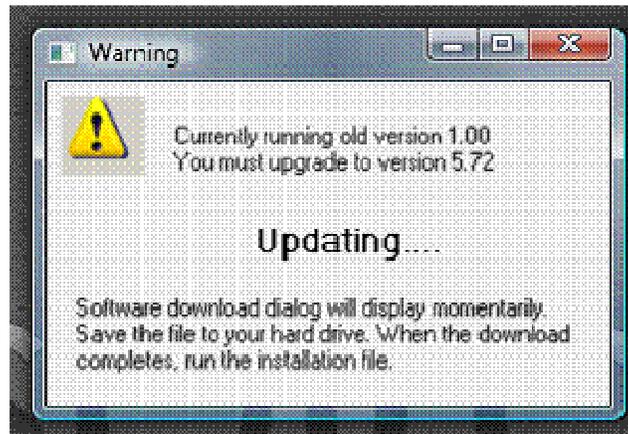
Updating the application

During the login process (see next section), the system checks to ensure that you are running the most recent version of the software. If running an older version, you will be prompted to update the application.



To continue with the update process, select “Update Now.”

The system will initiate the download of the newest version of the application. Once completed, please complete the installation process as detailed in the “Downloading and installing the application” section.



Logging-in

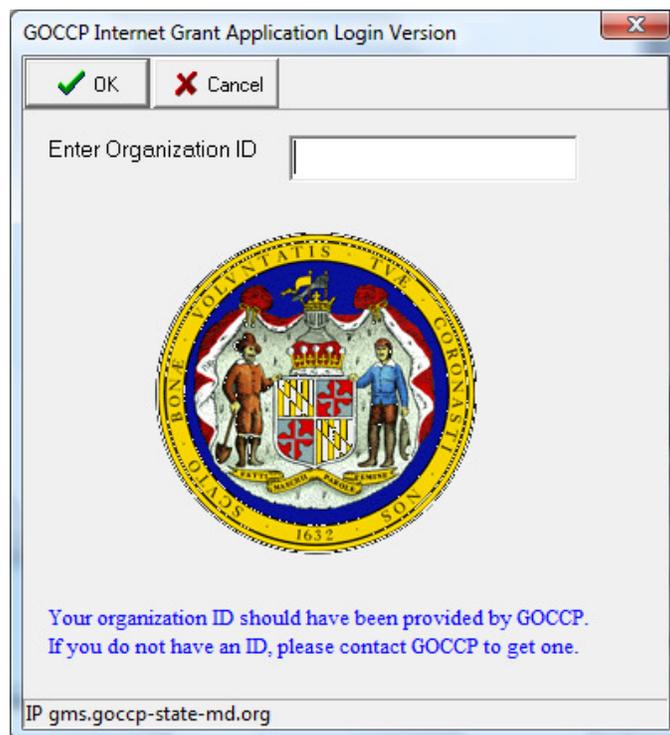
During the installation process, the system will place the GOCCP Application icon on the desktop:



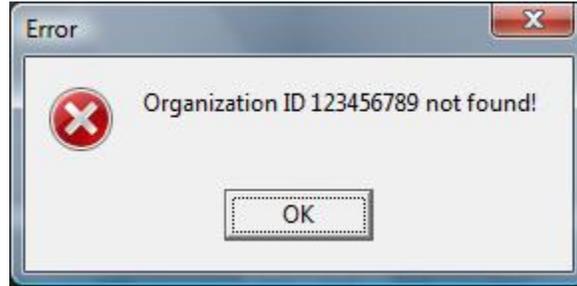
Double click on GOCCP Application icon to launch the application log-in form.

The system will prompt for your organization ID. If you did not receive an organization ID number, please contact our office to request one. You must login using the Organization ID Number that corresponds to the **applying agency**.

Enter the organization ID and click on OK.

The image shows a Windows-style dialog box titled "GOCCP Internet Grant Application Login Version". At the top left, there are two buttons: "OK" with a green checkmark and "Cancel" with a red X. Below the buttons is a text label "Enter Organization ID" followed by an empty text input field. In the center of the dialog is the Great Seal of the State of Maryland, which features a shield with a red cross and a white background, flanked by two figures (a Native American and a European) holding a scroll. The seal is encircled by a blue border with the Latin motto "SCOTIA HONORATA VINCIT" and the year "1632". At the bottom of the dialog, there is a blue text message: "Your organization ID should have been provided by GOCCP. If you do not have an ID, please contact GOCCP to get one." The bottom left corner of the dialog contains the URL "IP gms.goccp-state-md.org".

If an incorrect organization ID is entered, the system will display the following error message:



When you click the OK button, you will be disconnected from the server. You will have to launch the program again and re-enter the correct organization code.

Main Menu

When the organization ID has been validated, the system will display the main menu. Command buttons line the left margin of the screen; these buttons allow the user to create a new application, edit an existing application, print an application or delete an application. The name of the organization corresponding to the organization ID entered is displayed below the state seal graphic.

Stateless Http via WinInet Web Server gms.goccp-state-md.org - Version 5.78 August 10, 2009 Video resolution 1152 x 864

Files Utility Help

- Create New Application
- Edit Existing Application
- Print
- Submit
- Delete
- Help
- Close

Grant Application Form

Governor's Office of Crime Control & Prevention
300 East Joppa Road, Suite 1105
Baltimore, MD 21286-3016
Email: Info@goccp-state-md.org
(410) 821-2828

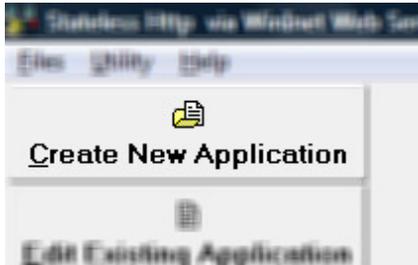
A blank application can be downloaded from our web-site:
It is available in Microsoft Word
www.GOCCP.maryland.gov
Martin O'Malley, Governor
Anthony G. Brown, Lt. Governor



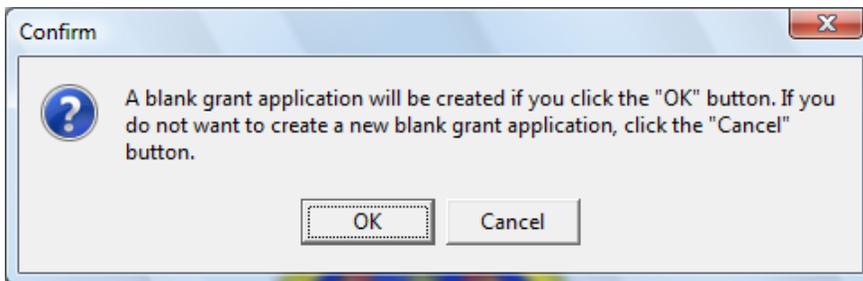
You are logged in as:
[Lunches R Us](#)

Creating a New Application

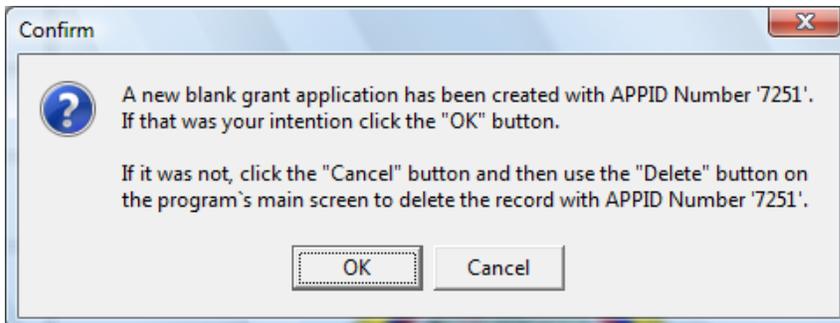
To begin a new grant application, click on the 'Create New Application' button on the Main Menu.



