

**Department of Health and Human Services  
Substance Abuse and Mental Health Services  
Administration**

**Drug-Free Communities (DFC) Support Program**

**Request for Applications (RFA) No. SP-14-002**

**2<sup>nd</sup> Modified Announcement**

**Catalogue of Federal Domestic Assistance (CFDA) No.: 93.276**

**Key Dates:**

<b>Application Deadline</b>	<b>Applications are due by March 26, 2014</b>
<b>Intergovernmental Review(E.O. 12372)</b>	<b>Applicants must comply with E.O. 12372 if their state(s) participates. Review process recommendations from the State Single Point of Contact (SPOC) are due no later than 60 days after application deadline.</b>
<b>Public Health System Impact Statement (PHSIS)/Single State Agency Coordination</b>	<b>Applicants must send the PHSIS to appropriate state and local health agencies by application deadline. Comments from Single State Agency are due no later than 60 days after application deadline.</b>

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## EXECUTIVE SUMMARY

The Executive Office of the President, Office of National Drug Control Policy (ONDCP), and the Department of Health and Human Services (HHS), Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Prevention (CSAP) are accepting applications for fiscal year (FY) 2014 Drug-Free Communities (DFC) Support Program grants. The purpose of the DFC Support Program is to establish and strengthen collaboration to support the efforts of community coalitions working to prevent youth substance use.

<b>Funding Opportunity Title:</b>	Drug-Free Communities Support Program
<b>Funding Opportunity Number:</b>	SP-14-002
<b>Due Date for Applications:</b>	March 26, 2014
<b>Anticipated Total Available Funding:</b>	\$22,750,000
<b>Estimated Number of Awards:</b>	182
<b>Estimated Award Amount:</b>	Up to \$125,000 per year
<b>Cost Sharing/Match Required</b>	In-Kind match is required  See <u>Section III - 2</u> of this RFA for cost sharing/match requirements.
<b>Length of Project Period:</b>	Up to 5 years
<b>Eligible Applicants:</b>	Eligible applicants are community-based coalitions addressing youth substance use that have never received a DFC grant; or have previously received a DFC grant, but experienced a lapse in funding; or have concluded the first five-year funding cycle and are applying for a second five-year funding cycle. Applicants must meet all Statutory Eligibility Requirements. See <u>Section III-1</u> of this RFA for complete eligibility information.

# I. FUNDING OPPORTUNITY DESCRIPTION

## 1. PURPOSE

The Executive Office of the President, Office of National Drug Control Policy (ONDCP), and the Department of Health and Human Services (HHS), Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Prevention (CSAP) are accepting applications for fiscal year (FY) 2014 Drug-Free Communities (DFC) Support Program grants. The DFC Support Program has two goals:

1. Establish and strengthen collaboration among communities, public and private non-profit agencies; as well as federal, state, local, and tribal governments to support the efforts of community coalitions working to prevent and reduce substance use among youth\*.
2. Reduce substance use among youth and, over time, reduce substance abuse among adults by addressing the factors in a community that increase the risk of substance abuse and promoting the factors that minimize the risk of substance abuse.

\*For the purposes of this RFA, “youth” is defined as individuals 18 years of age and younger.

The DFC Support Program was created by the Drug-Free Communities Act of 1997 (Public Law 105-20). This announcement addresses Healthy People 2020 Substance Abuse Topic Area HP 2020-SA.

## 2. EXPECTATIONS

Grants awarded through the DFC Support Program are intended to support **established community-based youth substance use prevention coalitions** capable of effecting community-level change. For the purposes of this RFA and the DFC Support Program, **a coalition is defined as a community-based formal arrangement for cooperation and collaboration among groups or sectors of a community in which each group retains its identity, but all agree to work together toward a common goal of building a safe, healthy, and drug-free community.**

Coalitions receiving DFC funds are expected to work with leaders within their communities to identify and address local youth substance use problems and create sustainable community-level change through the use of the Seven Strategies for Community Change. For more information on these strategies, please refer to pages 7 and 8 of the Expectations section of this RFA.

The DFC Support Program does **not** fund the following (not a fully exhaustive list):

- After-school programs
- Youth mentoring programs
- Sports programs

- Treatment services/programs/facilities
- Drug Courts
- Construction
- Landscaping/neighborhood revitalization projects

SAMHSA strongly encourages all grantees to provide a tobacco-free workplace and to promote abstinence from all tobacco products (except in regard to accepted tribal traditions and practices).

**NOTE: SAMHSA requires electronic submission for grant applications through Grants.gov.** Grants.gov will reject applications submitted after 11:59 PM Eastern Time on the application due date.

Some applicants living in remote and rural areas may be unable to submit electronically through the Grants.gov portal because their physical location does not have adequate access to the Internet. Inadequate Internet access is defined as persistent and unavoidable access problems/issues that would make compliance with the electronic submission requirement a hardship.

In these cases, applicants may request a waiver of the electronic submission requirement. If the waiver is approved, the applicant will be permitted to submit a paper application. The process for applying for a waiver is described in [Appendix C](#).

## 2.1 Strategic Prevention Framework

DFC-funded coalitions are expected to utilize SAMHSA's Strategic Prevention Framework (SPF) as the planning model to develop long-range plans. The SPF is a five-step evidence-based process for community planning and decision-making. Cultural competence and sustainability should be considered throughout all five steps of the process which includes:

1. **Assessment:** Identify local youth substance use problems and the community conditions that contribute to the specific identified issues.
2. **Capacity:** Mobilize/build capacity to change the conditions and address the youth substance use problems.
3. **Planning:** Develop a logic model, comprehensive 12-month Action Plan, and multi-year Strategic Plan.
4. **Implementation:** Implement action and strategic plans with multiple objectives, strategies, and activities.
5. **Evaluation:** Monitor, sustain, improve, or replace prevention activities, efforts, and strategies.

## 2.2 Community Definition

Applicants are expected to define the communities they propose to serve. The DFC Support Program **does not** prescribe the size, borders, demographics, or geographic location of DFC grantee communities. DFC grantees may use various geographic boundaries including neighborhoods, census tracts, zip codes, and school districts, as well as township, county, or parish lines, among others, to define their community. However, **applicants are encouraged to be realistic** about the area in which the coalition will have the ability to create change. For example, choosing a community that is too large may be problematic due to inclusion of neighborhoods that have significantly different problems to be addressed.

The DFC Support Program **does not** make funding decisions based on geographic boundaries (e.g., number of grants within states/towns/cities). Applicants should consider that adjacent neighborhoods/towns/cities with coalitions operating in different areas are encouraged. However, multiple DFC grantees may not serve the same zip code(s) unless there is written evidence of cooperation between the overlapping coalitions.

## 2.3 Community Level Change

Applicants are expected to choose strategies that will lead to community level change. Community level change strategies seek to: (1) limit access to substances; (2) change the culture and context within which decisions about substance use are made; and/or (3) shift the consequences associated with youth substance use. Ample evidence exists that well-conceived and implemented policies at the local, state, and national level can reduce community level alcohol, tobacco, and other drug problems.

The Seven Strategies for Community Change, which are a conceptual understanding of strategies a coalition may employ, include efforts that affect individuals, as well as those that have the potential to reach an entire community. The DFC Support Program requires that coalitions develop and implement a comprehensive action plan to prevent youth substance use.

**A comprehensive Action Plan will include an appropriate mixture of all seven strategies listed below.** It is not required for applicants to name the seven strategies listed below in the Action Plan, but should use them as a framework for ensuring comprehensiveness.

### Seven Strategies for Community Level Change

1. **Provide Information:** Educational presentations, workshops or seminars, and data or media presentations (e.g., PSAs, brochures, town halls, forums, web communication).
2. **Enhance Skills:** Workshops, seminars, or activities designed to increase the skills of participants, members and staff (e.g., training and technical assistance, parenting classes, strategic planning retreats, model programs in schools).

3. **Provide Support:** Creating opportunities to support people to participate in activities that reduce risk or enhance protection (e.g., alternative activities, mentoring, referrals for service, support groups, youth clubs).
4. **Enhance Access/Reduce Barriers:** Improving systems/processes to increase the ease, ability, and opportunity to utilize those systems and services (e.g., assuring transportation, housing, education, safety, and cultural sensitivity) in prevention initiatives.  
  
**Reduce Access/Enhance Barriers:** Improving systems/processes to decrease the ease, ability, and opportunity for youth to access substances (e.g., raising the price of single-serve cans of alcohol, implementing retail alcohol/tobacco compliance checks).
5. **Change Consequences (Incentives/Disincentives):** Increasing or decreasing the probability of a behavior by altering the consequences for performing that behavior (e.g., increasing taxes, citations, and fines; revocation/loss of driver's license).
6. **Change Physical Design:** Changing the physical design of the environment to reduce risk or enhance protection (e.g., re-routing foot/car traffic, adjusting park hours, alcohol/tobacco outlet density). **NOTE:** DFC federal funds **cannot** support landscape and lighting projects. As such, costs for these projects cannot be used as match.
7. **Modify/Change Policies:** Formal change in written procedures, by-laws, proclamations, rules, or laws (e.g., workplace initiatives, law enforcement procedures and practices, public policy actions, systems change). **NOTE:** Lobbying with federal dollars **is not** permitted. As such, costs for lobbying cannot be used as match.

## 2.4 DFC National Cross-Site Evaluation

DFC grantees are required to participate in the DFC National Cross-Site Evaluation, intended to measure the effectiveness of the DFC Support Program in reducing youth substance use. **DFC grantees are required to provide data every two years on the following core measures for alcohol, tobacco, marijuana, and prescription drugs for three grades (6-12<sup>th</sup>)\*:**

1. Past 30-day use
2. Perception of risk or harm
3. Perception of parental disapproval of use
4. Perception of peer disapproval of use

\* It is recommended that data be collected for at least one middle school grade and one high school grade.

Applicants **must** provide information about their ability to comply with the DFC National Cross-Site Evaluation Requirements - **refer to Appendix M for more information**. An inability to supply the above core measures in the specific increment (every 2 years) for the substances named in the grades required means a coalition is **not** eligible to apply for DFC funds. The



terms and conditions of the grant award will specify how the data are to be submitted and the schedule for submission using an online data reporting system.

If a successful Year One DFC applicant does **not** have the core measures **at the time of** application and/or award of the grant, the coalition will have two years from the time of award to report their first complete set of core measure data. Each Year One grantee will be required to submit a data collection plan to their Government Project Officer outlining specifically how the coalition will comply with the data reporting requirements. The plan is due no later than 60 days after the start of the grant award. If awarded a grant, it is the responsibility of the coalition to know the National Cross-Site Evaluation reporting schedule.

## **2.5 New Grantee Meeting Requirement**

Grantees are required to send two people (one **must** be the person charged with daily oversight of the coalition) to a three-day DFC New Grantee Meeting in Washington, DC, in the first year of the grant award. The DFC New Grantee Meeting usually takes place in early December.

## **2.6 National Coalition Academy Requirement**

The National Coalition Academy (NCA) is a three-week training program spread out over the course of several months. It is designed to train coalitions in the SPF process and guide the creation of the products necessary for successful coalition functioning and operation. Costs associated with the NCA are generally limited to travel (e.g., flight, car rental, per diem). Lodging, dependent upon location, may be provided. There are several locations across the United States where the NCA is held.

All new grantees are expected to send two people to the National Coalition Academy (NCA). The person in charge of coalition daily operations must attend all three weeks of the NCA and graduate. The second person can vary each week. This requirement does not apply to coalitions that have already attended the NCA, although these coalitions may choose to send additional coalition staff/members to the NCA if awarded the DFC grant.

It is highly recommended that you contact the National Coalition Institute immediately after being awarded the DFC grant to register for the NCA location of your choice. More information on the NCA can be found at [http://www.cadca.org/trainingevents/training\\_coalitions/national-coalition-academy](http://www.cadca.org/trainingevents/training_coalitions/national-coalition-academy).

## **3. Pre-Application Workshops**

Potential applicants, applying for the first time (Year One), current grantees applying for a second cycle of five years of funding (Year Six), or former grantees who experienced a lapse in funding during a five-year cycle, are encouraged to attend one of the following pre-application workshops. To register for a workshop listed below, go to: <https://www.cmpinc.net/dfc>.

National Harbor, MD  
Denver, CO  
Atlanta, GA

Friday, February 7, 2014 (near Washington, DC)  
Tuesday, February 11, 2014  
Thursday, February 13, 2014

These workshops **are not** mandatory in order to apply for this grant. These workshops provide technical assistance to help applicants complete their applications. They are not general technical assistance workshops for coalitions. Attendees **must** read this RFA in advance and come prepared to ask questions related to the completion of an application.

If an applicant is unable to travel to a workshop, a recorded version will be posted to the DFC website by the end of January 2014. The workshop registration link and the link for the online videos can be found at <http://www.whitehouse.gov/ondcp/information-for-potential-applicants>.

## II. AWARD INFORMATION

**Proposed budgets cannot exceed \$125,000 in total costs (direct and indirect) in any year of the proposed project.** Annual continuation awards will depend on the availability of funds, grantee progress in meeting project goals and objectives, timely submission of required data and reports, and compliance with all terms and conditions of award.

**Applicants should be aware that funding amounts are subject to the availability of funds.**

To apply for a DFC grant under this RFA, a coalition **must** fall into one of the following three categories:

1. A coalition that has never received a DFC grant;
2. A coalition that previously received a DFC grant, but experienced a lapse in funding; or
3. A coalition that has concluded the first five-year funding cycle and is applying for a second five-year funding cycle (Year 6).

Grantees will be awarded funds for one year beginning on September 30. Funds for subsequent years within a grant cycle are distributed on an annual basis as non-competing continuation awards.

Coalitions that have previously received DFC funding, but experienced a lapse in their five-year funding cycle, may re-apply for funding to complete their five-year funding cycle.

**Coalitions that have received 10 years of DFC funding are not eligible for this grant.**

### III. ELIGIBILITY INFORMATION

#### 1. ELIGIBLE APPLICANTS

**Statutory Eligibility Requirements, written into the DFC Act, are inherent in the DFC Support Program.** Read [Table 1: Statutory Eligibility Requirements](#), which contains a summary of the Statutory Eligibility Requirements and the minimum documentation applicants **must** provide to meet the eligibility criteria. The “Where to Document” section in the table shows applicants where to include the required information in their applications (e.g., as an attachment, in the Project Narrative, or in the Budget Narrative). **Failure to meet any single eligibility requirement will cause the application to be deemed ineligible, and the application will be screened out and will not move forward to peer review.** Should your application fail to meet the eligibility requirements, the person listed as the Business Official on the Application for Federal Assistance (SF-424) will receive a letter stating why the application was deemed ineligible to apply. **No additional information may be added to an application after it has been submitted.** Final authority lies with the DFC Administrator to determine the eligibility of an application.

All DFC applications will be jointly screened by ONDCP and SAMHSA to determine whether an applicant meets all the DFC Support Program statutory eligibility requirements identified in Table 1. In addition, the non-profit status of the grantee/legal applicant (if applicable) will be verified along with its ability to fiscally manage federal funds. Applications submitted by eligible coalitions that demonstrate they meet all requirements will then be scored through a peer review process according to the evaluation criteria described in the Application Review Information of this RFA. Each year, DFC grantees **must** demonstrate compliance with all of the Statutory Eligibility Requirements to be considered for continued funding.

The intent of the Drug-Free Communities Support Program is to fund activities in the United States and does not authorize the funding of organizations or activities outside the United States. If applicable, both the fiscal agent and the applicant coalition **must** be within the United States and/or the U.S. Territories.

