

Idaho Council ON
Domestic Violence
AND **Victim Assistance**

**Detailed Application Instructions:
FY25 Combined Grant Application**

**Applications are due June 7, 2024
by 5:00 pm MDT**

Applicants assume all costs associated with the preparation of this grant application.

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The FY25 ICDVVA Combined Grant Application must be submitted in Amplifund, our grant management system. Please use this [LINK](#) to access the application.

The application is comprised of seven sections, each of which must be completed and submitted individually by clicking “Mark as Complete” at the bottom of each section. If you want to save the application section to come back to it later, you can do this with any section by clicking “Save.” If you want to revise a section that has already been marked as complete, you have the option to do so. Once all sections are marked as complete, you will hit “Submit” for the entire application. After the whole application has been submitted, it will be locked and not available for editing. You will have the option after submitting to download and print the entire completed application as a pdf. (Individual sections can be printed along the way as well.)

Please read all questions carefully and provide responses that are specific and focused. Include as much supporting data as possible. All narrative responses have a character limit of 1250 characters, which is about 250 words.

To send ICDVVA staff questions about the application, email your questions to info@icdv.idaho.gov. The answers will be compiled in a document called “FY25 Application Questions” that will be updated frequently and uploaded to the Public Opportunities page at the application link. Scroll down to the section called “Question Submission Information” and click on the green link to the document.

Project Information

Application Information

- Application Name: please provide the name of your organization.
- Award Requested: please enter the total award you are requesting from ICDVVA. We are not asking you to break down your request by funding source in this part of the application, but you will be asked to do so in the Budget Worksheet. Please make sure your total requested here matches the total you request in your Budget Worksheet. ICDVVA reserves the right to allocate awards among available funding sources as needed.

Primary Contact Information

- Please enter the name/email/address/phone number for the primary contact for this application.

FY25 ICDVVA Organization Overview

Organization Overview

- Fill in your Unique Entity Identifier (UEI) from the System for Award Management (SAM).
- Fill in your Tax ID number (EIN).
- Choose your organizational structure from the choices provided. If you select “other,” please fill in the text box to specify what your structure is.
- Choose from the provided choices for the focus of your organization. If you select “other,” please fill in the text box to specify what your focus is.
- Provide a brief summary of the primary purpose of your organization, along with your mission statement.

Contact Information

- Provide contact information for your ED, Project Director, Fiscal Officer, Data Contact, and Board Chair.
- Indicate whether you are currently funded by ICDVVA for FY24.

Program Duration

- Indicate how many years your organization has been in operation.

Public Health Regions

- Let us know where you will be providing services. If you are a statewide organization, choose “Statewide” and do not fill out any region percentages. If you serve specific regions, select “By Region” and enter the percentages in the appropriate lines. For example, if 50% of your clients are from Region 1 and 50% are from Region 2, you would enter “50” in both the Region 1 and Region 2 text boxes, and leave the rest of the regions blank.

Counties Served

- Indicate the individual counties commonly served by your organization. If you are a statewide organization, select “Statewide” and do not check any boxes for individual counties.

Funding Request Summary

This section introduces your organization/program and the project for which you are requesting funds.

Purpose of Request

- Briefly describe the project/purpose for which you are requesting funding. This description should be specific and concise. This is NOT a place to reiterate your program's mission or purpose, but rather should focus exclusively on how our funds would be utilized.

The maximum points available for the Purpose of Request are 2. To achieve a maximum score, applicants should provide a response that is concise, clear, appropriate for the funding requested in the application, and is clearly linked to victim services.

Funds Requested

- Check the appropriate box to indicate if your request is an increase, decrease, or the same amount of funding as compared to your award in FY24. Explain any changes in your narrative response.

The maximum points available for this question are 2. To achieve a maximum score, the total project budget should indicate a decrease in ICDVVA funding.

- Enter the percentage of your total FY25 project budget that would be funded by ICDVVA if your request was awarded in full.
- Enter the percentage of your total budget that was funded by ICDVVA for the FY24 grant year.
- Check the appropriate box to indicate if your request is an increase, decrease, or the same percentage of your total organizational budget as compared to your award in FY24. Explain any changes in your narrative response.

The maximum points available for this question are 2. To achieve a maximum score, the total project budget should indicate a decrease in reliance on ICDVVA funding.

- Use the space provided to explain the likely result if your funding request was denied or significantly reduced. Use data to support your answer.

The maximum points available for this question are 2. To achieve a maximum score, applicants should describe clear outcomes and must include programmatic data and details to support the impacts described if funding was denied or significantly reduced.

- Use the space provided to describe your program's sustainability efforts to compensate for the decline in federal funds.

The maximum points available for this question are 3. To achieve a maximum score, applicants should demonstrate attempts to cut costs, plan for funding declines, and pursue alternative funding sources.

- Describe both your training and implementation efforts to ensure all services are trauma-informed.

The maximum points available for this question are 2. To achieve a maximum score, applicants should provide specific examples that demonstrate not only how staff is trained in trauma-informed care, but also how implementation of trauma-informed services is ensured.