The system will inform you that you are creating a new application and will ask you to click the 'OK' button to begin a new blank grant application. Click OK to continue.



The system will prompt you to confirm your selection. Click OK to continue.



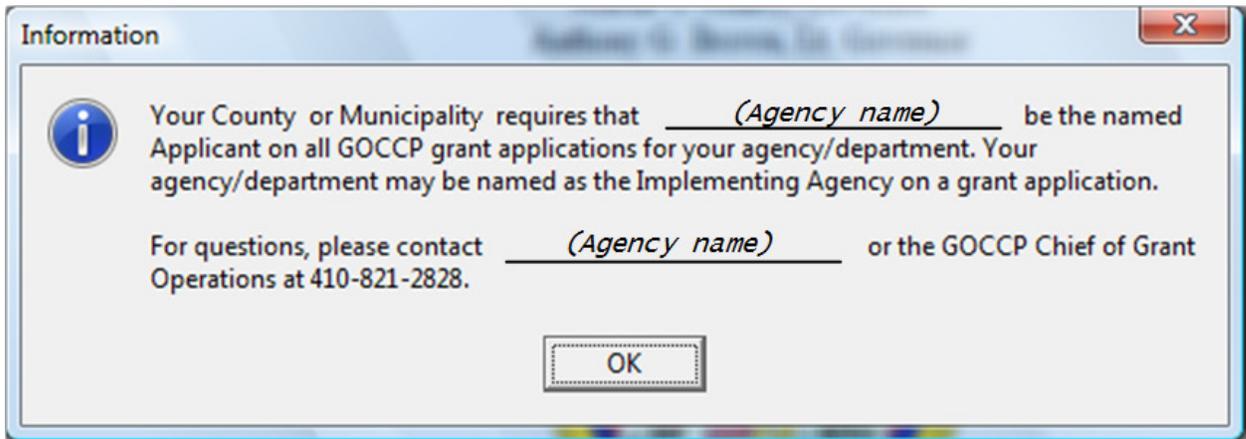
IMPORTANT

Please do not click the 'Create New Application' button until you are ready to begin your application. If you begin an application and do not complete or submit it, please delete it by clicking the Delete button and selecting the appropriate application. Applications that are in pending status longer than 60 days will be deleted by GOCCP.

Agencies Restricted from Applying for Grant Funds Directly

Certain counties and legal local municipalities restrict their sub-units, agencies, departments, etc., from applying for grants funds directly. In these instances, only users logged in using the organization code that corresponds to county or municipality may create an application.

If a user from a restricted agency (one who is restricted from applying directly for funds) attempts to create an application, the system will display the following message:

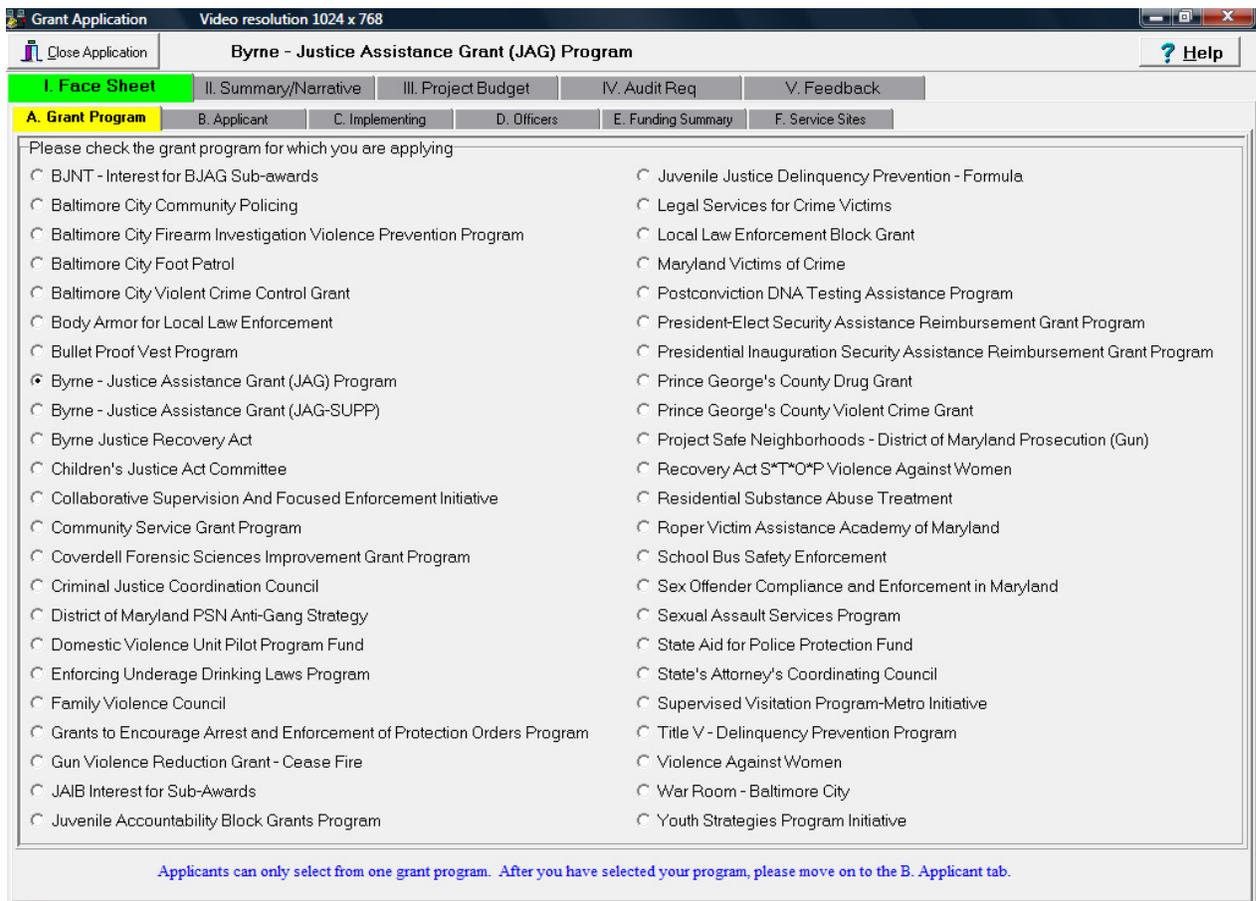


Face Sheet

A. Completing the “Grant Program” tab

The Grant Program tab will display a list grant programs funded through GOCCP. Please select the appropriate grant program from the list. The program title can be found on the NOFA letter.