**Table 1: Statutory Eligibility Requirements**

Eligibility Requirement Item:	Evidence Required and Where to Document:
<b>Requirement 1: 12 Sectors</b>	<b>Evidence Required:</b>
The coalition <b>must</b> consist of one or more representatives from each of the following <b>required 12 sectors</b> : <ul style="list-style-type: none"> <li>• Youth (18 or younger)</li> <li>• Parent</li> <li>• Business</li> <li>• Media</li> </ul>	A Coalition Involvement Agreement (CIA) for each of the 12 sector members.  <b>Where to Document:</b> <b>Attachment 1: 12 CIAs</b>  <b>For Additional information, please refer</b>

<ul style="list-style-type: none"> <li>• School</li> <li>• Youth-serving organization</li> <li>• Law enforcement</li> <li>• Religious/Fraternal organization</li> <li>• Civic/Volunteer groups (i.e., local organizations committed to volunteering, not a coalition member designated as a “volunteer”)</li> <li>• Healthcare professional</li> <li>• State, local, or tribal governmental agency with expertise in the field of substance abuse (including, if applicable, the state agency with primary authority for substance abuse)</li> <li>• Other organization involved in reducing substance abuse</li> </ul> <p>(21 USC 1531 §1032 (a)(2)(A))  An individual who is a member of the coalition may serve on the coalition as a representative of <b>not more than one sector category.</b>  (21 USC 1531 §1032 (a)(2)(C))</p>	<p><b>to Section 5.4 and Appendix M.</b></p>
<p style="text-align: center;"><b>Requirement 2: Six Month Existence</b></p> <p>The coalition <b>must</b> demonstrate that members have worked together on substance abuse reduction initiatives for a period of <b>not less than 6 months at the time of the application</b>, acting through entities such as task forces, subcommittees, or community boards.</p> <p>(21 USC 1531 §1032 (a)(3)(A))  The coalition <b>must</b> also demonstrate <b>substantial participation from volunteer leaders</b> in the community.  (21 USC 1531 §1032 (a)(3)(B))</p>	<p style="text-align: center;"><b>Evidence Required:</b></p> <p><b>Where to Document:</b>  - <b>Attachment 2</b> – Two sets of coalition minutes from a meeting that took place between January 1, 2013, and the deadline for submission of this application.</p> <p><b>For Additional information, please refer to Section 5.4.</b></p>
<p style="text-align: center;"><b>Requirement 3: Mission Statement</b></p> <p>The coalition <b>must</b> have as its principal mission the reduction of youth substance use, which, at a minimum, includes the use and abuse of drugs in a comprehensive and long-term manner, with a primary focus on youth in the community.  (21 USC 1531 §1032 (a)(3)(B)(4)(A))</p>	<p style="text-align: center;"><b>Evidence Required:</b></p> <p><b>Where to Document:</b>  - <b>Attachment 3</b> – Coalition’s Mission Statement</p> <p><b>For Additional information, please refer to Section 5.4 and Appendix M.</b></p>
<p style="text-align: center;"><b>Requirement 4: Multiple Drugs of Abuse</b></p>	<p style="text-align: center;"><b>Evidence Required:</b></p>
<p>The coalition <b>must</b> have developed an Action Plan</p>	<p>Action plan that identifies two drugs of</p>

<p>to reduce substance use among youth which <b>targets multiple drugs of abuse.</b></p> <p>Substances may include, but are not limited to, narcotics, depressants, stimulants, hallucinogens, inhalants, marijuana, alcohol, and tobacco, where their use is prohibited by federal, state, or local law. (21 USC 1531 §1032 (a)(4)(D))</p>	<p>use.</p> <p><b>Where to Document:</b></p> <ul style="list-style-type: none"> <li>- Project Narrative</li> </ul>
<p><b>Requirement 5: DFC National Evaluation Requirement</b></p>	<p><b>Evidence Required:</b></p>
<p>The coalition <b>must</b> establish a system to <b>measure and report</b> outcomes, established and approved by the DFC Administrator, to the federal government. (21 USC 1531 §1032 (a)(5)(A))</p>	<p>Applicants must demonstrate ability to comply with the DFC National Cross Site evaluation requirements.</p> <p><b>Where to Document:</b></p> <ul style="list-style-type: none"> <li>- <b>Attachment 13</b> - DFC National Cross-Site Evaluation Information</li> </ul> <p><b>For Additional information, please refer to Section 2.4, Section 5.4 and <a href="#">Appendix J</a>.</b></p>
<p><b>Requirement 6: Entity Eligible to Receive Federal Grants</b></p>	<p><b>Evidence Required:</b></p>
<p>The applicant <b>must</b> demonstrate that the coalition is an ongoing concern by demonstrating <b>that the coalition is a non-profit organization or has made arrangements with a legal entity that is eligible to receive federal grants.</b> (21 USC 1531 §1032 (a)(5)(A))</p> <p>Organizations eligible to receive federal funds as DFC grantees <b>must</b> be legally recognized domestic public or private nonprofit entities. For example, state and local governments; federally recognized tribes; state recognized tribes; urban Indian organizations (as defined in P.L. 94-437, as amended); public or private universities and colleges; professional associations, voluntary organizations, self-help groups, consumer and provider services-oriented constituency groups; community- and faith-based organizations; and tribal organizations. (HHS Grants Policy Statement, January 1, 2007</p>	<p>Statement of legal eligibility.</p> <p><b>Where to Document:</b></p> <ul style="list-style-type: none"> <li>- <b>Attachment 4</b> –Signed Assurance of Legal Eligibility <b>or</b> MOU between the applicant coalition and grantee/legal applicant.</li> </ul> <p><b>For Additional information, please refer to Section 5.4, <a href="#">Appendix E</a>, and <a href="#">Appendix F</a>.</b></p>

<p>– Eligibility, page I-11)</p> <p>Grantee Financial Management Requirements:</p> <p>Federal regulations governing SAMHSA grants (45 CFR Part 74 and 45 CFR Part 92) provide standards for financial management systems of grantee organizations. To determine whether grantees have financial management systems that conform to those standards, SAMHSA’s Financial Advisory Services Officers (FASO) perform Financial Capability Reviews of new or prospective grantees. If needed, FASO will request that the grantee take necessary corrective action to conform to the financial management standards.</p> <p>For more information, go to <a href="http://www.samhsa.gov/grants/management.aspx">http://www.samhsa.gov/grants/management.aspx</a></p>	
<p><b>Requirement 7: Substantial Support from Non-Federal Sources</b></p>	<p><b>Evidence Required:</b></p>
<p>The coalition <b>must</b> have a strategy to solicit <b>substantial financial support from non-federal sources to ensure that the coalition is self-sustaining.</b></p> <p>(21 USC 1531 §1032 (a)(5)(C)) &amp; (21 USC 1531 §1032 (b)(1)(A)(i))</p>	<p>Budget narrative which describes matching funds.</p> <p><b>Where to Document:</b></p> <ul style="list-style-type: none"> <li>- SF-424, Section 18</li> <li>- SF-424A</li> <li>- Budget Narrative</li> </ul> <p><b>For Additional information, please refer to Section 5.4</b></p>
<p><b>Requirement 8: Federal Request</b></p>	<p><b>Evidence Required:</b></p>
<p>The applicant <b>must not request more than \$125,000</b> in federal funds per year. (PL 109-469 §803)</p>	<p>The budget <b>may not exceed \$125,000/year.</b></p> <p><b>Where to Document:</b></p> <ul style="list-style-type: none"> <li>- SF-424, Section 18</li> <li>- SF-424A</li> <li>- Budget Narrative</li> </ul> <p><b>For Additional information, please refer to Section II – Award Information.</b></p>
<p><b>Requirement 9: Zip Code Overlap</b></p>	<p><b>Evidence Required:</b></p>
<p>Two coalitions <b>may not</b> serve the same zip code(s) <b>unless both coalitions have clearly described</b></p>	<p>Each applicant that proposes to serve a community that overlaps an existing or</p>

<p><b>their plan for collaboration</b> in their applications and each coalition has independently met the eligibility requirements. (21 USC 1531 §1032 (a)(5)(C))</p>	<p>applicant coalition <b>must</b> provide a Letter of Mutual Cooperation between the coalition and the overlapping coalition outlining their efforts to collaborate.</p> <p><b>Where to Document:</b></p> <ul style="list-style-type: none"> <li>- <b>Attachment 4</b> – Letter(s) of Mutual Cooperation, signed by both coalitions, <b>or</b> statement that there is no overlap between the applicant and other coalitions</li> <li>- <b>Attachment 9</b> – General Applicant Information Table.</li> </ul> <p><b>For Additional information, please refer to Section 5.4.</b></p>
<p><b>Requirement 10: One grant at a time</b></p>	<p><b>Evidence Required:</b></p>
<p>Grantees/coalitions may be awarded only one grant at a time through the DFC Support Program.</p>	<p>Applicants <b>must</b> sign and submit the Assurance of One DFC Grant at a Time.</p> <p><b>Where to Document:</b></p> <ul style="list-style-type: none"> <li>- <b>Attachment 6</b> –Assurance of One DFC Grant at a Time</li> </ul> <p><b>For Additional information, please refer to Section 5.4.</b></p>
<p><b>Requirement 11: No more than 10 years of DFC funding</b></p>	<p><b>Evidence Required:</b></p>
<p>Coalitions <b>may not receive more than 10 years</b> of DFC funding.</p>	<p>Applicants <b>must</b> sign the Assurance of 10-Year Funding Limit in <a href="#">Appendix H</a>.</p> <p><b>Where to Document:</b></p> <ul style="list-style-type: none"> <li>- <b>Attachment 7</b> – Assurance of 10-Year Funding Limit</li> </ul> <p><b>For Additional information, please refer to Section 5.4.</b></p>

## 2. COST SHARING and MATCH REQUIREMENTS

The DFC authorizing legislation requires grantees to demonstrate that they have matching funds from non-federal sources equivalent to federal funds requested from the DFC Support Program. Applicants **must** itemize the match separately in the budget and explain the match separately in

the Budget Narrative. A sample Budget Narrative is provided in [Appendix A](#) of this RFA. Applicants in their first cycle of DFC funding (Years One - Year Five), and those in Year Six, are required to have 100 percent match (1:1) from non-federal sources. Beginning in Year Seven, the percentage increases. **The table below indicates the percentage of match required for DFC grantees in each year of the grant.**

**Table 2: Percentage of Match**

<b>Year of Funding Requested</b>	<b>Matching Requirement</b>
1-6	100%
7-8	125%
9-10	150%

In-kind support may be used for the match requirement. In-kind support includes the value of goods and services donated to the operation of the DFC coalition, including but not limited to office space, volunteer secretarial services, pro bono accounting services, and other volunteer services to support the coalition’s work. **All match must follow the federal cost principles (see Section IV-4). Applicants cannot submit match that would not be an allowable purchase with DFC funds.** A match level over the required amount **will not** result in a higher peer review score. **All proposed match is an obligation on the part of the applicant.**

The HHS Grants Policy Statement will help you understand allowable costs, volunteer rates, and conflict of interest issues. This document is available at <http://www.samhsa.gov/grants/management.aspx>.

Federal funds, including those passed through a state or local government **cannot** be used toward the required match. The **only** exception in the DFC Support Program is in the case of a coalition that includes a representative of the Bureau of Indian Affairs, the Indian Health Service, or a tribal government agency with expertise in the field of substance abuse and serving a tribal community.

**NOTE: Please refer to [Appendix B](#) for formatting requirements and screen out criteria.**

## **IV. APPLICATION AND SUBMISSION INFORMATION**

### **1. CONTENT AND GRANT APPLICATION SUBMISSION**

You **must** go to both Grants.gov (<http://www.Grants.gov>) and the SAMHSA website (<http://beta.samhsa.gov/grants/applying>) to download the required documents you will need to apply for the DFC Support Program.



## **GRANTS.gov**

The following information provides details on downloading the required documents you will need from Grants.gov (see Appendix C for information on applying through Grants.gov). To view and/or download the required application forms, you **must** first search for the appropriate funding announcement number (called the opportunity number). For guidance on how to download forms from Grants.gov go to Appendix C.

On the Grants.gov site (<http://www.Grants.gov>), select the Apply for Grants option from the Applicants Tab at the top of the screen. Under STEP 1, click on the red button labeled: 'Download a Grant Application Package'. Enter either the Funding Opportunity Number (SAMHSA's Funding Announcement #) or the Catalogue of Federal Domestic Assistance (CFDA) Number exactly as they appear on the cover page of this RFA, then click the Download Package button. In the Instructions column, click the Download link.

You can view, print or save all of these forms. You can complete the forms for electronic submission to Grants.gov. Completed forms can also be saved and printed for your records. These required forms include:

- Application for Federal Assistance (SF-424);
- Budget Information – Non-Construction Programs (SF-424A);
- Project/Performance Site Location(s) Form;
- Disclosure of Lobbying Activities; and
- Checklist.

**Applications that do not include these required forms will be screened out and will not be reviewed.**

## **SAMHSA's Grants Website**

You will find additional materials you will need to complete your application on SAMHSA's website (<http://www.samhsa.gov/grants/apply.aspx>). These include:

- Request for Applications (RFA) – Provides a description of the program, specific information about the availability of funds, and instructions for completing the grant application. This document is the RFA;
- Assurances – Non-Construction Programs;
- Certifications; and
- Charitable Choice Form SMA 170.

See [Section IV-1.1](#)-Required Application Components to determine if you are required to submit Charitable Choice Form SMA 170. If you are, you can upload this form to Grants.gov when you submit your application.

Be sure to check the SAMHSA website **periodically for any updates on this program.**

## 1.1 Required Application Components

Applications **must** include all required application components. These components **must** be submitted in the order detailed below. Please refer to [Appendix B](#) and [C](#) for additional submission requirements (e.g., font size, page margins).

- **Application for Federal Assistance (SF-424):** This form **must** be completed by applicants for all SAMHSA grants. **NOTE:** Applicants **must** provide a Dun and Bradstreet (DUNS) number to apply for a grant or cooperative agreement from the federal government. SAMHSA applicants are required to provide their DUNS number on the face page of the application. Obtaining a DUNS number is easy and there is no charge. To obtain a DUNS number, access the Dun and Bradstreet website at <http://www.dnb.com> or call 1-866-705-5711. To expedite the process, let Dun and Bradstreet know that you are a public/private nonprofit organization getting ready to submit a federal grant application. In addition, you **must** be registered in the new System for Award Management (SAM). The former Central Contractor Registration (CCR) transitioned to the SAM on July 30, 2012. **Registration in the System for Award Management (SAM) is mandatory for any applicant of the DFC Support Program. Failure to register with SAM will lead to an application being deemed ineligible and will not proceed to peer review. It takes up to 72 hours for a SAM registration to be processed. Do not wait until the day the application is being submitted to register for SAM, as there will not be enough time for the registration to process and your application will not make the deadline. SAM information must be updated at least every 12 months to remain active (for both grantees and sub-recipients). Once you update your record in SAM, it will take 48 to 72 hours to complete the validation processes. Grants.gov will reject submissions from applicants who are not registered in SAM or those with expired SAM registrations (Entity Registrations). The DUNS number you use on your application must be registered and active in the SAM. To create a user account, Register/Update entity and/or Search Records from CCR, go to <https://www.sam.gov>.**
- **Budget Information Form:** Use SF-424A. Fill out Sections B, C, and E of the SF-424A. A sample budget and justification is included in [Appendix A](#) of this document. Your completed SF-424A should reflect the final numbers as they appear in your Budget Narrative.
- **Table of Contents: Number the bottom right corner of every page in the application,** including the Attachments, beginning with your Table of Contents as Page 1. In the

Table of Contents, include the page numbers for each of the major sections of the application and each attachment. Hand numbering of pages is allowable.

- **Community Overview:** The Community Overview describes the key features of the community. It should be **no longer than 1 page** in length.
- **Project Narrative:** The Project Narrative ([Section A](#) of this RFA) describes the efforts the coalition will undertake to address youth substance use. It consists of 5 questions and can be **no longer than 25 pages**.
- **Budget Narrative:** The Budget Narrative ([Section B](#) of this RFA) provides narrative detail about both the federal request and the non-federal match.
- **Attachments 1 through 14:** Please clearly label each attachment provided. Applications with additional attachments will **not** receive a higher score.
- **Assurances:** Non-Construction Programs. Applicants **must** read the list of assurances provided on the SAMHSA website and **check the box marked ‘I Agree’** before signing the face page (SF-424) of the application.
- **Certifications:** Applicants **must** read the list of certifications provided on the SAMHSA website and **check the box marked ‘I Agree’** before signing the face page (SF-424) of the application.
- **Project Performance Site Location(s) Form:** The purpose of this form is to collect location information on the site(s) where work funded under this grant announcement will be performed. This form will be posted with the RFA on SAMHSA’s website with the RFA.
- **Assurance of Compliance with SAMHSA Charitable Choice Statutes and Regulations Form SMA 170:** Applicants are required to complete the Assurance of Compliance with SAMHSA Charitable Choice Statutes and Regulations Form SMA 170. This form is available on SAMHSA’s website at <http://beta.samhsa.gov/grants/applying/forms-resources>.
- **Disclosure of Lobbying Activities:** Federal law prohibits the use of appropriated funds for publicity or propaganda purposes or for the preparation, distribution, or use of the information designed to support or defeat legislation pending before the Congress or state legislatures. This includes “grass roots” lobbying, which consists of appeals to members of the public suggesting that they contact their elected representatives to indicate their support for or opposition to pending legislation or to urge those representatives to vote in a particular way. You **must** hand sign and submit this form, if applicable.