Strategic Plan Advancement

- Briefly describe how your project will advance one or more of the main goals in the ICDVVA [2024 Strategic Plan](#) (pp. 15–18), which is available on our website. Please select the specific goal and task using the dropdown menu and provide examples of how your program will advance that goal/task. Four fields are provided, but only one is required. Please select “N/A” for any that you would like to leave blank.

Please note that in the Strategic Plan, some of the tasks listed begin with the phrase “Make funding available for,” which would be more applicable to ICDVVA. Applicants may assume that they are supporting the task if they are executing the task rather than providing funding for it.

The maximum points available for this question are 3. To achieve a maximum score, applicants must identify at least one goal/task from the Strategic Plan and provide clear, concise examples of how their programs/services will advance those goals/tasks.

Victim Services and Demand

Services Provided

- Indicate whether your organization is new to ICDVVA funding. The response will dictate what questions you are asked in this section.
- For new applicants, indicate each of the listed services that your organization provides. Provide a narrative response to indicate that you are the only organization in your region providing specific services.

Priority Categories for ICDVVA Funding

- Read the Underserved definition and indicate whether your organization serves populations considered to be underserved. Estimate the percentage of your clients who are currently considered underserved and are supported by ICDVVA funds. (For new applicants, estimate the percentage of clients you serve who are considered underserved by our definition.) In your narrative response, explain which underserved populations you serve and provide specific data to support your response.

5 bonus points are available for applicants who clearly identify the underserved populations being served by their program and who included strong data to support their response.

- Provide the total number of victims you served in FY23 (Oct. 1, 2022 – Sept. 30, 2023). This is not a typo – FY23 is the last completed grant year, and we are looking for a number that spans a full grant year. Your FY24 number would be missing half the year.

- Indicate whether your community has unmet needs, and describe these needs in your narrative response. You must supply data to support your response.
- Indicate whether the demand for your services exceeds your organization’s capacity, and provide details in your narrative response. Use data to explain why/how this is the case.

The maximum points available for this question are 2. To achieve a maximum score, the applicant must provide a clear and detailed description of demand for program services and provide data to support the response, such as the numbers of clients served, waitlist numbers, staff hours, and any other relevant data.

Program Operations

Staff and Volunteers

- For the first section, please consider employees who worked at your organization during the FY24 grant year (Oct 1, 2023—Sept 30, 2024). Provide the number of total employees in the organization, including both employees funded by ICDVVA and those not funded by ICDVVA. Provide the number of full-time and part-time employees at your organization who are fully or partially funded by ICDVVA in the current FY24 grant year.

Proposed FY25 Staff

- For the next section, consider the proposed staffing for the FY25 grant year (Oct 1, 2024–Sept 30, 2025). Indicate how many total employees you expect to have in FY25, including employees funded by ICDVVA and those not funded by ICDVVA. Provide the number of full-time and part-time employees whom you are requesting to be fully or partially funded by ICDVVA in the FY25 grant year.
- If you have had any turnover in your leadership (Executive Director, Program Director, or Fiscal Officer) or in grant-funded positions during the last 12 months, please provide a brief summary including who, when, and why.
- Indicate whether or not your program uses volunteers in any capacity.

Succession Planning

- If your organization has a succession plan, please describe how you determine critical positions within the organization and the process for identifying and preparing employees to fill vacancies as others retire or move on.

The maximum points available for this question are 2. To achieve a maximum score, the applicant must provide a brief but detailed description of their organization’s succession plan, including more than just a hiring plan.

Collaboration

- Indicate whether your organization is new to ICDVVA funding. The response will dictate what questions you are asked in this section. If you are a new applicant, indicate which of the listed organizations you collaborate with in your region, and provide additional information to specify particular agencies. For continuing subrecipient applicants, please only list collaborations that are new since your last application.

The maximum points available for this question are 2. To achieve a maximum score, the applicant must demonstrate robust and exceptional collaboration with other programs in the region ensuring victim services are prioritized.

Finances

Fiscal Management

- Indicate whether your organization is new to ICDVVA funding. The response will dictate what questions you are asked in this section.
- New applicants: provide a description of your management structure, including positions responsible for grant management and your experience with other federal grants. Existing subrecipients: describe any changes to your organizational and management structure or grant administration since your last application.

The maximum points available for this question are 3. To achieve a maximum score, applicants must provide a detailed description of their fiscal management and/or any grant administration changes including roles and responsibilities.

- Please indicate whether or not your organization has the capacity to wait for the ICDVVA reimbursement process, which can take 30 days or more in some instances.
- Indicate whether your agency expended \$750,000 or more in federal funds (combined from all federal funding sources) during your last completed fiscal year (per your agency's fiscal year). If yes, you must conduct a single audit and upload it to the clearinghouse. Please indicate if this has been done, if applicable.
- Describe your agency's procedures for conducting audits or audited financial statements and include information on any open audit findings.

Funding and Support

- Briefly describe your fundraising activities in the past 12 months, and the amount raised compared to your fundraising goal.