Not all available grant programs may be listed; if the program you are requesting funding for is not listed, please contact GOCCP for technical assistance.



B. Completing the “Applicant” tab

Organization ID: _____ Name of person entering grant application data: _____
 Save Cancel Phone number: _____

Requested Funding Period (Not to exceed 12 months)
 Proposed Start Date _____ End Date _____ Funding Year **First** _____

Applicant

Name **Governor's Office of Crime Control Prevention**
 Organization Type **State Agency**
 Federal ID No. _____
 Authorized Official _____
 Title **Executive Director**
 County **Baltimore County**
 Address of Applicant **300 East Joppa Road, Suite 1105
 Baltimore, MD 21286**

[If this information is not correct, please e-mail or call our office,
 e-mail address is \[changes@goccp-state-md.org\]\(mailto:changes@goccp-state-md.org\) or call \(410\) 821-2828.](#)

Requested Funding Period

Select the proposed start date and end date of the project according to the guidelines in the NOFA. Please note, the project period cannot exceed 12 months (1 calendar year).

Funding Year

If this is the first year of GOCCP funding for a program, please select “First.” If this is a continuation grant, please specify which year of the grant you are applying for funding. The system allows a selection of up to 10 years of funding.

Name of person entering grant application data

This information will be used by GOCCP staff to contact the appropriate person if there are any questions or concerns regarding an application.

Applicant

The name and address of the applicant are displayed under the **Applicant** header. If any of the information is incorrect, you may request that the information be updated by clicking on the Send Updates Via Email command button. This will create an e-mail with certain fields prepopulated; simply enter the updated/requested information and send the e-mail.

Authorized Official

The authorized official is the person responsible for signing the grant application or award. It is typically the Chief Executive Officer of an organization. For a city, it would usually be a Mayor, for counties it would be the County Executive or Council Chair. For state agencies it should be the Executive Director or Secretary. For non-profit agencies it is usually the Director. **Please note:** any request to change the authorized official must be submitted on agency letterhead and must include the signature of the new authorized official.

C. Completing the “Implementing” tab

The Implementing Agency is the organization responsible for carrying out the project activities. Many times this will be the same as the applicant agency. However, it is not uncommon for organizations to sub-contract the work in the grant to another eligible agency. Either way, please designate the agency that will undertake the project on this tab.

Under project title, please type in the title of the program you are proposing for funding. **Please see NOFA guidelines for proper naming of a project.** You must enter a project title and save it before moving to the next tab.

Under the Implementing Agency/Organization heading, the name of the agency corresponding to the Organization ID used to login to the system will be displayed.

If you wish to change the implementing agency, click the **Change Implementing Agency** button.

The screenshot shows a web application window titled "frmApplication" with a "Recovery Act S*T*O*P Violence Against Women" header. The interface includes a "Close Application" button and a "Help" button. A navigation bar contains tabs for "I. Face Sheet", "II. Summary/Narrative", "III. Project Budget", "IV. Feedback", and "V. Audit Req". Below this, a sub-navigation bar highlights "C. Implementing" and includes "A. Grant Program", "B. Applicant", "D. Officers", "E. Funding Summary", and "F. Service Sites".

At the top of the main form area, there are "Save" and "Cancel" buttons, and a "Change Implementing Agency" button which is circled in red. To the right of this button is an "Organization Help" button with a question mark icon. Below these buttons, the "Project Title" field is empty, with a note: "(Please do NOT enter Project Title using all capital letters)". A text input field contains "Sample Project Title".

The "Implementing Agency/Organization" section displays the following information:

Implementing Agency/Organization	Lunches R Us
Organization Type	State Agency
County	Baltimore City
Address	123 Street
	Raspeburg MD 21206

Below the form, there is a text box with the following instructions:

The implementing agency is the organization that carries out the activities outlined in the application. Sometimes the implementing agency is different from the agency applying for the grant. If that is the case, please identify that agency here. If the organization is not listed, please contact our office at the e-mail or phone number below so that we can add them to our system.

Implementing address will be changed upon selecting save.

If you can not find the organization you are looking for, press the Organization Help button.

If this information is not correct, please e-mail or call our office,
e-mail address is changes@goccp-state-md.org or call (410) 821-2828.

To change the implementing agency, the new organization must already exist in the GOCCP database. Search for the organization name by entering a word that appears in the organization name in the edit box.

Click the Get New Data button. All organizations that have a name that includes that word will be displayed in a grid below. Double clicking on the grid row containing the desired new agency will insert the new Implementing Agency data.

The screenshot shows the 'Grant Application' window for 'Maryland Victims of Crime'. The 'C. Implementing' tab is active. A 'Get New Data' button is circled in red. The search word 'University of Maryland' is entered in the search box. Below the search box is a detailed instruction block explaining the search process and providing an example.

Get New Data Search Word:

To change the implementing agency, the new organization must already exist in the GOCCP database. Search for the organization name by entering in the edit box a word (usually a proper noun) that appears in the organization name. Then click the new data button. All organizations that have a name that includes that word will be displayed in a grid below. Double clicking on the grid row containing the desired new agency will insert the new Implementing Agency data.

For example, if you type "Bowie" in the Search Word edit box and then click the Get New Data button, all organizations in the GOCCP database that have "Bowie" as part of their name will be listed in the grid. The search is case sensitive so entering "bowie" would not find organizations that have "Bowie" in their name.

- If you cannot find the organization you are searching for, please consider the following:
 - Many times organizations have an official name such as Division of Parole and Probation and a common name like Parole & Probation or P&P.
 - Do not start names with A, An, or The
 - Include the Jurisdiction – Many counties use the same titles for their various agencies/departments. Enter the county first, i.e., Somerset County Department of Aging, and Wicomico County Department of Aging.
- If the implementing organization is not in the system, please e-mail us as indicated above.

D. Completing the “Officers” tab

This tab is used to designate the person who will oversee the implementation of the grant and the person to contact for fiscal issues.

Project Director

Select the appropriate contact from the dropdown menu. If the contact is in our records, their title and appropriate contact information will be displayed below. If the information displayed is incorrect, please click on the **Send Updates via Email command button**. You may also contact our office by e-mail at changes@goccp-state-md.org. Once you select the appropriate officer, please click the “Save” button before proceeding.

