Department of Health and Human Services

Substance Abuse and Mental Health Services Administration

Drug-Free Communities Mentoring Program (Initial Announcement)

Request for Applications (RFA) Number: SP-15-002

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

Key Dates:

Application Deadline	**Applications are due by April 14, 2015**
Intergovernmental Review (E.O. 12372)	**Applicants <u>must</u> 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.**
Public Health System Impact Statement (PHSIS)/Single State Agency Coordination	**Applicants <u>must</u> send the PHSIS to appropriate state and local health agencies by application deadline. Comments from Single State Agency (SSA) are due no later than 60 days after application deadline.**

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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) 2015 Drug-Free Communities Mentoring Program (DFC Mentoring) grants. The purpose of this program is to provide grant funds to existing DFC grantees so they may serve as mentors to newly-formed and/or developing coalitions that have never received a DFC grant.

Funding Opportunity Title:	Drug-Free Communities Mentoring Program
Funding Opportunity Number:	SP-15-002
Due Date for Applications:	April 14, 2015
Anticipated Total Available Funding:	$750,000
Estimated Number of Awards:	Approximately 10
Estimated Award Amount:	Up to $75,000 per year for up to two years
Cost Sharing/Match Required:	In-kind match is required [See Section III-2 of this RFA for cost sharing/match requirements.]
Length of Project Period:	Up to 2 years
Eligible Applicants:	Eligible applicants are currently funded DFC grantees with a coalition that has been in existence for at least five years (**not** to be interpreted as having been a DFC grant for five years); has an active DFC grant at the time of application; and, is in good standing (**not** on high risk). See Section III of this RFA for complete eligibility information.

I. FUNDING OPPORTUNITY DESCRIPTION

1. PURPOSE

The Drug-Free Communities (DFC) Support Program was created by the Drug-Free Communities (DFC) Act of 1997 (Public Law 105-20). DFC Mentoring grants were established as a component of the DFC Support Program when the program was reauthorized in 2001 (Public Law 107-82, 115 Stat. 814). The DFC Mentoring Program was also included in the Office of National Drug Control Policy Reauthorization Act of 2006 (Public Law 109-469).

The primary goal of the DFC Mentoring Program is to assist newly forming coalitions in becoming eligible to apply for DFC funding on their own.

It is the intent of the DFC Mentoring Program that, at the end of the Mentoring grant, each Mentee coalition will meet all of the Statutory Eligibility Requirements of the DFC Support Program and be fully prepared to compete for the DFC grant on their own. Grantees will be expected to achieve this goal by meeting the following objectives:

1. Strengthen Mentee coalition's organizational structure.
2. Increase Mentee coalition's leadership and community readiness to address youth substance use problems in the Mentee community.
3. Assist the Mentee coalition in working through a strategic planning process that will result in a comprehensive Action Plan.

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

The DFC Mentoring Program is a collaborative effort directed by the Office of National Drug Control Policy (ONDCP) in collaboration with the Department of Health and Human Services (HHS), Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Prevention (CSAP). This announcement addresses Healthy People 2020 Substance Abuse Topic Area HP 2020-SA.

2. EXPECTATIONS

For the purposes of this RFA, **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.**

Allowable Activities

Grants awarded through the DFC Mentoring Program are intended to assist newly forming coalitions to meet all of the Statutory Eligibility Requirements of the DFC Support Program and be fully prepared to compete for the DFC grant on their own. **Funding through this grant <u>must</u> support the Mentee coalition in obtaining the training and technical assistance necessary to form a community coalition capable of applying for a DFC grant.** To accomplish this, the Mentor coalition is expected to mobilize a majority of its key sector members to work

collaboratively on the formation of the Mentee coalition. The DFC Mentoring Program seeks to combine staff and volunteer resources from the Mentor coalition with those of the Mentee community to successfully support the development of a functioning Mentee coalition.
The types of activities that are expected and allowable include, but are **not** limited to: education of Mentee community members; training and technical assistance for the Mentee community/coalition; development and execution of a needs assessment in the Mentee community (to include data collection and analysis), logic model development, and strategic plans (both short- and long-term). Any activity geared toward the Mentee's ability to become DFC eligible should be included, whether it is provided by the Mentor coalition/sector members or an outside entity. **The Mentee coalition is highly encouraged to obtain training and technical assistance from a variety of sources and not just the Mentor coalition.**

The DFC Mentoring 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; or
- Landscaping/neighborhood revitalization projects.