- Briefly describe your FY25 fundraising plans including financial goal.

Grant Budget

- Click on the document link titled “FY25 Budget Worksheet.” This is an Excel file that is just like the one provided for last year’s FY24 application. Please complete all the tabs, then save the file to your computer. Then go to the Amplifund Budget page and click “Choose File” to upload the completed Budget Worksheet to your application.
- The FY25 Budget Worksheet in Excel includes four (4) tabs: Budget Request, Match Detail, Funding Sources, and Personnel Request. All areas shaded in gray will auto-calculate; please do not enter any information in these cells. When completing the Budget Worksheet, please adhere to the following parameters:
 - At least 65% of your request must fund Direct Services. Please note that this represents a 5% increase from our requirements for FY24.
 - Your Admin Salary line cannot exceed 5% of the total award.
 - Executive Director Salary is capped at 93% of your total award.
 - Please be aware that Training Requests will be scrutinized carefully. Virtual and free trainings should be utilized whenever possible. Trainings that you plan to make available statewide will be prioritized for funding.

Budget Worksheet Tab

- On the first tab, the Direct Services and Indirect Services in the first column have been listed for you. You may add other items in the lines for “Other.” If you need more lines, please contact your grant manager or info@icdv.idaho.gov for assistance.
- For each line item, fill in the colored columns with the amount of money you are requesting from each funding stream.
- Use the Description column to provide a thorough but concise description of the items you will be funding under each category. For example, if you have requested Utilities for your office, specify which ones. If you have requested an Equipment Lease line item, specify what equipment will be covered, etc.
- Make sure that every non-personnel expense you have asked for in your budget is addressed in this table.
- In Columns I and J, please indicate if the line item represents a new or expanded service. If so, please provide a narrative explanation in the Budget Info section of the application in Amplifund.
- The gray rows at the bottom of the page will auto-calculate your direct services and admin salary percentages. Please make sure they fall within the required limits.

Match Tab

- List each source of match that you anticipate using (for VOCA, FVPSA, and State DV awards combined) in FY25. For each source of match, provide a description and the estimated value, and indicate whether the match will be in cash or in-kind. There will not be an automatic match waiver for VOCA beginning in FY25, but individual match waiver requests will be considered.

Funding Sources Tab

- List all the expected funding sources for the FY25 grant term (October 1, 2024 – September 30, 2025) including the source and either the known or pending/expected amount for that source. The total of all sources and the percentage of the total agency budget will auto-calculate.

Personnel Request Tab

- In Column A, enter the job titles of each employee you are asking to be covered under an ICDVVA grant.
- Column B should include the wages plus fringe and employer taxes for a full grant year. Even if you are only asking for a portion of this employee to be covered under the grant, please include the TOTAL annual amount in this column.
- Column C should include the hourly rate for this employee. If salaried, please calculate and include an hourly rate.
- Column D should indicate the percentage of the employee's pay intended to be covered by ICDVVA grants.
- Column E should indicate whether the position is currently filled or unfilled.
- Column F will auto-calculate the ICDVVA cost per year. You do not need to enter anything into this column.
- Columns I, J, and K, are to be used as checkboxes. Please check the appropriate box to indicate whether the hourly rate is a decrease from FY24, the same as FY24, or an increase from FY24. In Column K, enter the date of the employee's last increase.

After you have completed your Budget Worksheet and uploaded it to Amplifund, please answer the question on the Budget page of the application regarding new and/or expanded services. Please provide data to justify the need for any new or expanded services for which you have requested funding.

The maximum points available for this section are 16. Please be accurate, thorough, and provide clear explanations in your narrative. Criteria used to determine scoring include: % of funding request for direct services, % of Executive Director salary included in the request, complete descriptions for all budget line items, and thorough justifications for any new or expanded services and training requests.

Application Appendix

Appendix A: VOCA Volunteer Waiver Request

VOCA requires that subrecipients use volunteers to support their victim services in some capacity. This can include tasks that would not be allowable for grant funded employees, such as helping with a fundraiser. If your organization has a compelling reason why it cannot make use of volunteers, please check the box to request a Volunteer Waiver Form and one will be provided to you. This form would need to be approved and signed by ICDVVA staff in order for a program to continue to accept VOCA funding without using volunteers.

Appendix B: Signing Page and Parts 1-5

Please read Parts 1-5 of Appendix B carefully. Sign at the signing lines at the beginning of Appendix B in order to certify your organization's compliance with everything in Parts 1-5.

Appendix C: Nonprofit Status

Select one of the choices. If your organization is a nonprofit, please read the paragraphs provided to be sure that your organization complies with the conditions. Then sign at the signing lines.

Submitting the Application

The deadline for receipt of the application is June 7, 2024, at 5:00 p.m. Mountain Time.

Completed applications will be evaluated on the quality of the information provided in each section. Applications will be considered based on the program's direct service experience, fit with the Council's strategic plan, administrative costs, and overall quality of direct services for survivors of crime. Special consideration may be given to underserved communities and identified target populations with special needs.