The project director names in the drop down will default only to those employees associated with either the Applicant or Implementing Agency.

Grant Application Video resolution 1152 x 864

Maryland Victims of Crime

I. Face Sheet II. Summary/Narrative III. Project Budget IV. Audit Req V. Feedback

A. Grant Program B. Applicant C. Implementing **D. Officers** E. Funding Summary F. Service Sites

The database may list many individuals as contacts. Select the project director and the fiscal officer from the current list of contacts in the drop down edit box. If a contact is not listed in the drop down edit box, click the button labeled "Add New Contact" to add a new contact. If you add a new contact and their address is different from the their organization's address, click the new address button. Changes can only be made to new contacts you have added. No changes can be made to organization data.

If you want to change the information for an organization, please e-mail: changes@goccp-state-md.org or phone (410) 821-2828

Project Director Fiscal Officer Edit Contact Data

Select a Contact for Project Director:

<- click button to open dropdown

Currently Selected Project Director

Last Name: First Name: MI: Salutation: Suffix: Mail Label Prefix:

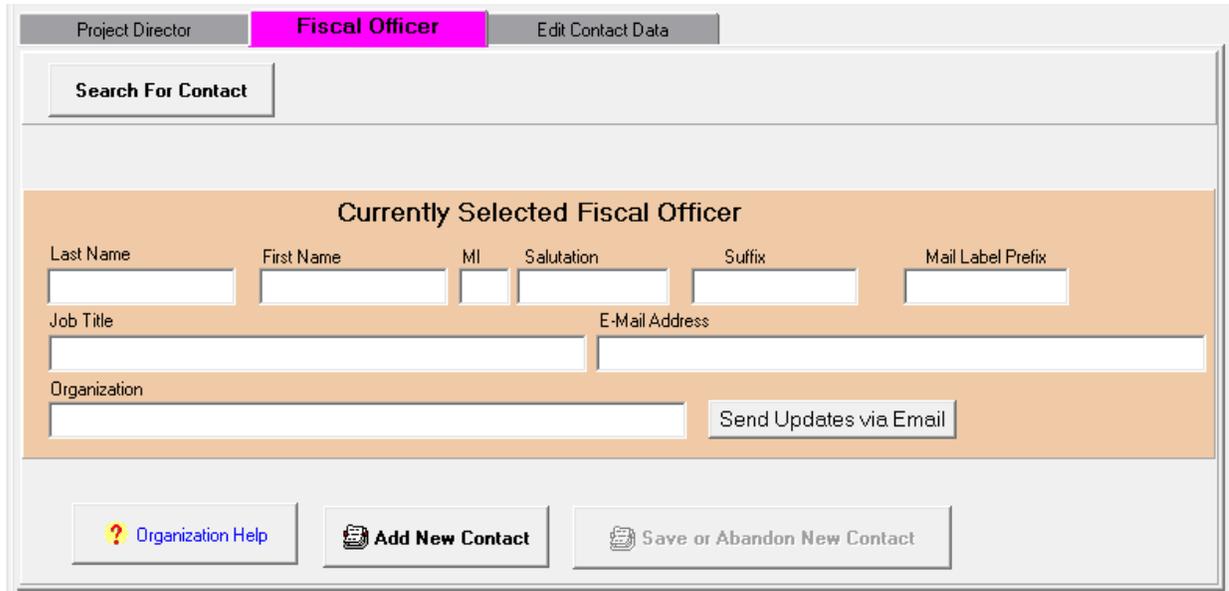
Job Title: E-Mail Address:

Organization: **Send Updates via Email**

Organization Help Add New Contact Save or Abandon New Contact

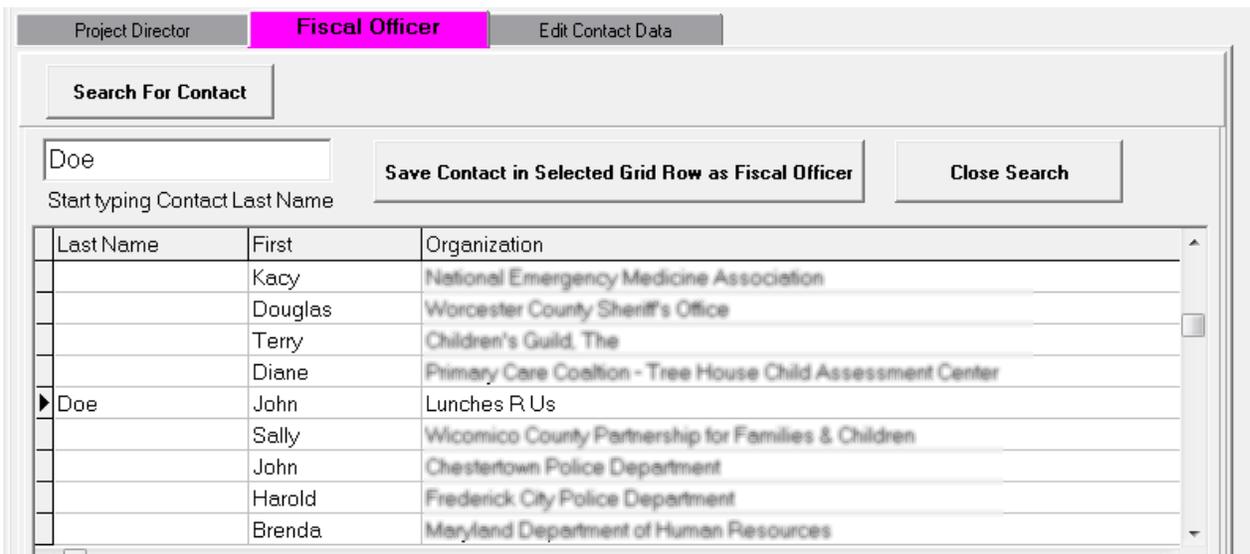
Fiscal Officer

The Fiscal Officer need not be associated with the applicant or implementing organization selected on the grant application; you are free to select any contact in our system.



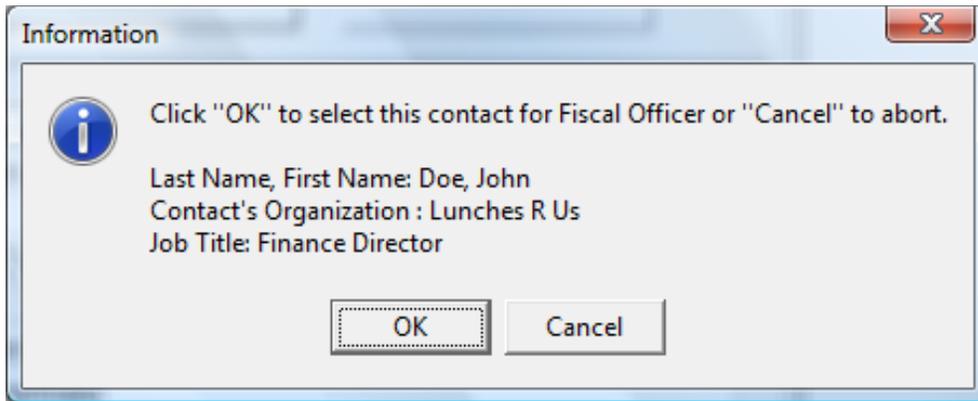
Selecting a Fiscal Officer

- Click the “Search for Contact” button.
- Enter the employee's last name in the appropriate text box. As you type, the system will automatically filter the results based on your input.
- Select the appropriate contact name from the grid and click **Save Contact Selected in Grid Row as Fiscal Officer**.