- **Checklist:** The Checklist ensures that you have obtained the proper signatures, assurances and certifications. You **must complete the entire form** including the top portion “Type of Application”, indicating if this is a New, Non-Competing Continuation, Competing Continuation or Supplemental application, as well as Parts A through D.
- **Documentation of non-profit status** as required in the Checklist.
- **Pre-Submission Verification:** Use the checklist found in [Appendix O](#). This verification ensures that you have accurately documented the eligibility requirements and included all major components of the application.

## 1.2 Application Formatting Requirements

Please refer to [Appendix B](#), *Checklist for Formatting Requirements and Screen- out Criteria for SAMHSA Grant Applications*, for SAMHSA’s basic application formatting requirements. Applications that **do not** comply with these requirements will be screened out and will not be reviewed.

## 2. APPLICATION SUBMISSION REQUIREMENTS

Applications are due by **11:59 PM** (Eastern Time) on **March 26, 2014**.

**Your application must be submitted through <http://www.Grants.gov>.** Please refer to [Appendix C](#), “Guidance for Electronic Submission of Applications.” SAMHSA requires electronic submission for grant applications. **Within 30 days of receipt of an application, applicants will be notified by postal mail that the application has been received.** If an applicant submits an application on time and does not receive notification within that 30-day timeframe, the applicant should contact SAMHSA’s Office of Grant Review at 240-276-1199 for additional information.

## 3. INTERGOVERNMENTAL REVIEW (E.O. 12372) REQUIREMENTS

This grant program is covered under Executive Order (EO) 12372, as implemented through Department of Health and Human Services (DHHS) regulation at 45 CFR Part 100. Under this Order, states may design their own processes for reviewing and commenting on proposed federal assistance under covered programs. See [Appendix K](#) for additional information on these requirements as well as requirements for the Public Health Impact Statement.

## 4. FUNDING LIMITATIONS/RESTRICTIONS

Cost principles describing allowable and unallowable expenditures for federal grantees, including SAMHSA grantees, are provided in the following documents, which are available at <http://www.samhsa.gov/grants/management.aspx>.

**Table 3: Cost Principles**

<b>Applies to:</b>	<b>Cost Principle:</b>
Educational Institutions	2 CFR Part 220 (OMB Circular A-21)
State, Local and Indian Tribal Governments	2 CFR Part 225 (OMB Circular A-87)
Nonprofit Organizations	2 CFR Part 230 (OMB Circular A-122)
Hospitals	45 CFR Part 74, Appendix E

**HHS Grant Policy Statement** – This HHS directive covers grant policies including, but not limited to, general administrative and cost considerations. Part II of the HHS Grant Policy statement describes selected allowable and unallowable costs items and activities. This document is available at <http://www.samhsa.gov/grants/management.aspx>.

In addition, SAMHSA’s DFC Support Program grant recipients **must** comply with the following funding restrictions:

- Food is **generally** unallowable. Exceptions within the DFC Support Program may include when food is used as a small incentive (not to exceed \$2.50 per person) to encourage participation in a community-wide event. Food costs are **not** allowable for general coalition or subcommittee meetings.
- No more than **20 percent** of the total grant award may be used for **evaluation** purposes.
- DFC grant funds may **not** be passed-through to another entity to conduct the substantive programmatic work on the program. The funded coalition is expected to perform the substantive role in efforts carried out by this grant.
- DFC grant funds may **not** be used to provide funding to community organizations through mini-grants, including one coalition funding another coalition.
- DFC grant funds may **not** be utilized for the following: law enforcement equipment, drug search detection canines or related training, drug courts, lighting, or community gardening efforts.

## **V. APPLICATION REVIEW INFORMATION**

### **1. GENERAL INSTRUCTIONS**

For FY 2014, there are **5 questions** in the Project Narrative (Section A) and only these questions may be used when applying for FY 2014 funding. **Failure to use the correct RFA will result in an application being screened out and not proceeding to peer review.**

## 2. EVALUATION CRITERIA

The DFC Support Program's peer review process utilizes current and former DFC grantees to serve as peer reviewers. Applicants should consider the audience when assembling and writing their application. Each application is assigned to a panel of three peer reviewers for scoring. Each application is scored and the composite of the three scores becomes the application's final score. These final scores are ranked from the highest to the lowest and sent to ONDCP for review and funding decisions. Upon full completion of the statutory eligibility review process and review of final scores, ONDCP begins funding with the highest scoring grant until all funds are exhausted.

**NOTE:** The DFC Act **requires that all** applications be considered and reviewed equally. **Those applying for Year Six do not receive a higher priority than those applying for Year One. Those applying for Year Six are reviewed and screened exactly as a Year One application.** A Year Six applicant's past performance is **not** a factor in funding decisions. Only the submitted application is forwarded to peer reviewers. In addition, grants **are not** awarded based on how many DFC-funded coalitions are within a geographic boundary (e.g., state, county, city).

## 3. APPLICATION SCORING INSTRUCTIONS

Peer reviewers will tally the points each applicant receives for each question to create a total score for the Project Narrative (scores will range from 0 to 100 points).

### 3.1 Project Narrative Scoring

All applications that proceed to peer review will be rated on a 100-point scale. Peer reviewer ratings, and any resulting recommendations, are advisory. The primary decision criterion is the application's final peer review score. All final grant award decisions will be made by the DFC Administrator. In the case of ties and consistent with the DFC Act of 1997, ONDCP may give consideration to rural, American Indian/Alaska Native, and economically disadvantaged communities.

## 4. REVIEW AND SELECTION PROCESS

Applications will be screened jointly by ONDCP and SAMHSA to determine whether applicants meet all statutory eligibility requirements as outlined in this RFA. Applications submitted by coalitions that meet all statutory eligibility requirements will then be scored by a peer review panel. The scoring criteria will be posted at <http://beta.samhsa.gov/grants/grant-announcements> and <http://www.whitehouse.gov/ondcp/information-for-potential-applicants> in early February 2014.

## 5. RESPONDING TO THE RFA

### 5.1 Community Overview (Not Scored)

The Community Overview should be placed after the Table of Contents. Type the heading **Community Overview**, then describe the community the applicant coalition intends to serve. This is the applicant's opportunity to educate the peer reviewers about the community, enabling them to understand the context in which the coalition will operate. This will assist the peer reviewers in scoring the Project Narrative. **The Community Overview is not scored and does not count toward the 25 page limit. However, it can be no longer than one page in length.** In the Community Overview, at a minimum, provide the following information:

- Describe the community, including demographics and aspects of diversity such as age, race, ethnicity, gender, socioeconomic status, culture, religion, and sexual orientation.
- Describe what it is like to live and work in the community.
- Provide a historical perspective focusing on shifts or events that have had an impact on youth substance use in the community.

### 5.2 SECTION A: PROJECT NARRATIVE (SCORED: MAXIMUM OF 100 POINTS)

In developing the Project Narrative, use the instructions below, which have been tailored to the DFC Support Program.

- The Project Narrative must be no longer than **25 pages**. Applications with a Project Narrative that exceeds the **25 page** limit will be screened out and will not go to peer review.
- Restrictions related to font size and page margins found in [Appendix B](#) must be followed.
- Respond to each question individually, building each response on previous responses so all answers together tell a cohesive story of the community and coalition.
- Place all responses and required information under the correct question. Do not direct peer reviewers to information related to one question in another question. Each question must be answered in its entirety within the numbered question's answer. Applicants must not direct peer reviewers to documents in the Attachments, as they are not scored. All pertinent information must be included in the Project Narrative for appropriate scoring.
- The Project Narrative will be scored according to how well the applicant answers each of the bullets under each question. Each bullet will be assessed when determining the score for each question. If a coalition cannot answer a specific bullet, then the reason for this must be explained within the answer to the question.

### **5.2.1 Section A: Questions for Project Narrative**

The following **5 questions** enable applicants to tell the story of their current and future efforts to prevent youth substance use in their community. Bolded questions are followed by bulleted items outlining the **required** components of each response. Applicants are required to type the question number followed by the bolded question. Responses **must** follow each question and address all bullets. Applicants are not required to retype the bullets, but **must** answer them completely.

#### **COALITION HISTORY & COALITION MEMBER INVOLVEMENT**

**1. How did the coalition develop and how is the coalition collaborating with community leaders/organizations to prevent youth substance use? (15 points) Provide explanations of the following:**

- Describe coalition's developmental history as a community based entity addressing youth substance use.
- Describe the techniques for recruiting and retaining coalition members.
- Describe how each of the 12 sector representatives (for the CIAs provided) is best fit for the assigned sector.
- Describe current and potential coalition collaboration(s) with local organizations and community leaders.
- Describe coalition's efforts to increase the capacity and effectiveness of the coalition members and its leadership.

#### **COALITION DECISION MAKING**

**2. What are the coalition's decision-making processes? (20 points) Provide explanations of the following:**

- Describe the inclusion of the coalition's paid staff, coalition members, and/or potential contractors in the coalition's day-to-day decision-making processes.
- Describe the development of policies/procedures, by-laws, roles and responsibilities of staff, coalition members and legal grantee (if different from coalition).
- Describe the current decision-making processes related to the coalition's efforts to reduce youth substance use.



- Describe the decision-making processes related to financial management by the coalition, to include, if any, the role of the legal grantee (if different from coalition).

## **ANALYZE AND DISSEMINATE DATA**

### **3. What are the current youth substance use problems in the community? (20 points) Provide explanations of the following:**

- Describe the youth substance use problems and the unique local conditions that contribute to youth substance use.
- Provide current quantitative and qualitative data on youth substance use for alcohol, tobacco, marijuana, and prescription drugs for the following measures: past 30-day use, perception of risk/harm of use, perception of parental disapproval of use and perception of peer disapproval of use.
- Describe the coalition's processes for prioritizing the substances to be addressed using DFC funds (must name at least two substances).
- Discuss the specific tools, approaches and strategic processes to be used to collect, analyze and disseminate data (e.g., frequency of data collection, role of key staff, coalition members, and evaluator, if applicable, in data collection and analysis, etc.).

## **12-MONTH COALITION ACTION PLAN**

### **4. What is the coalition's 12 Month Coalition Action Plan for addressing youth substance use in the community if awarded a DFC grant? (30 points)**

This question is answered by developing and providing a 12 Month Coalition Action Plan using the Table 4 shown below. Do not provide narrative explanation of this question. This plan should include interrelated goals, objectives, strategies, and activities. It should cover a period of 12 months (September 30, 2014 to September 29, 2015). DFC grantees are required to plan and implement prevention strategies to affect community level change. The 12 Month Coalition Action Plan should be comprehensive, detailed and measurable.

Under DFC Goal One, include **measurable** objectives, strategies and activities used to ensure collaboration, coordination and community based networking to prevent youth substance use.

Under DFC Goal Two include **measurable** objectives, strategies and activities used to prevent and reduce youth substance use.

**Tips for Creating an Action Plan**

- The Action Plan **must** fall within the text of the Project Narrative and **will** count toward the **25 page** limit.
- Applicants **must** use the template provided in Table 4.
- Applicants submitting an electronic application **must** use Times New Roman 12-point font in the Action Plan and **must** adhere to all instructions provided in Appendix C, Guidance for Electronic Submission of Applications.
- The 12 Month Coalition Action Plan **must** include the two DFC goals provided in Table 4. Applicants may add additional goals and related objectives, strategies, and activities.
- All objectives **must** be measurable and include a specific target date (i.e., 06/30/14) by when the change will be accomplished, as well as how much change will occur (i.e., increase/decrease) and the population addressed (i.e., youth ages 12-17).
- The 12 Month Coalition Action Plan will be used to monitor the coalition’s performance.
- The 12 Month Coalition Action Plan should be comprehensive to include all of the coalition’s efforts. Applicants may include as many measurable objectives, strategies, and activities as necessary to create a comprehensive 12 Month Coalition Action Plan, following the Seven Strategies for Community Change as described on pg. 7 of this RFA.
- The Action Plan **must** address at least two named substances (in alignment with answer provided in Question 3).
- Separate the objectives for each substance addressed. Do not put all substances into a single measurable objective. The strategies and activities should be specific to the named drug. Activities may be repeated under multiple objectives.

**Table 4: 12-Month Action Plan**

Applicants **must** use this table to outline the coalition’s plans under the two DFC goals. Cells in the following tables are intentionally left blank.

**DFC Goal One: Increase community collaboration**

Objective 1: *Provide measurable objective*

Strategy 1: *Provide specific strategy*

Activity	Who is responsible?	By when?
----------	---------------------	----------

Activity	Who is responsible?	By when?

Strategy 2: Provide specific strategy

Activity	Who is responsible?	By when?

**DFC Goal Two: Reduce youth substance use**

Objective 1: *Provide measureable objective.*

Strategy 1: *Provide specific strategy.*

Activity	Who is responsible?	By when?

Strategy 2: *Provide specific strategy.*

Activity	Who is responsible?	By when?

**MONITOR AND EVALUATE EFFECTIVENESS OF ACTION PLAN**

**5. How will staff and the coalition members monitor and evaluate the effectiveness of the 12 Month Coalition Action Plan? (15 points) Provide explanations of the following:**

- Describe the type of data that will be collected to measure the effectiveness of the strategies and activities of the 12 Month Coalition Action Plan.
- Describe how the coalition will measure and analyze the data collected.
- Describe how the coalition will apply the outcomes to adjust and strengthen the 12 Month Coalition Action Plan.
- Describe the coalition’s communication plan to inform the community of the data outcomes and its impact on the 12 Month Coalition Action Plan

**\*\*From this point forward, the information submitted does not count against your 25 page limit.\*\***

### **5.3 SECTION B: BUDGET NARRATIVE (NOT SCORED)**

In this section, applicants **must** provide a 12-month Budget Narrative to include budget details and justification for expenditures. The Budget Narrative **must** include a description of matching resources and other support that the coalition will receive. **No more than 20 percent of the grant award may be used for evaluation activities.** Applicants **must** use the template provided in [Appendix A](#), including providing a narrative description for each budget category for both federal requests and non-federal match. **There is no page limit for the Budget Narrative.** When submitting your application through Grants.gov, the Budget Narrative **must** be submitted as file BNF (See [Appendix C](#), Guidance for Electronic Submission).

### **5.4 SECTION C: REQUIRED ATTACHMENTS (NOT SCORED)**

**All attachment pages must be numbered. Applicants may hand-number pages if necessary.** Although these sections are not scored by peer reviewers, they are critical to an application's ability to move forward to peer review. This information should follow Sections A and B of the application with continuous page numbers. It is extremely important to order and label these documents as indicated below. The RFA provides applicants with several "appendices". Applicants must submit all appendices as "attachments".

**NOTE:** Before you begin completing the attachments, review the **Pre-Submission Verification Checklist** in Appendix O, the final page of your application. The Pre-Submission Verification Checklist will help ensure that all required documents are included in the application.

**Attachment 1 - Coalition Involvement Agreements:** Applicants **must** include one Coalition Involvement Agreement (CIA) for each of the 12 sectors. **Two separate signatures are required** on each CIA. One signature **must** be that of the individual listed as the coalition sector representative, and the other **must** be the signature from a coalition chair, paid staff, or any other individual who represents the coalition. **All signatures must be hand written and dated.** **CIA's cannot be more than 12 months old at the time of application.**

**NOTE:** Neither paid staff (current or proposed), nor the person signing the CIA on behalf of the coalition serve as one of the 12 sector representatives.

**Attachment 2 - Two Sets of Coalition Minutes:** Applicants **must** include two sets of coalition minutes. Each set of minutes must be from a coalition meeting that took place between January 1, 2013 and the deadline for submission of this application. Meeting minutes must include month, date, and year; demonstrate coalition membership involvement; and include attendees noting the sector that each attendee represents.