Last Name	First	Organization
	Kacy	National Emergency Medicine Association
	Douglas	Worcester County Sheriff's Office
	Terry	Children's Guild, The
	Diane	Primary Care Coalition - Tree House Child Assessment Center
▶ Doe	John	Lunches R Us
	Sally	Wicomico County Partnership for Families & Children
	John	Chesterfown Police Department
	Harold	Frederick City Police Department
	Brenda	Maryland Department of Human Resources

- The system will prompt you to confirm the selection. Click OK to save the selection or Cancel to abort the selection.



Adding a New Contact

If the contact was not previously entered in the system, you may add them by clicking on the “Add New Contact” command button. Please use this feature judiciously; it is only to be used to add NEW contacts. **Please do not use this function to create a new record for a preexisting contact. All requests for changes to preexisting contact information should be made via the appropriate command button and/or e-mail to the changes@goccp-state-md.org e-mail address.**

Grant Application Video resolution 1152 x 864

Close Application Maryland Victims of Crime

I. Face Sheet II. Summary/Narrative III. Project Budget IV. Audit Req V. Feedback

A. Grant Program B. Applicant C. Implementing **D. Officers** E. Funding Summary F. Service Sites

The database may list many individuals as contacts. Select the project director and the fiscal officer from the current list of contacts in the drop down edit box. If a contact is not listed in the drop down edit box, click the button labeled "Add New Contact" to add a new contact. If you add a new contact and their address is different from their organization's address, click the new address button. Changes can only be made to new contacts you have added. No changes can be made to organization data.

If you want to change the information for an organization, please e-mail: changes@goccp-state-md.org or phone (410) 821-2828

Project Director Fiscal Officer Edit Contact Data

Select a Contact for Project Director:

<- click button to open dropdown

Save Selection

Start typing the last name to locate the individual

Currently Selected Project Director

Last Name First Name MI Salutation Suffix Mail Label Prefix

Jones Mike

Job Title E-Mail Address

Test Job mycasa@myhouse.com

Organization

Lunches R Us

Send Updates via Email

Organization Help **Add New Contact** Save or Abandon New Contact

- When prompted, enter the last name, middle initial, first name, job title and e-mail address if applicable.
- **Use the pull-down arrow to select the salutation, suffix and Mail Label Prefix.** This information must be filled out.
- Fill in the appropriate Mail Label Prefix by using the prefixes in the dropdown.
- ***Please use correct sentence case when adding new data. Be sure your caps lock button is off.***
- The organization pull down will only allow entry for the Applicant or Implementing agency selected.

Grant Application Video resolution 1152 x 864

Close Application **Maryland Victims of Crime**

I. Face Sheet II. Summary/Narrative III. Project Budget IV. Audit Req V. Feedback

A. Grant Program B. Applicant C. Implementing **D. Officers** E. Funding Summary F. Service Sites

The database may list many individuals as contacts. Select the project director and the fiscal officer from the current list of contacts in the drop down edit box. If a contact is not listed in the drop down edit box, click the button labeled "Add New Contact" to add a new contact. If you add a new contact and their address is different from the their organization's address, click the new address button. Changes can only be made to new contacts you have added. No changes can be made to organization data.

If you want to change the information for an organization, please e-mail: changes@goccp-state-md.org or phone (410) 821-2828

Project Director Fiscal Officer Edit Contact Data

Enter new contact data:

Last Name: Doe First Name: Jane MI: Salutation: Ms. Suffix: Esq. Mail Label Prefix: Ms.

Job Title: Legal Counsel E-Mail Address: jane.doe@gmail.com

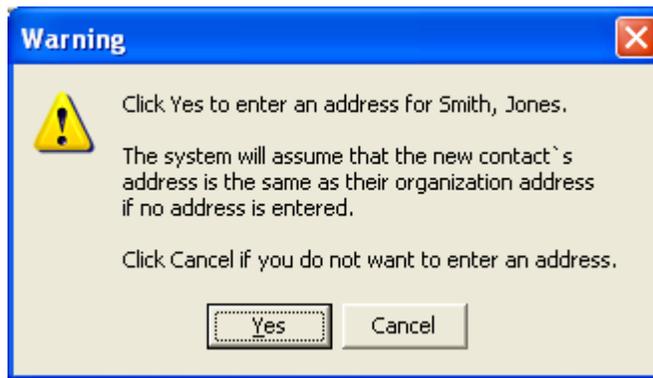
Organization: Lunches R Us

Organization Help Add New Contact **Save or Abandon New Contact**

- After entering the new contact information click the “Save or Abandon New Contact” button.



- If the address information of the new contact is different from the organization selected you can change the address of the contact by selecting the “Yes” option on the following dialog box:



- The screen will prompt you for the newly entered contact’s address information.

The 'New Contact Address' form has a blue title bar and contains the following fields and instructions:

- Instructions: 'Please do not enter organization name on address line. Only enter Suite numbers, room numbers, mail stop codes, street address, city, state, and zip code.'
- Address: '300 E. Joppa Road' (with a sub-field for 'Suite 1105')
- Phone: '410-821-2828'
- Ext: (empty)
- Fax: (empty)
- City: 'Towson'
- State: 'MD' (with a dropdown arrow)
- Zip: (empty)
- Buttons: 'Save and Exit' (with a green checkmark icon and circled in black) and 'Cancel and Exit' (with a red X icon).

- Please change the address if the person you designate has a different suite, room, or mail stop number, phone number, or fax number. Click the check box to save your changes.

Do not enter the organization name on the Address line; the system will store that information according to the organization name that was selected.

- Return to the Project Director box, click in the drop down and select the new entry.
- Click the “Save Selection” box.
- You will be able to edit the address of a new contact only.