**Attachment 3 - Coalition Mission Statement:** Applicants **must** provide a copy of the coalition's Mission Statement. The statement cannot be that of an outside agent being used as the grantee/legal applicant (if applicable) for a coalition. The principal mission of the coalition **must** be the reduction and/or prevention of youth substance use.

**Attachment 4 - Assurance of Legal Eligibility or Grantee/Legal Applicant & Coalition:** An applicant coalition that is eligible to receive federal grant funds and is applying for this grant on its own **must** complete Appendix E. If a coalition is **not** eligible to receive federal grant funds on its own, it **must** make arrangements with a legally eligible entity that will apply for the grant on behalf of the coalition. If this is the case, applicants **must** submit an MOU between the applicant coalition and grantee/legal applicant that is not more than 12 months old at the time of application, refer to [Appendix F](#).

**NOTE: If submitting a MOU, one individual cannot sign as both the grantee/legal applicant and the coalition.**

**Attachment 5 - Letter of Mutual Cooperation:** Each applicant that proposes to serve a community that overlaps an existing or applicant coalition **must** provide a Letter of Mutual Cooperation between the coalition and the overlapping coalition outlining their efforts to collaborate. If there are no zip code overlaps identified, simply state this on a piece of paper and insert as Attachment 5.

**Attachment 6 - Assurance of One DFC Grant at a Time:** Applicants **must** sign and submit the Assurance of One DFC Grant at a Time document found in [Appendix G](#).

**Attachment 7 - Assurance of 10-Year Funding Limit:** Applicants **must** sign and submit the Assurance of 10-Year Funding Limit document found in [Appendix H](#).

**Attachment 8 - Resumes and Job Descriptions:** Applicants **must** include a resume (no longer than two pages) and a position description (no longer than one page) for the Program Director and Project Coordinator, and each additional key paid or in-kind position. Information on what should be included in resumes and position descriptions can be found in [Appendix I](#).

**Attachment 9 - General Applicant Information:** Applicants **must** complete the table provided in [Appendix J](#). Answer all questions.

**Attachment 10 - Intergovernmental Review Requirements:** If applicable, include a copy of the letter to the Single State Agency (SSA) showing that the applicant has informed the SSA contact person that an application has been submitted for a DFC grant. Information related to this attachment is found in [Appendix K](#). If not applicable, applicants should include a sheet of paper with the words Attachment 10 at the top and indicate that the attachment is not applicable.

**Attachment 11 - Certifications, Disclosures, and Checklists:** Applicants **must** include the project site location(s) form, certifications, assurances, and disclosures noted in Section III-2 of this RFA.

**Attachment 12 - Disclosure of Prior DFC Funding:** Applicants **must** complete the information requested in [Appendix L](#) related to prior DFC funding for the legal applicant/grantee and applicant coalition for this RFA. Applicants **must** also indicate the year of funding for which they are applying.

**Attachment 13 - DFC National Cross-site Evaluation Requirements:** Applicants **must** complete the form included in [Appendix M](#) related to the ability to collect the data necessary to be in compliance with the DFC National Cross-site Evaluation. Regardless of the substances a coalition is choosing to address, successful applicants **must** collect data on the DFC Core Measures, see Section 2.4.

**Attachment 14 - Congressional Notification:** All applicants **must** include a Congressional Notification. This information will be utilized to provide 48-hours of notice to your Congressional Members should you receive DFC funding. Using the template provided in [Appendix N](#), complete all the information exactly as provided in the template.

**Grant Application Package Checklist** – The next to last page within your application should be the checklist found in the Application Package downloaded from Grants.gov.

## **VI. ADMINISTRATION INFORMATION**

### **1. AWARD NOTICES**

By the end of **August 2014**, the list of awardees will be posted at <http://www.whitehouse.gov/ondcp/Drug-Free-Communities-Support-Program>. For all awardees, a Notice of Award (NoA) will then be mailed from SAMHSA's Division of Grants Management to the individual listed as the Business Official on the Application for Federal Assistance. The NoA is the sole obligating document that allows the grantee to receive federal funding for work on the grant project.

By the end of **October 2014**, all applicants whose applications were sent to peer review will receive a letter from SAMHSA through postal mail and sent to the individual listed as the Business Official on the Application for Federal Assistance. This document contains the peer review score and summarized comments. If an application is not funded, the applicant may re-apply if there is another receipt date for the program.

## 2. ADMINISTRATIVE AND NATIONAL POLICY REQUIREMENTS

- If your application is funded, you **must** comply with all terms and conditions of the grant award. SAMHSA's standard terms and conditions are available on the SAMHSA website at <http://www.samhsa.gov/grants/management.aspx>.
- If your application is funded, you must also comply with the administrative requirements outlined in 45 CFR Part 74 or 45 CFR Part 92, as appropriate. For more information see the SAMHSA website at <http://www.samhsa.gov/grants/management.aspx>.
- If your application is funded, you will be held accountable for the information provided in the application relating to performance targets. SAMHSA program officials will consider your progress in meeting goals and objectives, as well as your failures and strategies for overcoming them, when making an annual recommendation to continue the grant and the amount of any continuation award. Failure to meet stated goals and objectives may result in suspension or termination of the grant award, or in reduction or withholding of continuation awards.
- If your application is funded, you must comply with Executive Order 13166, which requires that recipients of federal financial assistance provide meaningful access to limited English proficient (LEP) persons in their programs and activities. You may assess the extent to which language assistance services are necessary in your grant program by utilizing the HHS Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons, available at <http://www.hhs.gov/ocr/civilrights/resources/laws/revisedlep.html>.
- Grant funds cannot be used to supplant current funding of existing activities. "Supplant" is defined as replacing funding of a recipient's existing program with funds from a federal grant.

## 3. REPORTING REQUIREMENTS

In addition to the data reporting requirements listed in Section [I-2.4](#) you **must** comply with the following reporting requirements:

### 3.1 PROGRESS AND FINANCIAL REPORTS

Each year, grantees are required to submit two program progress reports, an annual coalition classification tool survey, and various financial reports. Full details regarding specific due dates are available at <http://www.whitehouse.gov/ondcp/information-for-current-grantees>.

## 3.2 PUBLICATIONS

If you are funded under this grant program, you are required to notify the Government Project Officer and SAMHSA's Publications Clearance Officer (240-276-2130) of any materials based on the SAMHSA-funded grant project that are accepted for publication. In addition, SAMHSA request that grantees:

- Provide the Government Project Officer and SAMHSA Publications Clearance Officer with advance copies of publications.
- Include acknowledgment of the ONDCP and SAMHSA grant program as the source of funding for the project.
- Include a disclaimer stating that the views and opinions contained in the publication do not necessarily reflect those of SAMHSA, the U.S. Department of Health and Human Services, or the Executive Office of the President, Office of National Drug Control Policy, and should not be construed as such.

SAMHSA and ONDCP reserve the right to issue a press release about any publication deemed by SAMHSA and ONDCP to contain information of program or policy significance to the substance abuse prevention community.

## VII. AGENCY CONTACTS

### **For questions about program issues contact:**

DFC RFA Helpline Team  
Division of Community Programs  
(240) 276-1270  
[dfcnew2014@samhsa.hhs.gov](mailto:dfcnew2014@samhsa.hhs.gov)

### **For questions on grants management and budget issues contact:**

Virginia Simmons  
Office of Financial Resources, Division of Grants Management  
Substance Abuse and Mental Health Services Administration  
1 Choke Cherry Road  
Room 7-1109  
Rockville, Maryland 20857  
(240) 276-1422  
[Virginia.simmons@samhsa.hhs.gov](mailto:Virginia.simmons@samhsa.hhs.gov)



# Appendix A – Sample Budget (Includes Budget Terminology and Sample Budget Narrative)

## **Budget Preparation**

The Budget Narrative is used to determine reasonableness and allowability of costs in a DFC application. All of the proposed costs listed, whether supported by grant funds or match, **must** be reasonable, necessary to accomplish project objectives, allowable in accordance with applicable Federal Cost Principles, auditable, and incurred during the project period. All figures **must** be rounded to the nearest dollar.

Before developing a budget, applicants should review SAMHSA’s guidelines available at <http://www.samhsa.gov/grants/management.aspx> to determine cost sharing expectations and restrictions on the types of costs that may appear in the budget.

## **Budget Terminology**

**Allowability of Cost:** An allowable project cost is a cost that is:

1. Reasonable for the performance of the award.
2. Allocable.
3. In conformance with any limitations or exclusions set forth in the Federal Cost Principles applicable to the organization incurring the cost.
4. Consistent with the recipient’s regulations, policies, and procedures which are applied uniformly to both federally-supported and other activities of the organization.
5. Accorded consistent treatment as a direct or indirect cost.
6. Determined in accordance with generally accepted accounting principles.
7. Not included as a cost in any other federally-supported award.

**Cost Principles:** The cost principles address the following four tests in determining the allowability of costs:

1. **Reasonableness** - (including necessity). A cost is reasonable if it does not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost.
2. **Allocability** - A cost is allocable to a specific grant, function, department, or other component, known as a cost objective, if the goods or services involved are chargeable or assignable to that cost objective in accordance with the relative benefits received or other equitable relationship.

3. **Consistency** - Regulations regarding cost assignment **must** be consistent for all work of the organization under similar circumstances, regardless of the source of funding, to avoid duplicate charges.
4. **Conformance** - Conformance with limitations and exclusions contained in the terms and conditions of award, including those in the cost principles, may vary by the type of activity, the type of recipient, and other characteristics of individual awards.

These four tests apply regardless of whether the particular category of costs is one specified in the cost principles or one governed by other terms and conditions of an award. These tests also apply regardless of categorization as a direct cost or an indirect cost. The fact that a grant is awarded does not indicate a determination of allowability of all proposed costs.

**Key Personnel:** Individuals who contribute to the project in a substantive, measurable way, whether or not they receive salaries or other compensation under the grant (i.e., Program Director, Project Coordinator). **The Program Director and the Project Coordinator may be the same person.**

- **Program Director:** An individual who provides daily oversight of the grant, including fiscal and personnel management, community relations, implementation, and evaluation (Person listed in Part C of the Checklist found in the Grant Application Package).
- **Project Coordinator:** An individual who coordinates the work of the coalition and DFC activities, including training, coalition communication, data collection, and information dissemination. The Project Coordinator will be listed on the DFC website if a grant is awarded.

**Level of Effort:** The direct time spent by an individual on DFC Support Program-related work. Across all projects/grants/positions, the level of effort for an individual may not exceed 100 percent.

**Direct Costs:** Costs that can be identified specifically with a particular award, project, program, service, or other organizational activity, or that can be directly assigned to an activity with a high degree of accuracy. Normally, direct costs include, but are not limited to, salaries, travel, equipment, and supplies directly benefiting the grant-supported project or program.

**Indirect Costs (if applicable):** Also known as “facilities and administrative costs,” indirect costs are costs that cannot be specifically identified with a particular project, program, or activity, but are necessary to the operation of the organization (i.e., overhead). Facilities operation and maintenance costs, depreciation, and administrative expenses are examples of costs that are usually treated as indirect costs. The organization **must** not include costs associated with its indirect rate as direct costs. Indirect costs require a negotiated indirect cost rate agreement. If indirect costs are claimed, an indirect cost rate agreement **must** be submitted with the application.

**Research indirect cost rates are not allowable and will not be accepted. For more information on the establishment of indirect cost rate agreements, contact the Division of Cost Allocation (DCA). Regional contact information** can be found at the following DCA website: <https://rates.psc.gov/fms/dca/negotiations.html>.

**Total Project Costs (Direct and Indirect):** The total allowable costs charged to the award during a budget period, whether paid by federal funds or contributed to meet the matching requirement, and the value of any third-party in-kind contributions counted toward the recipient’s matching requirement.

**Budget Expectations (Future Years and Projected Total):** If an applicant has sufficient match to allow a budget request of the full \$125,000, the applicant should round up the final budget figures to equal \$125,000. **Applicants will not receive a higher score for requesting less than \$125,000.** Applicants are strongly encouraged to apply for the full \$125,000 for each of the four subsequent renewal years of funding in their budget forecast even if they are not able to apply for full funding in Year One due to insufficient match.

**The amount requested in this original application for the four future years establishes the maximum amount that an applicant can receive in future years if awarded the grant.**

Grantees are required to submit an annual budget request each year. The annual amount requested can be less than \$125,000 due to challenges such as insufficient match, but can never be greater than the amount indicated in this submission. Therefore, it is more advantageous to request the full \$125,000 for each out-year of funding. **Avoid conflict of interest within proposed contractual costs. See the definition of Conflict of Interest and examples below:**

<p><b>Conflict of Interest:</b> Federal regulations prohibit the appearance and existence of conflict of interest situations for employees, officials, and agents of the organization.</p> <p>Reference – 45 CFR 74.42 &amp; 43; 45 CFR 92.36; Part II-7 of the HHS Grants Policy Statement, issued January 1, 2007.</p>	<p><b>Examples:</b> An officer or employee has an interest in a company selected for a contract or consulting relationship, such as through their ownership, the ownership by a family member or through financial or other business ties (for example, sector members).</p> <p>Nepotism - an employee is supervised by a family member under the federally sponsored project.</p> <p>An individual is contracted to be a grant writer and/or provide input into the grant application. This individual is then written into the grant application to be an evaluator, program director, project coordinator, etc. for the applicant organization. This would violate the federal competition rules because contractors involved with the writing or preparation of the application cannot compete for contracts under the grant.</p> <p>Applicant, if awarded, will be required to alert to organizational</p>
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	conflicts of interest as well as noncompetitive practices among contractors that may restrict or eliminate competition.
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**NOTE:** In the Budget Narrative, applicants **must** provide **Table 20: Future Years Budget Summary** and **Table 21: Calculation of Future Years and Projected Total**.

**Sample Budget Narrative**  
**(For completing SF-424A: Section B for First Year of the Funding Cycle)**

A. Personnel: An employee of the applying agency whose work is tied to the application. Proposed salaries **must** be reasonable. Compensation paid for employees **must** be reasonable and consistent with that paid for similar work within the applicant’s organization and similar positions in the industry.

**Table 5: FEDERAL REQUEST**

Position	Name	Annual Salary/Rate	Level of Effort	Cost
Project Director	John Doe	\$64,890	5%	\$6,489
Project Coordinator	TBD	\$46,276	50%	\$46,276
			<b>TOTAL</b>	<b>\$52,765</b>

**NARRATIVE JUSTIFICATION:** Enter a description of the personnel funds requested and how their use will support the purpose and goals of this proposal. Describe the role, responsibilities, and unique qualifications of each position.

**Table 6: NON-FEDERAL MATCH**

Position	Name	Annual Salary/Rate	Level of Effort	Cost
Clerical Support	John Doe	\$13.38/hr x 50 hr.	50 hrs/year	\$1,338
			<b>TOTAL</b>	<b>\$1,338</b>

**NARRATIVE JUSTIFICATION:** Enter a description of the personnel matching funds provided and how their use will support the purpose and goals of this proposal. Describe how the matching funds will enhance the federal budget request.

**SOURCE OF MATCH FUNDS:** State source of match funds.

**FEDERAL REQUEST** (enter in Section B column 1 line 6a of form SF-424A): **\$52,765**

**NON-FEDERAL MATCH** (enter in Section B column 2 line 6a of form SF-424A): **\$1,338**

**B. Fringe Benefits:** Fringe benefits may include contributions for items such as social security, employee insurance, and pension plans. Only those benefits not included in an organization's indirect cost pool may be shown as direct costs. List all components of the fringe benefits rate.