E. Completing the “Funding Summary” tab

- This tab is where you specify how much money you are applying for.
- Depending on the type of program you are applying for, the Funding Summary fields will be either inactive (grayed out), or active (white). If the fields are grayed out, this means that particular funding is unavailable and/or not required for the program you selected.
- If the grant program you are applying for is a federally funded program, please put the amount you are requesting under “Federal Funds”.
- If the grant program you are applying for is a state funded program, please put the amount you are requesting under “State Funds”.
- Use the remaining categories to show any matching funds.
- If the money is coming from state funding, please put the amount under “State Cash Match”.
- If the money is coming from local government funding, please put the amount under “Local Cash Match”.
- If the money is coming from a non-profit organization, please put the amount under “Private Cash Match”.
- If the match is not cash (e.g. services or in-kind contributions) please designate it under “In-kind match”.
- Financial entries must be in **whole dollar amounts**; the system will not permit the entry of “change”.

Grant Application Video resolution 1152 x 864

Close Application Maryland Victims of Crime

I. Face Sheet II. Summary/Narrative III. Project Budget IV. Audit Req V. Feedback

A. Grant Program B. Applicant C. Implementing D. Officers **E. Funding Summary** F. Service Sites

✓ Save ✗ Cancel

**Total Project Funds are re-calculated when TAB is entered.
You must click the SAVE button to re-calculate TotalProject Funds or to exit TAB.**

Funding Summary

Federal Funds	<input type="text"/>	This is the amount of grant funding you are requesting for federally funded programs.
State Funds	<input type="text"/>	This is the amount of grant funding you are requesting for state funded programs.
State Cash Match	<input type="text"/>	This is the amount of money provided by a state agency spent for project related costs.
Local Cash Match	<input type="text" value="0"/>	This is the amount of money provided by a local government (either county or city) agency spent for project related costs.
Private Cash Match	<input type="text"/>	This is the amount of money provided by a non-government agency spent for project related costs.
In-Kind Match	<input type="text" value="0"/>	This is the estimated value of donated services provided by any organization associated with the project.
Total Project Funds	<input type="text" value="0"/>	

F. Completing the “Service Site” tab

- This tab allows you to specify where the service delivery will take place. Many programs take place at a particular site (a school, a park, police department, etc.) Other programs take place across the county or across the state.
- Click the + button to add a new site.
- If the application is for a program that has a state or countywide impact, please type in “statewide,” or “countywide” in the Name of Location field. Be sure you designate the appropriate congressional and legislative district. **You must use the dropdown selections.** After filling these in, please move on to the next section.
- If the service takes place at a specific site, please enter the name of the site, the address, and the congressional and legislative districts.
- If the program will take place at more than one location, please enter multiple sites (**only up to five**).

The screenshot displays the 'Grant Application' software interface. At the top, there is a 'Close Application' button. Below it, a navigation bar shows several tabs: 'I. Face Sheet' (highlighted in green), 'II. Summary/Narrative', 'III. Project Budget', and 'IV. Feedback'. Underneath, a secondary navigation bar includes 'A. Grant Program', 'B. Applicant', 'C. Implementing', 'D. Officers', 'E. Funding Summary', and 'F. Service Sites' (highlighted in yellow).

The main content area contains the following text:

The service site is the location where your program will actually take place. Please put the name of the place, the address and associated congressional and legislative districts. You can add up to five separate locations. If your activity will have a statewide, countywide or citywide impact, please indicate that under the name of service site and leave the rest blank. Remember the service site is the location where your project is located, NOT your organization's headquarters.

After you have filled out the Face Sheet section, you can move on to the Summary/Narrative Section by selecting the green tab.

Below the text is a control bar with buttons: 'Prior', 'Next', '+', '▲', '▼', 'Delete', 'Save', and 'Cancel'.

The form fields are organized as follows:

- A list box labeled 'Name of Location' with a right-pointing arrow.
- A text input field labeled 'Name of Location'.
- A text input field labeled 'Address'.
- A text input field (unlabeled).
- A text input field (unlabeled).
- A dropdown menu labeled 'Congressional District'.
- A text input field labeled 'City'.
- A dropdown menu labeled 'Legislative District'.
- A text input field labeled 'State'.
- A text input field labeled 'Zip'.

Summary/Narrative

A. Completing the “Summary” tab

The Project Summary provides a concise summary of your proposal and must be limited to 100 words or less. The format/content requirements for the Project Summary are explained in the Notice of Funding Availability (NOFA). Adhering to the summary guidelines outlined in the NOFA will expedite your award. The summary must contain:

1. 1-2 sentences that identify the specific problems or needs.
2. 1-2 sentences that describe who the program will benefit or serve.
3. 1-2 sentences that describe how program funds will be spent and address these needs.

B. Completing the “Narrative” tab

The format/content requirements for the Project Narrative are explained in the Notice of Funding Availability (NOFA). Failure to provide a properly prepared narrative (as dictated by the NOFA) could delay your award. Completing this section of the application is mandatory.

The screenshot shows a software window titled "Grant Application" with a video resolution of 1152 x 864. The main title is "Maryland Victims of Crime". The interface has a menu bar with "Close Application" and a tabbed area with five tabs: "I. Face Sheet", "II. Summary/Narrative" (highlighted in green), "III. Project Budget", "IV. Audit Req", and "V. Feedback". Under the "II. Summary/Narrative" tab, there are two sub-tabs: "A. Summary" and "B. Narrative" (highlighted in yellow). The main content area contains the following text:

[Refer to NOFA instructions before completing the Narrative](#)

The format/content requirements for the Project Narrative are explained in the Notice of Funding Availability (NOFA) for this grant. Failure to provide a properly prepared narrative (as dictated by the NOFA) could delay your award. Completing this section of the application is mandatory.

The narrative should be limited to approximately 12 typewritten pages. Text length exceeding 29,990 characters will not be saved (a character is any typed letter, digit, punctuation, symbol, spacebar or carriage return).

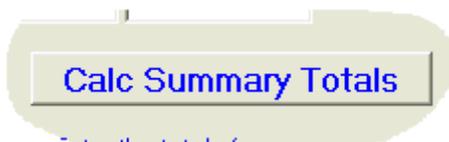
====> Please do NOT enter text using all capital letters <====

At the bottom, there is a toolbar with icons for Save, Cancel, Cut, Copy, Paste, and SPELL. To the right of the toolbar, it says "Character Saved Count = 0".

Project Budget

A. Completing the “Summary” tab

- Using the categories provided, please designate which funding stream will fund which categories.
- If the grant program you are applying for is a federally funded program, please put the amount you are requesting under “Federal Funds”.
- If the grant program you are applying for is a state funded program, please put the amount you are requesting under “State Funds”.
- Use the remaining categories to show any matching funds.
- If the money is coming from state funding, please put the amount under “State Cash Match”.
- If the money is coming from local government funding, please put the amount under “Local Cash Match”.
- If the money is coming from a non-profit organization, please put the amount under “Private Cash Match”.
- If the match is not cash (maybe it is services, or in-kind contributions) please designate it under “In-kind match”.
- After entering all fund amounts in the appropriate fields, click the ‘Calc Summary Totals’ button **BEFORE** saving your work.



This action will calculate your total project funds.

Additional Notes

- If there are certain budget categories that are unallowable for the selected grant program, those funding fields will be disabled.
- If the selected grant program does not require a match, all matching funds options will be disabled.
- Financial entries must be in **whole dollar amounts**; the system will not permit the entry of “change”.

B. Completing the “Personnel” tab

This budget category should include Includes salaries and fringe benefits for personnel required to implement the project, including full or part-time contractual staff (excluding consultants, which should be listed in Category D). Time and attendance records must be maintained for all personnel included in the grant project. For each salary notated, list fringe benefits separately. Note: Fringe benefits cannot exceed 30% of salary costs. When calculating, round figures down. (e.g., Officer-Salary \$15000.00, Officer-Fringe \$3750.00). Under justification, you should tie those items requested in the budget into the activities described in your narrative.

C. Completing the “Operating Expenses” tab

Use this tab to enter your costs associated with Operating Expenses. Under “Justification”, you should tie those items requested in the budget into the activities described in your narrative.

D. Completing the “Travel” tab

Travel expenses may include mileage and/or other transportation costs; meals and lodging consistent with the local jurisdictions travel regulations and cannot exceed the State of Maryland reimbursement rate (*use appropriate fiscal year rate as displayed on tab*). Under justification you should tie those items requested in the budget into the activities described in your narrative.

E. Completing the “Contractual Services” tab

Consultant contracts for training or evaluation should be included here and shall be consistent with federal guidelines. Construction projects are ineligible for funding under grant programs and expenses for construction may not be included. For the line item description, enter the agency (Consulting firm, temporary agency, etc.), a dash and then the nature of the service to be provided (e.g., Consultants ABC - training for Seminar). Under justification, you should tie those items requested in the budget into the activities described in your narrative.

F. Completing the “Equipment” tab

Equipment (Purchase, Lease or Rental) - Costs may include taxes, delivery, installation and similarly related charges. The value of trade-ins and discounts should be shown as a deduction. The procurement process used must be consistent with your written procurement guidelines. If such guidelines do not exist refer to the State of Maryland guidelines by accessing General Condition # 17 on the GOCCP Website. The State of Maryland defines equipment as having a useful life in excess of one year and a procurement cost of \$100 or more per unit or \$50 or more per unit for computer and sensitive items. Maintaining internal inventory records for equipment under this funding source is mandatory. For post award

inventory requirements access General Condition #18 on the GOCCP Website. Under justification, you should tie those items requested in the budget into the activities described in your narrative.

G. Completing the “Other” tab

Include all other anticipated expenditures, which are not included in the previous categories such as indirect costs, if allowable, and audit expenses. Under justification you should tie those items requested in the budget into the activities described in your narrative.

Additional Notes:

Equipment (Purchase, Lease or Rental) Costs may include taxes, delivery, installation and similarly related charges. The value of trade-ins and discounts should be shown as a deduction. In addition to maintaining internal inventory records for equipment acquired under this funding source, if awarded equipment funds, a completed Property Inventory Form must be submitted during the grant award period. Expenditures must be consistent with applicable local jurisdictions' procurement guidelines. If this does

Equipment Item	Funding Source	Cost per Unit	Quantity	Total Amount
* Equipment Item 1	Grant Funds			

1. For each budget line entered, you must designate the respective funding stream/source used to fund the item. Select the source from the drop down titled "Funding Source." For specific information regarding match requirements, please consult the Notice of Funding Availability (NOFA). If no match is required, please select the "Grant Funds" option for each line item.
2. Financial entries must be in **whole dollar amounts**; the system will not permit the entry of "change".

Audit Requirements

Audit Dates

You must submit, along with this application, copies of audit findings (if applicable) and management letters (if any) from the most recent audit, together with a copy of the corrective plan of action (if applicable). Alternatively, you must certify in a letter signed by the agency head and CFO, that there were no findings or management letter. **If your entity does not meet the criteria for the A-133 annual audit, please submit dates as to when your financial system is annually reconciled.**

Federal Cognizant or Oversight Agency

If your organization spends more than \$50 million a year in direct federal funding, then you have a federal cognizant agency. Otherwise, whoever gives your organization the greatest federal funding, whether it is a federal agency or not, is your oversight agency for audit. If neither applies to your organization, enter "NONE".

Grant Application Video resolution 1152 x 864

Maryland Victims of Crime

I. Face Sheet | II. Summary/Narrative | III. Project Budget | **IV. Audit Req** | V. Feedback

✓ ✕ You must click the checkmark to save data entered or changed.

Date of Last Audit Last Audit Began Last Audit Ended
 Date of Next Audit Next Audit Begins Next Audit Ends
 Next Audit Will Be Forwarded

You must submit, along with this application, copies of audit findings (if applicable) and management letters (if any) from the most recent audit, together with a copy of the corrective plan of action (if applicable). Alternatively, you must certify in a letter signed by the agency head and CFO, that there were no findings or management letter.

Federal Cognizant or Oversight Agency
 Name

If your organization spends more than \$50 million a year in direct federal funding, then you have a federal cognizant agency. Otherwise, whoever gives your organization the greatest federal funding, whether it is a federal agency or not, is your oversight agency for audit. If neither applies to your organization, enter "NONE".

Civil Rights Contact
 Name
 Title
 Address Line 1
 Address Line 2
 Address Line 3
 Address Line 4
 Phone

Unit Responsible for Grant Implementation
 Number Employees in Unit

All fields on the audit requirement tab **must** be filled out. The system will not allow you to submit the application electronically if any information is missing.

Completing the “Feedback” Tab

Grant Application Video resolution 1152 x 864

Close Application Maryland Victims of Crime

I. Face Sheet II. Summary/Narrative III. Project Budget IV. Audit Req **V. Feedback**

Once you have completed the face sheet, narrative and budget sections of your application you can submit it to GOCCP. Please click on the "Close Application" button and return to the main menu. From there you can submit the application to GOCCP by selecting the "submit" button. Remember you still need to send an application with original signatures and the appropriate number of copies as specified in the NOFA.

Once an application has been submitted it is considered final and can not be changed. It can be viewed using the print preview pages or it can be printed out.

In the area below we would like to solicit your feedback about the application process and what GOCCP can do to improve it. You may add multiple comments but each comment is limited to 1000 characters.

First Prior Next Last Insert Delete Save Cancel Copy Cut Paste SPELL

ID	Org Code	Date Created	Comments

- The feedback tab is your forum for describing your experience with the online application process and what GOCCP can do to improve it. This section is optional.

Printing the Application

- Before submitting the final application, you will have the opportunity to review and make any changes.
 - Close the application and return to the main menu.
 - Click the **Print** button. You have the option of printing the whole application, reviewing sections of the application by clicking the appropriate radio button, or exporting the application to a rich text file (.rtf). In this format you can save the application to a floppy disk, CD, or other media.