**Table 7: FEDERAL REQUEST**

Component	Rate	Wage	Cost
FICA	7.65%	\$52,765	\$4,037
Workers Compensation	2.5%	\$52,765	\$1,319
Insurance	5.5%	\$52,765	\$5,540
		<b>TOTAL</b>	<b>\$5,896</b>

**JUSTIFICATION:** Enter a description of the fringe matching funds provided and how the rate was determined.

**Table 8: NON – FEDERAL MATCH**

Component	Rate	Wage	Cost
FICA	7.65%	\$1,338	\$52
Workers Compensation	2.5%	\$1,338	\$33
Insurance	5.5%	\$1,338	\$140
		<b>TOTAL</b>	<b>\$275</b>

**NARRATIVE JUSTIFICATION:** Enter a description of the fringe matching funds provided and how the rate was determined.

**SOURCE OF MATCH FUNDS:** State source of match funds.

**FEDERAL REQUEST** (enter in Section B column 1 line 6b of form SF-424A): **\$5,896**

**NON-FEDERAL MATCH** (enter in Section B column 2 line 6b of form SF-424A): **\$275**

**C. Travel:** Explain need for all travel other than that required by this application. Local travel policies prevail. The lowest available commercial fares for coach or equivalent accommodations **must** be used. **NOTE:** Grantees will be expected to follow federal travel policies found at <http://www.gsa.gov>.

**Table 9: FEDERAL REQUEST**

Purpose of Travel	Location	Item	Rate	Cost
New Grantee Meeting	Washington, DC	Airfare	\$300/flight x 2 persons	\$600
		Hotel	\$200/night x 2 persons x 4 nights	\$1,600
		Per Diem (meals and incidentals)	\$64/day x 2 persons x 4 days	\$512
Coalition Academy Week 1	Ft. Indiantown Gap, PA	Airfare	\$200/flight x 2 persons	\$400
Coalition Academy Week 1	Ft. Indiantown Gap, PA	Car Rental	\$200/week, unlimited miles	\$200

Purpose of Travel	Location	Item	Rate	Cost
Coalition Academy Week 2	Ft. Indiantown Gap, PA	Airfare	\$200/flight x 2 persons	\$400
Coalition Academy Week 2	Ft. Indiantown Gap, PA	Car Rental	\$200/week, unlimited miles	\$200
Coalition Academy Week 3	Ft. Indiantown Gap, PA (tentative site)	Airfare	\$200/flight x 2 persons	\$400
Coalition Academy Week 3	Ft. Indiantown Gap, PA	Car Rental	\$200/week, unlimited miles	\$200
Local travel	County-wide	Mileage	3,000 miles @ .50/mile	\$1,500
			<b>TOTAL</b>	<b>\$6,012</b>

**JUSTIFICATION:** Describe the purpose of travel and how costs were determined. The grant requires that two members attend the New Grantee Meeting in Washington, DC. Attendance at the National Coalition Academy is required of all Year One grantees. In addition to the required trainings, funds for local travel are needed to attend local meetings, project activities, and training events. Local travel rate should be based on agency's personally owned vehicle (POV) reimbursement rate, which should correspond with the GSA rate found at <http://www.gsa.gov>.

**Table 5: NON-FEDERAL MATCH**

Purpose of Travel	Location	Item	Rate	Cost
Regional Training Conference	Chicago, IL	Airfare	\$300/flight x 2 persons	\$600
Regional Training Conference	Chicago, IL	Hotel	\$155/night x 2 persons x 2 nights	\$620
Regional Training Conference	Chicago, IL	Per Diem (meals)	\$46/day x 2 persons x 2 days	\$184
Local Travel	Outreach workshops	Mileage	304 miles x \$0.50/mile	\$152
			<b>TOTAL</b>	<b>\$1,556</b>

**NARRATIVE JUSTIFICATION:** Enter a description of the travel matching funds provided and how their use will support the purpose and goals of this proposal. Describe how the matching funds will enhance the Federal budget request. Local travel rate should be based on agency's POV reimbursement rate, which should correspond with the GSA rate found at <http://www.gsa.gov>.

**SOURCE OF MATCH FUNDS:** State source of match funds.

**FEDERAL REQUEST** (enter in Section B column 1 line 6c of form SF-424A): **\$4,604**

**NON-FEDERAL MATCH** (enter in Section B column 2 line 6c of form SF-424A): **\$1,556**

**D. Equipment:** Permanent equipment may be charged to the project only if the applicant can demonstrate that purchase will be less expensive than rental. Permanent equipment is defined as an article of tangible, nonexpendable, personal property having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit (federal definition).

**Table 11: FEDERAL REQUEST**

Item(s)	Rate	Cost
None		\$0
	<b>TOTAL</b>	<b>\$0</b>

**NARRATIVE JUSTIFICATION:** Enter a description of the equipment and how its purchase will support the purpose and goals of this proposal.

**Table 12: NON-FEDERAL MATCH**

Item(s)	Rate	Cost
None		\$0
	<b>TOTAL</b>	<b>\$0</b>

**NARRATIVE JUSTIFICATION:** Enter a description of the equipment and how its purchase will support the purpose and goals of this proposal.

**SOURCE OF MATCH FUNDS:** State source of match funds.

**FEDERAL REQUEST** – (enter in Section B column 1 line 6e of form SF-424A): **\$0**

**NON-FEDERAL MATCH** – (enter in Section B column 2 line 6e of form SF-424A): **\$0**

E. Supplies: Materials costing less than \$5,000 per unit and often having one-time use.

**Table 13: FEDERAL REQUEST**

Item(s)	Rate	Cost
General office supplies	\$50/mo. x 12 mo.	\$600
Postage	\$37/mo. x 8 mo.	\$296
Coalition promotional items	200 items @ \$1.39 each	\$278
Laptop computer	\$600	\$600
Printer	\$300	\$300
Projector	\$700	\$700
Copies	8000 copies x \$0.5/copy	\$800
Laptop Computer update	\$50	\$50
	<b>TOTAL</b>	<b>\$3,674</b>

**JUSTIFICATION:** Describe the need and include an adequate justification of how each cost was estimated.

**Table 14: NON – FEDERAL MATCH**

Item(s)	Rate	Cost
General Office Supplies	\$50/mo. X 12 mo.	\$600
Computer	\$500	\$500
Postage	\$37/mo. x 4 mo.	\$148
Computer update (if needed)	\$50	\$50
	<b>TOTAL</b>	<b>\$1,348</b>

**NARRATIVE JUSTIFICATION:** Enter a description of the supplies match provided and how their use will support the purpose and goals of this proposal. Describe how the matching funds will enhance the federal budget request. Please note that items such as computers, desks, and projection equipment may be counted as match only once throughout the life of the project.

**SOURCE OF MATCH:** State source of match funds.

**FEDERAL REQUEST** (enter in Section B column 1 line 6e of form SF-424A): **\$3,674**

**NON-FEDERAL MATCH** (enter in Section B column 2 line 6e of form SF-424A): **\$1,348**

**F. Contract:** A contractual arrangement cost to carry out a portion of the programmatic effort by a third-party contractor or for the acquisition of goods or services under the grant. Such arrangements may be in the form of consortium agreements or contracts. If there is more than one contractor, each **must** be budgeted separately. A consultant is a non-employee retained to provide advice and expertise in a specific program area for a fee. The Grantee **must** establish written procurement policies and procedures that are consistently applied. All procurement transactions are required to be conducted in a manner to provide to the maximum extent practical, open and free competition. The Grantee will be required to be alert to organizational conflicts of interest as well as noncompetitive practices among contractors that may restrict or eliminate competition or otherwise restrain trade.

**COSTS FOR CONTRACTS MUST BE BROKEN DOWN IN DETAIL AND A NARRATIVE JUSTIFICATION PROVIDED.**

**Table 15: FEDERAL REQUEST**

Name	Service	Rate	Other	Cost
To be selected	Environmental Strategy Consultation	\$150/day x 35 days = \$5,250	Travel 380 miles @ \$0.50/mile = \$190	\$5,440
To be selected	Board and Committee Leadership Consultation	\$300/trainer x 2 trainers x 5 days = \$6,000	\$50/hour for individual TA x 15 hours = \$1,500	\$7,500



<b>Name</b>	<b>Service</b>	<b>Rate</b>	<b>Other</b>	<b>Cost</b>
To be selected	Evaluation Contractor	\$200/hour x 50 hours to include collection of core measures, creation of evaluation report, coalition evaluation support (e.g., member survey), and activity evaluation support (e.g., pre/post survey development)		\$5,000
To be selected	Substance Abuse Training for Coalition Members	Trainers: \$300/day x 4 days = \$1,200	Materials: approx. \$5/person x 25 people = \$125  Room Rental = \$75  Travel for Trainers: Flight \$300/person x 2 people = \$600  Per Diem: \$46/day x 4 days x 2 people = \$368	\$2,368
Local Police Department	Alcohol Compliance Checks	6 officers @ \$50/hour x 6 checks @ \$300/check		\$1,800
To be selected	Responsible Server 3-Day Training	Trainer: \$500/day		\$1,500
			<b>TOTAL</b>	<b>\$28,608</b>

**JUSTIFICATION:** Explain the need for each agreement and how it will support the purpose and goals of this proposal.

**Table16: NON – FEDERAL MATCH**

<b>Name</b>	<b>Service</b>	<b>Rate</b>	<b>Other</b>	<b>Cost</b>
Coalition members	Participation in coalition activities outlined in Action Plan	18 members @ \$17.50/hr. x 5 hr./mo. (average) x 12 mo.		\$37,800
Local School District	Student Assistance Program – CIA demonstrates breakout of services			\$15,400
Local Police Department	Alcohol Compliance Checks	8 officers @ \$50/hour x 6 checks	1 hour each	\$2,400
Youth members	Alcohol Compliance Checks	8 youth @ \$50/youth x 6 checks = \$2400  16 parent chaperones x 6 checks x \$25/check = \$2,400		\$4,800
Media sponsorship	Local cable station agrees to run coalition promotion. PSA an average of 5 times/week for 24 weeks	5 PSAs/week \$50/PSA x 24 weeks		\$6,000
Advertising	Billboards	\$600 x 12 = \$7,200		\$7,200
			<b>TOTAL</b>	<b>\$73,600</b>

**NARRATIVE JUSTIFICATION:** Explain the need for each match contract agreement and how it will support the purpose and goals of this proposal. Describe how the matching funds will enhance the federal budget request.

**SOURCE OF MATCH FUNDS:** State source of match funds.

**FEDERAL REQUEST** (enter in Section B column 1 line 6f of form SF-424A): **\$28,608**

**NON-FEDERAL MATCH** (enter in Section B column 2 line 6f of form SF-424A):**\$73,600**

G. Construction: **NOT ALLOWED** – Leave Section B columns 1& 2 line 6g on SF-424A blank: Section B columns 1 and 2 line 6g.

H. Other: Expenses not covered in any of the previous budget categories. If anyone related to the project owns the building which is less-than-arm’s length<sup>1</sup> arrangement, provide cost of ownership/use allowance calculations. Additionally, the lease is required and **must** be submitted for all projects allocating rent costs.

**Table 17: FEDERAL REQUEST**

<b>Item</b>	<b>Rate</b>	<b>Cost</b>
Rent*	\$550/mo x 12 mo.	\$6,600
Telephone (land line)	\$50/mo. x 12 mo.	\$1,200
Student Surveys	\$1/survey x 4884	\$4,884
Brochures	\$0.89/brochure x 1500 brochures	\$1,335
Meth literature for merchants	Window Clings: 1,500 clings x \$2 each = \$3,000 Handouts: 3,000 copies x \$0.50 each = \$1,500	\$4,500
	<b>TOTAL</b>	<b>\$18,519</b>

**NARRATIVE JUSTIFICATION:** Break down costs into cost/unit (e.g. cost/square foot). Explain the use of each item requested.

**\*If rent is requested (direct or indirect), provide the name of the owner(s) of the space/facility. If anyone related to the project owns the building which is less than an arm’s length arrangement, provide cost of ownership/use allowance calculations. Additionally, the lease and floor plan (including common areas) is required for all projects allocating rent costs.**

**Table 18: NON – FEDERAL MATCH**

<b>Item</b>	<b>Rate</b>	<b>Cost</b>
Space rental	Varies between \$75/event to over \$300/event	\$8,300
Mentoring Program	12 mentors x 5 hrs./mo. x \$17.50/hr. x 12 mo. CIA demonstrates breakout of services	\$25,200
Internet service	\$26/mo. x 12 mo.	\$312

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<sup>1</sup> “less-than-arms-length” lease is one under which one party to the lease agreement is able to control or substantially influence the actions of the other. Such leases include, but are not limited to those between a division of a non-profit organization, non-profit organization and a director, trustee, officer, or key employee of the non-profit organization or his immediate family, either directly or through corporations, trusts, or similar arrangements in which they hold a controlling interest)

<b>Item</b>	<b>Rate</b>	<b>Cost</b>
Student surveys	\$1/survey x 1946 surveys	\$1,946
Printing	\$300/run x 6 runs	\$1,800
Transition program for youth & parents	1 person x \$25/hr. x 3 hrs = \$75 50 parent packets x \$3.50/packet = 350	\$425
Health Fair	Coordination and administration CIA demonstrates breakout of services	\$1,500
Physician/Health Provider diagnostic tools and training	Coordination and administration CIA demonstrates breakout of services	\$1,700
Drug-Free Workplace Initiative	Coordination and administration CIA demonstrates breakout of services	\$3,000
Underage Drinking Initiative	Coordination and administration CIA demonstrates breakout of services	\$2,700
	<b>TOTAL</b>	<b>\$46,883</b>

**NARRATIVE JUSTIFICATION:** Explain the need for each match item and how it will support the purpose and goals of this proposal. Break down costs into cost/unit (e.g., cost/square foot) and explain the use of each item requested. Describe how the matching funds will enhance the federal budget request.

**SOURCE OF MATCH FUNDS:** State source of match funds.

**FEDERAL REQUEST** (enter in Section B column 1 line 6h of form SF-424A): **\$18,519**

**NON-FEDERAL MATCH** (enter in Section B column 2 line 6h of form SF-424A): **\$46,883**

Indirect Cost Rate: Indirect costs can be claimed if your organization has a negotiated indirect cost rate agreement. It is applied only to direct costs to the agency as allowed in the agreement. For information on applying for the indirect rate go to: <https://rates.psc.gov/fms/dca/map1.html>

**FEDERAL REQUEST** (enter in Section B column 1 line 6j of form SF-424A): **\$4,526**

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**TOTAL DIRECT CHARGES:**

**FEDERAL REQUEST** – (enter in Section B column 1 line 6i of form SF-424A): **\$120,474**

**NON – FEDERAL MATCH** – (enter in Section B column 2 line 6i of form SF-424A):  
**\$125,000**

**INDIRECT CHARGES:**

**FEDERAL REQUEST** – (enter in Section B column 1 line 6j of form SF-424A): **\$4,526**

**TOTAL:** (sum of 6i and 6j)

**FEDERAL REQUEST** – (enter in Section B column 1 line 6k of form SF-424A) **\$125,000**

**NON – FEDERAL MATCH** - (enter in Section B column 2 line 6k of form SF-424A):  
**\$125,000**

=====

**Provide the total proposed project period and federal funding as follows:**

**Proposed Project Period**

a. Start Date:	<b>09/30/2014</b>	b. End Date:	<b>09/29/2019</b>
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**Table 19: BUDGET SUMMARY**

Category	Federal Request	Non – Federal Request	Total
Personnel	\$52,765	\$1,338	\$54,53
Fringe	\$5,896	\$275	\$11,171
Travel	\$6,012	\$1,556	\$7,568
Equipment	\$0	\$0	\$0
Supplies	\$3,674	\$1,348	\$5,022
Contractual	\$28,608	\$73,600	\$102,208
Other	\$18,519	\$46,883	\$65,402
<b>Total Direct Costs</b>	<b>\$120,474</b>	<b>\$125,000</b>	<b>\$245,474</b>
<b>Indirect Costs</b>	<b>\$4,526</b>	<b>\$0</b>	<b>\$4,526</b>
<b>Total Project Costs</b>	<b>\$125,000</b>	<b>\$125,000</b>	<b>\$250,000</b>

The federal dollars requested for all object class categories for the first 12-month period are entered on Form 424A, Section B, Column 1, line 6a-6i.

**Table 20: FUTURE YEARS BUDGET SUMMARY**

Projected Future Years	Federal Request	Non-Federal Match
Year 2 or 7 (select one)		
Year 3 or 8 (select one)		
Year 4 or 9 (select one)		

<b>Projected Future Years</b>	<b>Federal Request</b>	<b>Non-Federal Match</b>
Year 5 or 10 (select one)		
<b>TOTAL (2-5 or 7-10)</b>		

The federal dollars requested for all object class categories for the first 12-month period are entered on Form 424A, Section B, Column B, line 6a-6i.

**Table 21: FUTURE YEARS AND PROJECTED TOTAL\***

<b>Category</b>	<b>2nd Project Year Federal</b>	<b>2nd Project Year Match</b>	<b>3rd Project Year Federal</b>	<b>3rd Project Year Match</b>	<b>4th Project Year Federal</b>	<b>4th Project Year Match</b>	<b>5th Project Year Federal</b>	<b>5th Project Year Match</b>
<b>Personnel</b>								
Program Director	\$6,489	\$0	\$6,489	\$0	\$6,489	\$0	\$6,489	\$0
Project Coordinator	\$46,276	\$0	\$46,276	\$0	\$46,276	\$0	\$46,276	\$0
Clerical Support	\$0	\$1,338	\$0	\$1,338	\$0	\$1,338	\$0	\$1,338
<b>Fringe Benefits</b>	\$10,896	\$275	\$10,896	\$275	\$10,896	\$275	\$10,896	\$275
<b>Travel</b>	\$5,000	\$2,000	\$5,000	\$2,250	\$4,000	\$2,500	\$4,000	\$2,500
<b>Equipment</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Supplies</b>	\$4,500	\$2,000	\$4,500	\$2,000	\$4,000	\$2,000	\$4,000	\$2,000
<b>Contract</b>								
Evaluation	\$4,500	\$0	\$4,500	\$0	\$4,500	\$0	\$4,500	\$0
Targeted Media	\$15,000	\$20,000	\$15,000	\$30,000	\$15,000	\$30,000	\$10,000	\$35,000
Campaigns Training	\$4,000	\$0	\$3,000	\$0	\$2,500	\$0	\$2,500	\$0
Compliance Checks	\$1,000	\$12,000	\$1,500	\$14,000	\$1,500	\$14,000	\$1,500	\$14,000

Category	2nd Project Year Federal	2nd Project Year Match	3rd Project Year Federal	3rd Project Year Match	4th Project Year Federal	4th Project Year Match	5th Project Year Federal	5th Project Year Match
Coalition Members	\$0	\$35,000	\$0	\$40,000	\$0	\$40,000	\$0	\$40,000
<b>Other</b>	\$24,497	\$52,387	\$24,997	\$35,137	\$26,997	\$34,887	\$31,997	\$29,887
<b>Total Direct Costs</b>	<b>\$122,158</b>	<b>\$125,000</b>	<b>\$122,158</b>	<b>\$125,000</b>	<b>\$122,158</b>	<b>\$125,000</b>	<b>\$122,158</b>	<b>\$125,000</b>
<b>Total Indirect Costs</b>	\$2,842	\$0	\$2,842	\$0	\$2,842	\$0	\$2,842	\$0
<b>Total Costs</b>	<b>\$125,000</b>	<b>\$125,000</b>	<b>\$125,000</b>	<b>\$125,000</b>	<b>\$125,000</b>	<b>\$125,000</b>	<b>\$125,000</b>	<b>\$125,000</b>

**TOTAL PROJECT COSTS: Sum of Total Direct Costs and Indirect Costs**

**FEDERAL REQUEST** (enter in Section B column 1 line 6k of form SF-424A) **\$625,000**

**\*FOR REQUESTED FUTURE YEARS:**

1. Please justify and explain any changes to the budget that differs from the reflected amounts reported in the 01 Year Budget Summary.
2. If a cost of living adjustment (COLA) is included in future years, provide your organization's personnel policy and procedures that state all employees within the organization will receive a COLA.

**NOTE:** The total federal dollars (direct + indirect costs) requested for the second through the fifth 12-month budget periods are entered on SF-424A, Section E: Column (b) = Year 2; Column (c) = Year 3; Column (d) = Year 4; Column (e) = Year 5. The amounts entered onto SF-424A, Section E of the SF-424A is used to determine the maximum federal funds a grantee may request in each of the project years. **Failure to complete this chart will mean that a funded application cannot receive funding in the remaining years of the 5-year funding cycle.**

**If a coalition is applying for a second 5-year funding cycle, see Table 2 of this RFA for a breakdown of the required matching funds for each year.**

## Appendix B – Checklist for Formatting Requirements and Screen-Out Criteria for SAMHSA Grant Applications

SAMHSA requires electronic submission for grant applications through Grants.gov.

Registration in the System for Award Management (SAM) is **mandatory for any applicant** for the DFC Support Program. Failure to register with SAM will lead to an application being deemed ineligible and will not proceed to peer review. It takes up to 72 hours for a SAM registration to be processed. Do **not** wait until the day the application is being submitted to register for SAM, as there will not be enough time for the registration to process and your application will not make the deadline.

SAMHSA's goal is to review all applications submitted for grant funding. However, this goal **must** be balanced against SAMHSA's obligation to ensure equitable treatment of applications. For this reason, SAMHSA has established certain formatting requirements for its applications. **If you do not adhere to these requirements, your application will be screened out and will not be considered for funding.**

You **must** be registered in SAM prior to submitting your application. The DUNS number used on your application **must** be registered and active in SAM prior to submitting your application. **If SAM is not active prior to submission, the application will be screened out and will not be reviewed.**

- Applications **must** be received by the application due date and time, as detailed in on the cover page of this RFA.
- Information provided **must** be sufficient for review.
- Text **must** be legible. Pages **must** be typed in black ink, single-spaced, using a font of Times New Roman 12, with all margins (left, right, top, bottom) at least one inch each. For applications submitted via hard copy, tables may be included using a font of Times New Roman 10 and may have a landscape orientation, if desired. The **25-page** limit for the Project Narrative cannot be exceeded.

To facilitate review of your application, follow these additional guidelines. Failure to adhere to the following guidelines will not, in itself, result in your application being screened out. However, the information provided in your application **must** be sufficient for review. Following these guidelines will help ensure your application is complete, and will assist in the review of your application.

- The required application components should be submitted in the order described in Section [IV-1.1](#) of this RFA.



- Pages should be typed single-spaced in black ink with one column per page.
- Pages should be numbered consecutively from beginning to end, starting with the Table of Contents as page 1, so that information can be located easily during review of the application (hand write page numbers if necessary). Do not number the four pages of the SF-424 and the two pages of the SF-424A placed before the Table of Contents. Attachments should be labeled and separated from the Project Narrative and Budget Narrative, and the pages should be numbered to continue the sequence.

## Appendix C – Guidance for Electronic Submission of Applications

**SAMHSA requires electronic submission for grant applications through Grants.gov.** Grants.gov will reject applications submitted after 11:59 PM Eastern Standard Time on the application due date.

The purpose of this Appendix is to provide critical guidance to help applicants successfully navigate the electronic submission process. In rare cases where submission issues arise, options exist for assisting every single applicant with the electronic submission process. The information that follows provides:

- actions that should be taken **before** the electronic submission process is initiated.
- steps that should be taken to submit an application electronically.
- information and contacts for resolving issues if they arise.

### I. Preparing to Submit an Application

To avoid any submission issues please allow at least two weeks (10 business days) for completion of registration processes, prior to submitting your application. The electronic submission process through Grants.gov requires completion of three separate registration processes before an application can be submitted. It is recommended that you check to ensure these registration processes are completed or in process as soon as you download the application. The processes are:

#### A. DUNS Number Registration

**The DUNS number you use on your application must be registered and active in the System for Award Management (SAM).**

#### B. SAM Registration

The SAM is a federal government owned and operated free website that replaces capabilities of the former Central Contractor Registry (CCR) system, as well as EPLS. Future phases of SAM will add the capabilities of other systems used in federal awards processes.

**SAM information must be updated at least every 12 months to remain active (for both grantees and sub-recipients).** Once you update your record in SAM, it will take 48 to 72 hours to complete the validation processes. **Grants.gov will reject electronic submissions from applicants with expired registrations. To create a user account, Register/Update entity and/or Search Records from CCR, go to <https://www.sam.gov>.**

*You will find a Quick Start Guide for Entities Interested in Being Eligible for Grants through SAM at [https://www.sam.gov/sam/transcript/Quick\\_Guide\\_for\\_Grants\\_Registrations.pdf](https://www.sam.gov/sam/transcript/Quick_Guide_for_Grants_Registrations.pdf).*

### C. Grants.gov Registration (get username and password):

Be sure the person submitting your application is properly registered with Grants.gov as the Authorized Organization Representative (AOR) for the specific DUNS number cited on the first page of the SF-424. See the Organization Registration User Guide for details at the following Grants.gov link: <http://www.grants.gov/web/grants/register.html>

You can find additional information on the registration process at <http://www.Grants.gov/documents/19/18243/OrganizationRegChecklist.pdf>. The Organization Registration Checklist available at this site provides registration guidance for a company, institution, state, local or tribal government, or other type of organization submitting for the first time through Grants.gov.

## II. Electronic Submission

### A. Guidance

To submit your application electronically, search <http://www.Grants.gov> for the downloadable application package by the funding announcement number (called the opportunity number) or by the Catalogue of Federal Domestic Assistance (CFDA) number. The funding announcement number and CFDA number are provided on the cover page of this funding announcement.

You must follow the instructions in the User Guide available at the <http://www.Grants.gov> apply site, on the Help page.

Please allow sufficient time to enter your application into Grants.gov. When you submit your application, you will receive a notice that your application is being processed and that you will receive two e-mails from Grants.gov within 24-48 hours. One e-mail will confirm receipt of the application in Grants.gov, and the other will indicate that the application was either successfully validated by the system (with a tracking number) or rejected due to errors. It will also provide instructions that if you do not receive a receipt confirmation **and** a validation confirmation or a rejection e-mail within 48 hours, you must contact Grants.gov directly. It is important that you retain this tracking number. **Receipt of the tracking number is the only indication that Grants.gov has successfully received and validated your application.**

Please note that it is incumbent on the applicant to monitor your application to ensure that it is successfully received and validated by Grants.gov. **If your application is not**

**successfully validated by Grants.gov, it will not be forwarded to SAMHSA as the receiving institution.**

SAMHSA highly recommends that you submit your application 10 business days before the submission deadline. Many submission issues can be fixed within that time and you can attempt to re-submit. However, if you have not completed your Grants.gov, SAM, and DUNS registration at least 2 weeks prior to the submission deadline, it is highly unlikely that these issues will be resolved in time to successfully submit an electronic application.

## **B. How to Submit an Electronic Application**

1. **Format:** It is strongly recommended that you prepare your **Project Narrative and other attached documents in Adobe PDF format**. If you do not have access to Adobe software, you may submit in Microsoft Office products (e.g., Microsoft Word, Microsoft Excel, etc.). Directions for creating PDF files can be found on the Grants.gov website. Use of file formats other than Adobe PDF or Microsoft Office may result in your file being unreadable by SAMHSA staff.
2. **Application Package:** Before you begin, download the Grant Application Package from Grants.gov. Once you are on the Grants.gov website (<http://www.Grants.gov>), locate the Applicants Tab at the top of the screen and select the Apply for Grants option.
  - a) Under STEP 1, click on the red button labeled “Download a Grant Application Package.”
  - b) Enter either the Funding Opportunity Number (SAMHSA’s Funding Announcement #) or the CFDA Number exactly as they appear on the cover page of this RFA.
  - c) Click the Download Package button.
  - d) In the Instructions column, click the Download link and save the application on your hard drive. The application packet can be completed off line.
3. **Submitting your Grant Application:** In order to upload your grant application to Grants.gov, it must be divided into four separate files. The four files are: Project Narrative and Community Overview, Budget Narrative, DFC attachments 1 – 7, and DFC attachments 8 – 14. **Please note that SAMHSA will not accept more than four files.**
  - a) **File One - Project Narrative and Community Overview:** To upload the files go to page one of the Grant Application Packet. On page one, look under the mandatory heading, click on project narrative attachment form, click on add mandatory project narrative file, upload file and click save.

- b) File Two - Budget Narrative: To upload the file, go to page one of the Grant Application Packet. On page one, look under the mandatory heading, click on budget narrative attachment form, click on add mandatory budget narrative, upload file and click save.
- c) File Three – DFC Attachments 1 – 7: To upload the file, go to page one of the Grant Application Packet. On page one, look under the optional heading, click the box next to other attachment form; an X will appear, then click on other attachment form, click on add mandatory other attachment, upload file and click save.
- d) File Four – DFC Attachments 8 – 14: To upload the file, go to page one of the Grant Application Packet. On page one look under the optional heading, click the box next to other attachment form; an X will appear, then click on other attachment form, click on add optional other attachment, upload file and click save.

**NOTE:** If you have documentation that does not pertain to any of the 4 listed files, include that documentation in the fourth file. Although you can upload Word files you will need to scan signed documents (attachments 1 – 14) into two PDF files before uploading.

#### **4. Other Grants.gov Requirements**

Applicants are limited to using the following characters in all attachment file names:

- A-Z
- a-z
- 0-9
- Underscore ( \_ )
- Hyphen ( - )
- Space
- Period.

If your application uses any other characters when naming your attachment files, your application will be rejected by Grants.gov. **Do not use special characters in file names, such as parenthesis ( ), #, ©, etc.**

Scanned images must be scanned at 150-200 dpi/ppi resolution and saved as a jpeg or pdf file. Using a higher resolution setting or different file type could result in rejection of your application.

With the exception of the standard forms (SF 424) in the application package, all pages in your application should be numbered consecutively. **Documents containing scanned images must also contain page numbers to continue the sequence.**

### III. **Electronic Submission Assistance and Contacts**

There are two options for receiving assistance:

#### **Option 1: Grants.gov**

- By e-mail: [support@Grants.gov](mailto:support@Grants.gov)
- By phone: 1-800-518-4726 (1-800-518-GRANTS). The Grants.gov Contact Center is available 24 hours a day, 7 days a week, excluding federal holidays.

**Make sure you get a case/ticket/reference number that documents the issues/problems with Grants.gov.**

#### **Option 2: SAMHSA**

**If the issue is not resolved and you continue to experience problems, contact SAMHSA at [dfcnew2014@samhsa.gov](mailto:dfcnew2014@samhsa.gov) or phone at 240-276-1270 for assistance.** To ensure timely submission of your application please contact SAMHSA at least 5 business days prior to the submission deadline. Please be prepared to explain the issues preventing you from submitting your application electronically through Grants.gov.

### IV. **Waiver Request Process**

Some applicants living in remote and rural areas may be unable to submit electronically through the Grants.gov portal because their physical location does not have adequate access to the Internet. Inadequate Internet access is defined as persistent and unavoidable access problems/issues that would make compliance with the electronic submission requirement a hardship.

In these cases, applicants may request a waiver of the electronic submission requirement. The process for applying for a waiver is described below. Questions on applying for a waiver may be directed to SAMHSA's Division of Grant Review, 240-276-1199.

**All applicants must register in the System for Award Management (SAM) and Grants.gov, even those who intend to request a waiver.** If you do not have an active SAM registration prior to submitting your application, it will be screened out and returned to you without review. (See directions for registering in SAM and on Grants.gov above.)

A written waiver request must be received by SAMHSA at least 15 calendar days in advance of the application due date stated on the cover page of this RFA. The request must be either e-mailed to [DGR.Waivers@samhsa.hhs.gov](mailto:DGR.Waivers@samhsa.hhs.gov), or mailed to:

Diane Abbate, Director of Grant Review  
Office of Financial Resources  
Substance Abuse and Mental Health Services Administration

Room 3-1044  
1 Choke Cherry Road  
Rockville, MD 20857

**Applicants are encouraged to request a waiver by e-mail, when possible.** When requesting a waiver, the following information must be included:

- SAMHSA RFA title and announcement number;
- Name, address, and telephone number of the applicant organization as they will appear in the application;
- Applicant organization's DUNS number;
- Authorized Organization Representative (AOR) for the named applicant;
- Name, telephone number, and e-mail of the applicant organization's Contact Person for the waiver; and
- Details of why the organization is unable to submit electronically through the Grants.gov portal, explaining why their physical location does not have adequate access to the Internet.

The Office of Grant Review will either e-mail (if the waiver request was received by e-mail) or express mail/deliver (if the waiver request was received by mail) the waiver decision to the Contact Person no later than seven calendar days prior to the application due date. If the waiver is approved, a paper application must be submitted. SAMHSA will not accept any applications that are sent by e-mail or facsimile or hand carried. If the waiver is disapproved, the applicant organization must be prepared to submit through Grants.gov or forfeit the opportunity to apply. The written approval must be included as the cover page of the paper application and the application must be received by the due date.