Lunches R Us

OK Cancel

Pending Submission

Applications that have not been submitted are considered draft. Submitted applications are considered final.

Select Output Type

Output Forms to Screen/Printer

Output Forms as (MS Word) Rich Text Files to C:\GOCCP_RichText\ Directory

Print All Forms or Preview/Print One Form

<input checked="" type="radio"/> Print All Forms (No Preview)	<input type="radio"/> Equipment Budget Preview/Print
<input type="radio"/> Face Sheet Preview/Print	<input type="radio"/> Other Budget Preview/Print
<input type="radio"/> Summary and Narrative Preview/Print	<input type="radio"/> Audit Requirements Preview/Print
<input type="radio"/> Project Budget Summary Preview/Print	<input type="radio"/> * GOCCP Assurances Preview/Print
<input type="radio"/> Personnel Budget Preview/Print	<input type="radio"/> Anti-Lobbying Certifications Preview/Print
<input type="radio"/> Operating Expenses Budget Preview/Print	<input type="radio"/> * Anti-Lobbying Signature Preview/Print
<input type="radio"/> Travel Budget Preview/Print	<input type="radio"/> Service Sites Preview/Print
<input type="radio"/> Contractual Services Budget Preview/Print	<input type="radio"/> Civil Rights Checklist Preview/Print

* Requires Authorized Official's Signature

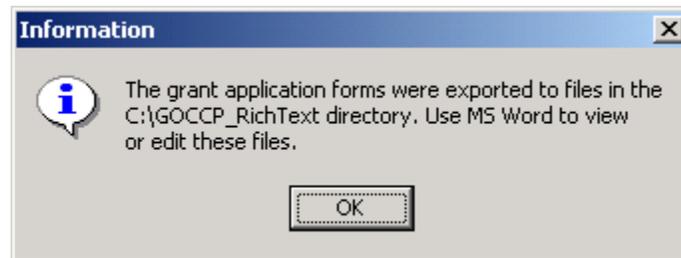
When you have submitted your application, please print a copy, sign at the appropriate places and send to GOCCP. Attach any letters of support or other documents to the paper application. An original and appropriate number of copies need to be delivered to GOCCP by the deadline. The number of copies and deadline dates are outlined in the NOFA.

- To export the applications to a rich text file, select the **Output Forms...** radio button and click OK.

Output Forms as (MS Word) Rich Text Files to C:\GOCCP_RichText directory

- This function will allow you to export the following pages of the application to a directory that will be created on your hard drive, named **C:\GOCCP_RichText**:
 - Application title page
 - Application face sheet
 - Summary/Narrative
 - Project Budget
 - Category A Personnel*
 - Category B Operating Expenses*
 - Category C Travel*
 - Category D Contractual Services*
 - Category E Equipment*
 - Category F Other*
 - Audit Requirements
 - GOCCP Assurances
 - Anti-Lobbying Certifications
 - Anti-Lobbying Signature
 - Project Service Sites*
 - Civil Rights Compliance Checklist (*if applicable*)

** If no data has been entered in these tabs the pages will not export or print.*



- The above dialogue box will appear to inform you that the application has been exported.
 - If you print an application prior to submission a **'Pending Submission'** label will print on most pages of the application. Please do not submit a hard copy of a pending application to GOCCP. **It will not be accepted.** These labels will be removed after the application is submitted electronically.
 - To access the exported pages, open the folder **C:\GOCCP_RichText**. The naming scheme will show the **id number** of the application, the **date** you

exported the data, and the **name** of the application page. The pages are numbered in the order they should be printed and bound for the final hard copy submission.

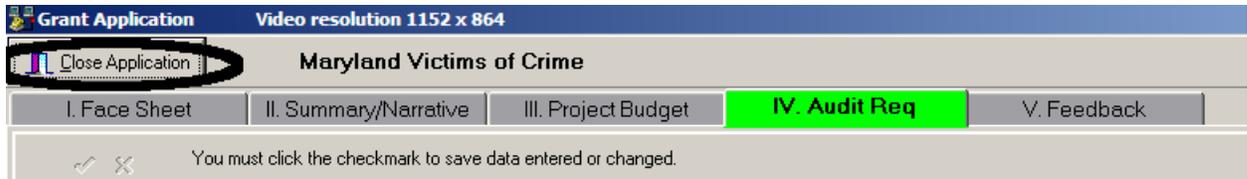
Civil Rights Compliance Checklist

The Federal Civil Rights Compliance Checklist will print as part of the complete grant application, as formatted by the Online Grant Application software, for federally funded programs only. If applying for a federally funded grant program, you must fill out this form and include it with the hard-copy of the completed grant application.

- * Anti-Lobbying Signature Preview/Print
- Service Sites Preview/Print
- Civil Rights Checklist Preview/Print

Submitting the Final Application

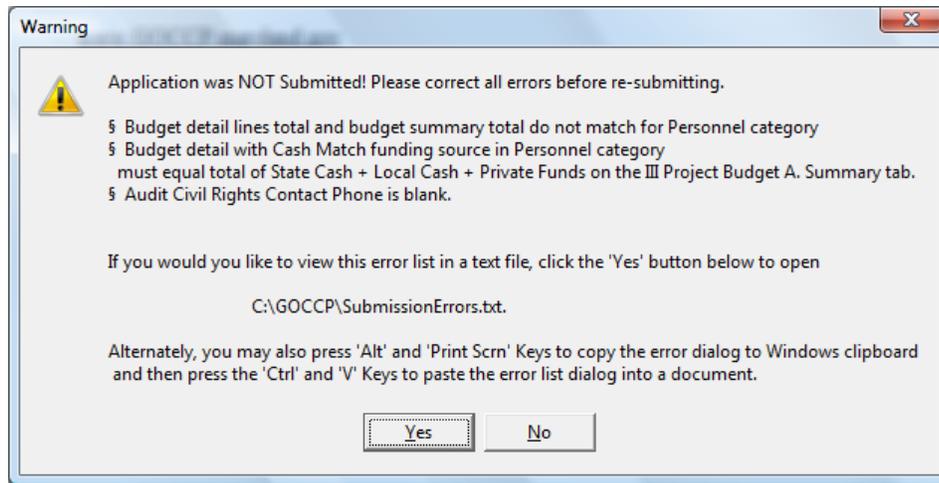
- Once you have completed the application and reviewed it, close the application.



- Return to the main menu and click the Submit button.



- The system will perform checks to ensure the accuracy and completeness of the grant application data. If the system encounters deficiencies, the system will display the deficiencies on screen and allow you to save the list to your hard drive.



- All application deficiencies must be addressed before you can successfully submit the application.
- Upon successful application submission, you will receive a proof of transmittal that confirms the application submission. This confirmation must be printed, if desired, at this time; it cannot be printed at a later date.

**** *Once an application has been submitted it cannot be edited.***