A waiver approval is valid for the remainder of the fiscal year and may be used for other SAMHSA discretionary grant applications during that fiscal year. When submitting a subsequent paper application within the same fiscal year, this waiver approval must be included as the cover page of each paper application. The organization and DUNS number named in the waiver and any subsequent application must be identical.

A paper application will not be accepted without the waiver approval and will be returned to the applicant if it is not included. Paper applications received after the due date will not be accepted.

## Appendix D – Coalition Involvement Agreements

As **Attachment 1**, applicants **must** include one Coalition Involvement Agreement (CIA) for each coalition sector representative. The following page provides a sample CIA. Applicants can tailor the agreement as needed. This document allows an applicant to indicate compliance **with the required 12 sectors**. By signing a CIA, an individual is affirming that he/she represents a specific sector within the coalition.

### General Information:

- CIAs **must** not be more than 12 months old at the time the application is submitted.
- CIAs **must** be hand signed and dated. Do **not** use typed/electronic signatures. CIAs **must** have two signatures: one for the sector member and one for the individual representing the coalition. The same individual **cannot** sign as the sector member and as the sector representative.

### Instructions for Table 23: CIA Information Table

Insert Table 23 at the top of each CIA. Remove the italicized language and enter the correct information. Below are the three component of the CIA Information Table:

- **Sector:** There must be one CIA for each sector member listed. Do not provide more than 12 CIAs. Refer to Table 22 for Sector Descriptions.

**NOTE:** For the youth sector, the member’s age must be listed.

- **Member Name:** Choose coalition member that best fits each sector. An individual must not represent more than one of the 12 sectors. Do not provide more than one name per sector. **Paid staff (current or proposed) nor the person signing the CIA can be a sector member.**
- **Organization Name:** Identify organization the member represents and the position held in the organization (e.g., Youth sector: Johnson High School, student body president). Provide sufficient information that indicates an individual’s fit within a sector. For example, for “State, Local or Tribal Government Agency with Expertise in the Field of Substance Abuse,” it may not be clear by listing the name of the organization that it fits this sector. State type of funding the organization receives that makes it fit this sector.

**Table 22: Sector Descriptions**

Sector	Sector Description
Youth	An individual 18 years of age or younger ( <b>must</b> provide age of youth)



Parent	An individual legally responsible for a child, grandchild or foster child
Business	A representative of a business-related organization
Media	A representative of a communication outlet that provides information to the community
School	A representative of the school system with influence in school policies and procedures
Youth-Serving Organization	A representative of an organization that provides services to youth
Law Enforcement	A representative of a law enforcement agency. The representative <b>must</b> be a sworn law enforcement officer.
Religious/Fraternal Organization	A representative of a faith-based organization. The representative's role <b>must</b> be of a leader, not a member.
Civic/Volunteer Group	A representative of an organization that provides civic or volunteer activities to the community (not a coalition member)
Healthcare Professional	An individual legally allowed to provide physical, mental, or behavioral healthcare services
State, Local or Tribal Governmental Agency with Expertise in the Field of Substance Abuse	A representative of a government-funded agency with a focus on substance abuse
Other Organization Involved in Reducing Substance Abuse	A community organization that addresses substance abuse

## Sample Coalition Involvement Agreement (CIA)

**Table 23: CIA Information Table**

Sector	Member Name	Organization Name
<i>Insert one of the 12 sectors. NOTE: For Youth sector, age must be listed.</i>	<i>Insert Individual's Name listed on the Sector Member Table, Attachment 1</i>	<i>Insert Organization Name</i>

This agreement between *[Coalition Name]* and the *[Sector] Representative, [Sector Representative's Name]* shall be from *[Start Date]* until terminated by a mutual accord. This agreement will be reevaluated on a yearly basis.

*[Coalition Name]* will be responsible for:

1. Creating and following by-laws and policies.
2. Formulating coalition goals and objectives.
3. Overseeing operations of activities, programs, and paid staff.
4. Increasing new membership of the coalition.
5. Creating and following a strategic Action Plan.
6. Creating a credible and relevant sustainability plan which includes volunteer membership and resources, both financial and material.
7. Respecting the rights of *[Coalition Name]* members to hold their own opinions and beliefs.

The *[Sector] Representative, [Sector Representative's Name]*, will be responsible for:

1. Being a community leader amongst the represented sector.
2. Ensuring clear communication between the sector represented and the coalition.
3. Acting as a positive role model for youth, families, and peers.
4. Supporting the coalition's mission.
5. Attending coalition meetings which are held on a *[Frequency]* basis.
6. Participating in at least one subcommittee.
7. Attending coalition sponsored trainings, town hall meetings, and community events.
8. Contributing to the strategic planning process.
9. Participating in sustaining the coalition's capacity, involvement, and goals.
10. Participating in the DFC Workstation, a communication vehicle used by DFC to provide timely information to coalitions.

11. Preventing youth substance use through environmental strategies.

12. Using his/her activities as match, if applicable.

\_\_\_\_\_  
Coalition Representative's Name

\_\_\_\_\_  
Sector Representative's Name

\_\_\_\_\_  
Coalition Representative's Signature

\_\_\_\_\_  
Sector Representative's Signature

\_\_\_\_\_/\_\_\_\_/\_\_\_\_  
Title Date

\_\_\_\_\_/\_\_\_\_/\_\_\_\_  
Title Date

## Appendix E – Assurance of Legal Eligibility

As **Attachment 4**, attach either [Appendix E](#) or F. Use Appendix E, if the coalition is applying for this grant on its own behalf. Use Appendix F, if the coalition is partnering with an outside agency as its grantee/legal applicant.

A coalition applying on its own behalf **must** answer the following questions and sign below.

1. Is the coalition serving as its own legal grantee?

Yes [ ]      No [ ]

2. Is the coalition's name listed in Item #8 on the SF-424 (face page) of this application?

Yes [ ]      No [ ]

If the answer to **any** of these questions is “no”, then the coalition **must** enter into a relationship with an entity eligible to receive federal funds and submit a **Memorandum of Understanding** (see Appendix F) and include as **Attachment 4**.

If the answer to all of these questions is “yes”, the applicant coalition **must** sign and date the Statement of Legal Eligibility below and **include as Attachment 4**.

### Statement of Legal Eligibility

I, *[Coalition Representative]* hereby certify that *[Coalition Name]* is legally eligible to receive federal funding.

\_\_\_\_\_  
Coalition Representative's Name

\_\_\_\_\_  
Coalition Representative's Signature

\_\_\_\_\_  
Title

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

## Appendix F – Grantee/Legal Applicant Roles and Relationship with Coalition

As **Attachment 4**, attach either Appendix E or F. Use [Appendix E](#) if the coalition is applying for this grant on its own behalf. Use Appendix F if the coalition is partnering with an outside agency as its grantee/legal applicant. The signatures on the MOU **must** include that of the grantee/legal applicant and the coalition. The date **must** not be older than 12 months at the time of application. A sample MOU is on the following page. Below are considerations when developing a relationship with an outside partnering agency serving as the grantee/legal applicant on behalf of a community coalition:

1. Through the Drug-Free Communities Act of 1997, it is the intent of Congress to fund the work of community coalitions addressing youth substance use. Furthermore, DFC funds are not meant to substantially supplement the budget of a partnering agency. While it is allowable for a reasonable amount of funds to be retained by the partnering agency for administration of the DFC grant, **DFC funds are intended to support the work of a community-based coalition.**
2. It is the intent of the DFC Support Program that a coalition's volunteer leadership **has a management role in all financial decisions related to a DFC grant** applied for on their behalf by a partnering organization.
3. Arrangements for grantee services should be treated as a business transaction. It is suggested that the grantee and coalition seek guidance from an attorney and/or accountant when entering into such an agreement. Both the grantee and coalition should be fully aware of and understand the commitment placed on the grantee through provision of this service.

### Accounting Requirements

Another consideration for the coalition applying for this grant is the administration of accounts receivable and payable. In accordance with OMB Circular A-110, a federal grant recipient **must** be capable of accounting for the expenditure of federal funds. Upon award of grant funds, the grantee is subject to a Financial Capability Review. The review typically includes an examination of financial statements, including those contained in reports issued to stockholders, lending institutions, and SEC filings; cash flow forecasts; loan agreements and evidence showing compliance with these agreements; aging of accounts receivable and payable; and financial history of the grantee and affiliated concerns. Details discussed in this circular should be reviewed by the grantee/legal applicant.

For further assistance on understanding issues regarding the grantee role, responsibilities, or expectations, contact SAMHSA's Division of Grants Management at 240-276-1422.

## Sample MOU between Coalition and Grantee/Legal Applicant

This agreement between *[Grantee/Legal Applicant]* and *[Coalition]* shall be from *[Date]* until terminated by mutual agreement:

### RESPONSIBILITIES OF THE COALITION:

- a. Set policy for and oversee its own programs including goals and objectives in alignment with the DFC Support Program's Terms and Conditions.
- b. Select and direct staff and volunteers, set goals and objectives for contract employees, and negotiate and approve contracts.
- c. Create, approve, and follow its budget in compliance with DFC requirements.
- d. Provide copies of all required documentation to the grantee/legal applicant as requested.
- e. Reimburse grantee/legal applicant for any indirect or direct expenses incurred by the coalition with prior approval of the grantee/legal applicant.
- f. Be solely responsible for liabilities arising out of its program and its interaction with program participants.

### RESPONSIBILITIES OF THE GRANTEE/LEGAL APPLICANT:

- a. Provide the coalition staff with office space.
- b. Compile financial reports on a mutually agreed upon schedule and provide to coalition.
- c. Provide accounting services to prepare and distribute payroll, pay invoices, prepare and submit the appropriate forms for employment, wages and payroll taxes on behalf of the coalition.
- d. Negotiate and/or bid and approve contracts.
- e. Maintain all records pertaining to costs and expenses to reflect costs of labor, materials, equipment, supplies, services, and other costs and expenses when reimbursement is claimed or payment is made.
- f. Obtain Workman's Compensation Insurance and liability coverage for *the coalition's* employees.

*[Grantee/Legal Applicant]* and *[Coalition]* mutually agree to abide by all applicable federal and state anti-discrimination statutes, regulations, policies, and procedures. This agreement shall be subject to all applicable provisions of state and federal law and regulations related to the delivery and funding of social service.

Coalition Representative's Name

Grantee Representative's Name

\_\_\_\_\_  
Coalition Representative's Signature

\_\_\_\_\_  
Grantee Representative's Signature

\_\_\_\_\_/\_\_\_\_/\_\_\_\_  
Title Date

\_\_\_\_\_/\_\_\_\_/\_\_\_\_  
Title Date

## **Appendix G – Assurance of One DFC Grant at a Time**

**As Attachment 6**, the grantee/legal applicant should read the statement below and sign and date this document to assure that it will not hold more than one DFC grant during the FY 2014-2018 funding cycles. **NOTE:** DFC Mentoring and STOP ACT grants are in a separate category and do not apply to this assurance.

### **Applicant Assurance of One DFC at a Time**

I attest that the [Grantee/Legal Applicant] will be in receipt of only one DFC grant during the funding cycle of this grant. .

\_\_\_\_\_  
Authorized Official's Name for the  
Grantee/Legal Applicant (print)

\_\_\_\_\_  
Authorized Official's Signature for  
the Grantee/Legal Applicant

\_\_\_\_\_  
Title

\_\_\_\_\_  
Organization/Agency

\_\_\_\_\_  
Date



## Appendix H – Assurance of 10-Year Funding Limit

As **Attachment 7**, the grantee/legal applicant should read the statement below and sign and date this document to assure that the applicant coalition has not already received **10 years** of DFC funding.

**Under the DFC Act, coalitions may not receive more than 10 years of DFC funding.** This policy does not apply to agencies serving as grantees/legal applicants on behalf of DFC-funded coalitions. This policy does not apply to DFC Mentoring funds. Specific restrictions on DFC coalitions and grantee/legal applicants are outlined below. **All applications will be thoroughly reviewed to ensure compliance with the 10-Year Funding Limit. It is important that all applicants understand that providing false or misleading information is unlawful and subject to criminal penalties, 18 USC1001.**

### Agencies serving as Grantee/Legal Applicant on behalf of a coalition:

1. An organization serving as the grantee/legal applicant on behalf of a coalition may not receive DFC funds on behalf of the same coalition for more than 10 years.  
Example: Grantee/Legal Applicant X has received DFC funds on behalf of Coalition Y for 10 years. Grantee/Legal Applicant X may no longer receive funds on behalf of Coalition Y. Additionally, Coalition Y **must** not apply for DFC funds (directly or through a different grantee agency) in the future.
2. An organization serving as grantee/legal applicant on behalf of a coalition that has already received 10 years of DFC funding may apply for DFC funds on behalf of a new “unique and distinct” coalition.  
Example: Grantee/Legal Applicant X has received DFC funds on behalf of Coalition Y for 10 years. Coalition Z is a new coalition and wants Grantee/Legal Applicant X to apply for DFC funds on its behalf. This is allowable.
3. An organization serving as grantee/legal applicant on behalf of a coalition may receive DFC funds on behalf of any coalition that has not received a full 10 years of funding. Example: Coalition Y previously received four years of DFC funding using Grantee/Legal Applicant X. Coalition Y can ask Grantee/Legal Applicant A to apply for its remaining years of DFC funding (up to 6 years).

### Coalitions:

1. A coalition that is its own grantee/legal applicant may receive up to 10 years of DFC funding. **Under all situations, a coalition may not receive more than 10 years of DFC funding.**

2. A coalition that has received 10 years of DFC funding through an outside agency serving as grantee/legal applicant may not receive DFC funding through a different grantee/legal applicant.
3. A coalition that has received DFC funding through a series of grantees/legal applicants is not eligible to receive more than 10 years of DFC funding.

Example: Coalition X received DFC funding through Grantee Y for six years, and Grantee Z for four years, Coalition X is no longer eligible to receive any DFC funds.

4. A coalition that proposes to serve a community (or any part of a community) that has already been served for 10 years by another DFC-funded coalition **must** demonstrate to the satisfaction of the DFC grant review officials and the final determination of the DFC Administrator that it is “unique and distinct” from the coalition that previously served the same community.

I attest that *[Coalition Name]* is in compliance with the 10-Year Funding Limit Policy. **I also attest that the information provided on this form is true and correct. Providing false or misleading information is unlawful and subject to criminal penalties, 18 USC1001.**

\_\_\_\_\_  
 Authorized Official Name of  
 Grantee/Legal Applicant (Print)

\_\_\_\_\_  
 Authorized Official Name of  
 Applicant Coalition (Print)

\_\_\_\_\_  
 Authorized Official Signature of  
 Grantee/Legal Applicant

\_\_\_\_\_  
 Authorized Official Signature of  
 Applicant Coalition

\_\_\_\_\_  
 Title

\_\_\_\_\_  
 Title

\_\_\_\_\_  
 Organization/Agency

\_\_\_\_\_  
 Organization/Agency

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Date

## **Appendix I – Resumes and Job Descriptions**

**As Attachment 8**, applicants **must** include a resume (no longer than two pages) and a position description (no longer than one page) for the Program Director and Project Coordinator, and each additional key paid or in-kind position. If a person has been selected but not yet hired, include a letter of commitment from that individual along with a resume and position description. If no individual has been identified for a position, a position description is still required, along with an overview of the hiring plan.

### **Resumes**

Existing curricula vitae of project staff members may be used if they are updated and contain all items of information requested below. You may add any information items listed below to complete existing documents. For development of new curricula vitae include items below in the most suitable format:

1. Name of staff member
2. Educational background: school(s), location, dates attended, degrees earned (specify year), major field of study
3. Professional experience
4. Honors received and dates
5. Recent relevant publications
6. Other sources of support [Other support is defined as all funds or resources, whether federal, non-federal, or institutional, available to the Project Director/Program Director (and other key personnel named in the application) in direct support of their activities through grants, cooperative agreements, contracts, fellowships, gifts, prizes, and other means.]

### **Job Description**

1. Title of position
2. Description of duties and responsibilities
3. Qualifications for position
4. Supervisory relationships
5. Skills and knowledge required
6. Personal qualities
7. Amount of travel and any other special conditions or requirements
8. Salary range
9. Hours per day or week

## Appendix J – General Applicant Information

As Attachment 9, complete this table (2 pages) with the requested information.

**Table 24: General Applicant Information**

Information Requested	Response
1. Grantee/Legal Applicant Name (Item 8 on <a href="#">SF-424</a> )	
2. Applicant Coalition Name (Item 15 of SF-424; if same as Grant Applicant Name, skip to question 3)	
3. Coalition Contact Person & Phone Number & Email Address *person charged with day-to-day operations of coalition	
4. Coalition Mailing Address	
5. How long has the coalition been in existence?	
6. Provide month, date, and year coalition was created.	
7. Grantee/Legal Applicant Contact Person & Phone Number & Email Address *person at grantee/legal applicant organization charged with oversight of grant	
8. Grantee/Legal Applicant Mailing Address	
9. List Federal Congressional Districts served by coalition. Go to <a href="http://www.house.gov">http://www.house.gov</a> for more information. (Item 16 on SF-424)	
10. Geographical boundaries served by the coalition (e.g., city, county, streets, etc.)	
11. List all zip codes served by the coalition. Go to: <a href="https://tools.usps.com/go/ZipLookupAction!input.action">https://tools.usps.com/go/ZipLookupAction!input.action</a>	
12. Total population served by the coalition.	
13. Total number of students in grades 6-12 in schools/districts served by coalition.	
14. Coalition <b>must</b> identify service area as “rural” or “urban” (see Appendix P). <b>Applicants must choose one response.</b> If rural, provide county name coalition is serving.	
15. Coalition <b>must</b> identify if the service area is “Economically Disadvantaged” (see Appendix P). Indicate yes or no.	

Information Requested	Response
16. Does the coalition serve a federally recognized tribal area? Indicate yes or no.	
17. Does the coalition have representation that includes at least one representative of the Bureau of Indian Affairs, the Indian Health Service, or a tribal government agency with expertise in the field of substance abuse? Indicate yes or no.	
18. Provide the contact information for the proposed evaluator for the DFC grant (include name, phone number, and e-mail address).	
19. Is the applicant a religious or faith-based organization? Indicate yes or no.	
20. Has the applicant coalition been mentored through DFC's Mentoring grant program? Indicate yes or no. Provide Mentoring grant's award number (SP-xxxxx).	
21. Provide the date you registered the applicant in the System for Award Management (SAM). *Failure to have an active registration will make your application ineligible.	

## Appendix K – Intergovernmental Review (E.O. 12372) Requirements

### States with SPOCs

This grant program is covered under Executive Order (EO) 12372, as implemented through Department of Health and Human Services (DHHS) regulation at 45 CFR Part 100. Under this Order, states may design their own processes for reviewing and commenting on proposed federal assistance under covered programs. Certain jurisdictions have elected to participate in the EO process and have established State Single Points of Contact (SPOCs). A current listing of SPOCs is included in the application package and can be downloaded from the Office of Management and Budget (OMB) website at [http://www.whitehouse.gov/omb/grants\\_spoc](http://www.whitehouse.gov/omb/grants_spoc).

- Check the list to determine whether your state participates in this program. You do not need to do this if you are an American Indian/Alaska Native tribe or tribal organization.
- If your state participates, contact your SPOC as early as possible to alert him/her to the prospective application(s) and to receive any necessary instructions on the state's review process.
- For proposed projects serving more than one state, you are advised to contact the SPOC of each affiliated state.
- The SPOC should send any state review process recommendations to the following address within 60 days of the application deadline. For United States Postal Service: Diane Abbate, Director of Grant Review, Office of Financial Resources, Substance Abuse and Mental Health Services Administration, Room 3-1044, 1 Choke Cherry Road, Rockville, MD 20857. ATTN: SPOC – Funding Announcement No. SP-14-002. Change the zip code to 20850 if you are using another delivery service.

### States without SPOCs

If your state does not have a SPOC and you are a community-based, non-governmental service provider, you **must** submit a Public Health System Impact Statement (PHSIS)<sup>2</sup> to the head(s) of appropriate state and local health agencies in the area(s) to be affected no later than the application deadline. The PHSIS is intended to keep state and local health officials informed of proposed health services grant applications submitted by community-based, non-governmental

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<sup>2</sup> Approved by OMB under control no. 0920-0428; Public reporting burden for the Public Health System Reporting Requirement is estimated to average 10 minutes per response, including the time for copying the face page of SF-424 and the abstract and preparing the letter for mailing. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0920-0428. Send comments regarding this burden to CDC Clearance Officer, 1600 Clifton Road, MS D-24, Atlanta, GA 30333, ATTN: PRA (0920-0428).

organizations within their jurisdictions. If you are a state or local government or American Indian/Alaska Native tribe or tribal organization, you are not subject to these requirements.

The PHSIS consists of the following information:

- A copy of the face page of the application (SF-424); and
- A summary of the project, no longer than one page in length, that provides: 1) a description of the population to be served; 2) a summary of the services to be provided; and 3) a description of the coordination planned with appropriate state or local health agencies.

For SAMHSA grants, the appropriate state agencies are the Single State Agencies (SSAs) for substance abuse and mental health. A listing of the SSAs for substance abuse can be found on SAMHSA's website at <http://www.samhsa.gov/grants/SSAdirectory.pdf>. A listing of the SSAs for mental health can be found on SAMHSA's website at <http://www.samhsa.gov/grants/SSAdirectory-MH.pdf>. If the proposed project falls within the jurisdiction of more than one state, you should notify all representative SSAs.

If applicable, you **must** include a copy of a letter transmitting the PHSIS to the SSA in **Attachment 10, "Letter to the SSA."** The letter **must** notify the state that, if it wishes to comment on the proposal, its comments should be sent no later than 60 days after the application deadline to the following address. **For United States Postal Service:** Diane Abbate, Director of Grant Review, Office of Financial Resources, Substance Abuse and Mental Health Services Administration, Room 3-1044, 1 Choke Cherry Road, Rockville, MD **20857**. ATTN: SSA – Funding Announcement No. SP-14-002. Change the zip code to **20850** if you are using another delivery service.

In addition:

- Applicants may request that the SSA send them a copy of any state comments.
- The applicant **must** notify the SSA within 30 days of receipt of an award.

## Appendix L – Disclosure of All Prior DFC Funding

**As Attachment 12, indicate the status of the grantee/legal applicant and/or coalition, complete the table below, sign and date the form. Do not include information about STOP Act or DFC Mentoring grants on this form. Indicate the status of the Grantee/Legal Applicant and/or the applicant coalition for this application:**

- Coalition (not grantee) has had no prior funding
- Coalition formerly funded through DFC (not DFC Mentoring Program)
- Grantee/Applicant has had no prior DFC funding
- Grantee/Applicant formerly funded through DFC (not DFC Mentoring Program)

List all of the DFC funding received or expended by either the Grantee/Legal Applicant and/or the coalition. For example, if the applicant previously received DFC funding as a member of a coalition unrelated to the coalition currently applying for funding, that information **must** be entered below. **NOTE:** Add as many rows as needed to include all required information for all prior DFC funding associated with the Grantee / Legal Applicant and Applicant Coalition for this application.

**Table 25: Disclosure of All Prior DFC Funding**

Fiscal Year of Funding	DFC Award Number(s) <i>(for current and all previous years)</i>	Grantee/Legal Applicant Name	Coalition Name	Names of Paid Staff

By signing below, I attest that [*Coalition name*] is applying for Year [*enter year number*] of DFC funding. I also attest that the information provided in the above chart is true and correct. Providing false or misleading information is unlawful and subject to criminal penalties, 18 USC1001.

\_\_\_\_\_  
Authorized Official for  
Grantee/Legal Applicant (Print)

\_\_\_\_\_  
Authorized Official Signature for  
Grantee/Legal Applicant

\_\_\_\_\_  
Title

\_\_\_\_\_  
Organization/Agency

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Official Name for  
Applicant Coalition (Print)

\_\_\_\_\_  
Authorized Official Signature for  
Applicant Coalition

\_\_\_\_\_  
Title

\_\_\_\_\_  
Organization/Agency

\_\_\_\_\_  
Date



## Appendix M – DFC National Cross-Site Evaluation Requirements

As **Attachment 13**, the applicant grantee/legal applicant and/or coalition **must** provide the information in the table below.

The DFC Support Program collects four specific measures (core measures) to determine the effectiveness of the DFC Support Program. The core measures are:

1. Past 30-day use
2. Perception of risk or harm of use
3. Perception of parental disapproval of use
4. Perception of peer disapproval of use

Each of the above core measures **must** be collected every two years, in at least two grades between grades 6<sup>th</sup>-12<sup>th</sup> on four substances (alcohol, tobacco, marijuana, and prescription drugs). Grantees are allowed to collect other data as they see fit to meet their local and coalition evaluation needs.

**NOTE:** It is recommended that data be collected for at least one middle school grade and one high school grade.

Provide the following information to indicate the applicant coalition’s ability to meet the DFC National Cross-Site Evaluation requirements:

**Table 26: DFC National Cross-Site Evaluation Requirements**

Questions	Answer
Name of the survey(s) used to collect data required to obtain the core measures: <ol style="list-style-type: none"> <li>1. Past 30-day use</li> <li>2. Perception of risk or harm of use</li> <li>3. Perception of parental disapproval of use</li> <li>4. Perception of peer disapproval of use</li> </ol>	
How often/when will the survey(s) be administered and collected?	
What, if any, supplemental survey(s) and/or data will be used to meet the DFC National Cross-Site Evaluation requirements?	
When was the data that was used to answer Question 5 of the Project Narrative collected?	

## Appendix N – Sample Congressional Notification

**As Attachment 14, applicants must follow the exact format below and include the completed Congressional Notification.** The Project Description **must not** be more than 35 lines; therefore, the entire document **must** not exceed more than one page. This information will be shared with members of Congress and the media, and may be posted to the DFC website, if the application is funded.

Grant Award SPO# (if applicable)

Coalition Name:

Grantee Name:

Coalition Community:

Grantee Contact Name:

Grantee Contact Mailing Address:

Grantee Contact E-Mail Address:

Grantee Contact Phone/Fax Number:

Coalition Contact Name:

Coalition Contact Mailing Address:

Coalition Contact E-Mail Address:

Coalition Contact Phone:

[State]

Serving Congressional District(s): [\_\_]

Coalition Located in Congressional District: [\_\_]

### Project Description

The [Coalition Name] was awarded a FY 2014 Drug-Free Communities Support Program grant in the amount of \$ [fill in amount requested] by the White House Office of National Drug Control Policy, in cooperation with the Substance Abuse and Mental Health Services Administration. The Coalition serves [Community/Town], [State], a community of [total population]. The goals of the coalition are to establish and strengthen community collaboration in support of local efforts to prevent youth substance use. The coalition will achieve its goals by implementing these strategies [provide a one-sentence description of each strategy that the coalition will implement below]:

## Appendix O – Pre-Submission Verification

Use the checklist below to ensure that the application meets all submission requirements. **Please place an “X” beside each item that has been completed. Include the completed verification as the last page of the application.** **NOTE:** This checklist is not the same as the required Checklist found in the Grant Application Package. You **must** include both checklists.

**Table 27: Pre-Submission Verification**

Items to Complete	“X” if Completed
Did you complete and sign the Application for Federal Assistance (SF-424)?	
Did you complete Sections B, C, and E of the Non-Construction Budget Worksheet (SF-424A)?	
Did you include a Table of Contents and numbered it page 1?	
Did you include a Community Overview after the Table of Contents (page 2)?	
Is your Project Narrative (scored section) no longer than <b>25 pages</b> ?	
Does your Project Narrative address all <b>5 FY 2014</b> questions?	
Did you include the Action Plan (Question 4)?	
Is a one-year Budget Narrative and future years funding table included?	
Did you include a lease agreement and floor plan for proposed cost for Rent, if applicable?	
Did you include an Indirect Cost Rate Agreement for proposed indirect cost, if applicable?	
Did you demonstrate that your coalition will meet the matching fund requirements ( <a href="#">Budget Narrative</a> , SF-424, and SF-424A)?	
Did you meet all Statutory Eligibility Requirements (see <a href="#">Table 1</a> of this RFA)?	
In Attachment 1, did you include one CIA for each of the 12 sector members (see <a href="#">Appendix D</a> ; including Table 23 on each CIA)?	
In Attachment 2, did you provide two sets of meeting minutes that took place between January 1, 2013 and the deadline for this application?	
In Attachment 3, did you include the coalition’s Mission Statement?	
In Attachment 4, did you include an MOU between the coalition and the grantee/legal entity or a statement that the coalition is legally eligible to receive a grant (see <a href="#">Appendix E</a> or <a href="#">F</a> )?	

Items to Complete	“X” if Completed
In Attachment 5, did you include Letter(s) of Mutual Cooperation, with other coalition(s) that are serving a same zip code or partial zip code area as the applicant coalition or a statement that there is no overlap?	
In Attachment 6, did you include the Assurance of One Grant at a Time (see <a href="#">Appendix G</a> )?	
In Attachment 7, did you include Assurance of 10-Year Funding Limit (see <a href="#">Appendix H</a> )?	
In Attachment 8, did you include the required resumes and job descriptions (see <a href="#">Appendix I</a> )?	
In Attachment 9, did you include the completed General Applicant Information Table (see <a href="#">Appendix J</a> )?	
In Attachment 10, did you include a copy of the letter to the SSA (see <a href="#">Appendix K</a> )?	
In Attachment 11, did you include all required forms, certifications, disclosures, and assurances?	
In Attachment 12, did you include the Disclosure of All Prior DFC Funding (see <a href="#">Appendix L</a> )?	
In Attachment 13, did you include the DFC National Cross-Site Evaluation Requirements (see <a href="#">Appendix M</a> )?	
In Attachment 14, did you include the Congressional Notification (see <a href="#">Appendix N</a> )?	
Did you include the Checklist found in the Grant Application Package as the next-to-last page of the application?	
Is this completed Pre-Submission Verification the last page of the application (see <a href="#">Appendix O</a> )?	

## Appendix P – Glossary of Terms

**Activities:** Efforts conducted to achieve identified objectives. Example: Conduct three responsible beverage server trainings with 15 businesses represented at each training.

**Authorized Representative/Official:** The person authorized to sign the grant application as the official representative of the applicant organization that has the fiduciary authority to act on behalf of the applicant and assume the obligations imposed by the federal laws, regulations, requirements, and conditions that apply to grant applications or awards.

**Business Official:** The individual responsible for the financial aspects of the grant (i.e. Authorized Representative/Official, Accountant, Bookkeeper).

**Coalition Involvement Agreement (CIA):** An agreement between the coalition and each of its 12 sector members that establishes the minimum acceptable contribution to be considered an active coalition member. It is not considered a legally binding document for the purposes of this RFA. It is only to allow a coalition to demonstrate compliance with the 12 required sectors.

**Community-Level Change:** Change that occurs within the overall population of the community.

**Congressional District:** An electoral division of a state, entitled to send one member to the US House of Representatives

**Economically Disadvantaged Area:** An area with 20 percent or more children living in households below the poverty line as defined by the U.S. Census Bureau.

**Grantee:** The recipient of grant funds. For the purposes of this RFA, it is either a coalition that is a legally eligible entity (to receive federal funds) or a partnering agency that has agreed to be the legal applicant on behalf of a coalition and serve as the grantee if awarded.

**Objectives:** What is to be accomplished during a specific period of time to move toward achievement of a goal. Objectives should be expressed in specific, measurable terms. Example: By 10/30/16, decrease the percentage of alcohol sales to minors by 10% as measured by the rate of failed compliance checks (currently 25%).

**Rural:** According to the Drug-Free Communities Act of 1997, rural is defined as a county with a population that does not exceed 30,000 individuals.

**Strategy:** The overarching approach of how the coalition will achieve intended results. Example: Increase enforcement of laws prohibiting the sale of alcohol to minors through compliance checks.

**Urban:** The Census Bureau classifies as "urban" all territory, population, and housing units located within an urbanized area (UA) or urban cluster (UC). It delineates UA and UC boundaries to encompass densely settled territory, which consists of: Core Census block groups or blocks that have a population density of at least 1,000 people per square mile and surrounding census blocks that have an overall density of at least 500 people per square mile.