Allowable Number of Mentees

DFC Mentoring grantees are expected to assist one or more communities in the development of coalitions working to reduce and prevent youth substance use in their communities. Although the Mentor coalition may mentor up to five coalitions at a time, given the limited resources available under this grant and the importance of the mentoring relationship, it is recommended that the Mentor work with only one or two Mentee coalitions at a time. Proposing to mentor more than one Mentee coalition will not positively or negatively affect an applicant's Peer Review score. Applicants **must** answer all questions for each coalition being mentored within the 25-pages of the Project Narrative, Section A.

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 of 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

Mentee 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 Mentee communities they propose to serve. The DFC Mentoring Program **does not** prescribe the size, borders, demographics, or geographic location of DFC Mentee communities. A Mentee coalition can use various geographic locations 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 Mentee 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.

ONDCP/SAMHSA **do not** make funding decisions based on geographic locations (e.g., number of grants within states/towns/cities). However, when determining the parameters of a community, applicants should be mindful that multiple DFC grantees may not serve the same zip code(s) unless there is written evidence of cooperation between the overlapping existing DFC grantees and/or applicants.

2.3 Community Level Change

Mentee coalitions 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 levels 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 Mentoring Plan, provided in Section A Question 5.3.5, pertains to the strategies and activities the Mentor coalition and the Mentee coalition will undertake to increase the likelihood that the Mentee coalition will become DFC eligible. The Mentoring Plan does not necessarily address the Mentee and its actions to reduce youth substance use, but it may. The Mentor coalition is expected to support the Mentee coalition in developing its community level change strategies for any future DFC application and the development of its Action Plan.

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 their Action Plan, but to use them as a framework for ensuring comprehensiveness.

Seven Strategies for Community 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.

For more information on the Seven Strategies for Community Change, please visit the Community Anti-Drug Coalitions of America's website at http://www.cadca.org/resources/detail/definint-seven-strategies-community-change**.**

NOTE: Per ONDCP Guidelines, lobbying with federal dollars **is not** permitted. As such, costs for lobbying cannot be used as match. Applications funded by the DFC Mentoring Program are **required** to comply with the following Term and Condition regarding **Grantee Restrictions on Lobbying:**

(c) Title 18 > Part I > Chapter 93 > Section 1913: **No part of the money appropriated by any enactment of Congress shall**, in the absence of express authorization by Congress, **be used directly or indirectly to pay for** any personal service, advertisement, telegram, telephone, letter, printed or written matter, or other device, **intended or designed to influence** in any manner a **Member of Congress, a jurisdiction, or any official of any government, to favor, adopt, or oppose, by vote or otherwise, any legislation, law, ratification, policy, or appropriation**, whether before or after the introduction of any bill, measure, or resolution proposing such legislation, law, ratification, policy, or appropriation.

2.4 DFC National Cross-site Evaluation

DFC Mentoring grantees are required to assist the Mentee coalition in developing baseline data regarding youth substance use in the Mentee community. DFC grantees **must** comply with the DFC National Evaluation requirements. ONDCP requires all grantees to collect core measures data specific to the geographic area designated in the approved application. The core measures data collection size **must** be sufficient to provide an accurate and meaningful statistical representation of the people being surveyed in each of the geographical areas served by the coalition.

Data for the following four core measures **must** be collected and reported every two years on alcohol, tobacco, marijuana, and prescription drugs for three grades (6th-12th) with a recommended combination of at least one middle school grade and at least one high school grade:

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

DFC grantees are responsible for providing these core measures data every two years. DFC Mentoring grant recipients are required to report once a year on the Mentee coalition's progress in collecting each of the four measures mentioned above. 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.

2.5 New Grantee Meeting Requirement

Grantees are required to send two people (one **must** be from the Mentor coalition and one from the Mentee 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.

Mentee coalitions that are being mentored for the full two-year term are required to enroll in the NCA at some point during their Mentoring grant. Each Mentee coalition **must** send two people to the NCA. Mentee coalitions only mentored for a one-year term are strongly encouraged to attend NCA, but it is not required.

It is highly recommended that the Mentor or Mentee coalition contact the National Coalition Institute immediately after being awarded the DFC Mentoring grant to assist in registering their Mentees for their desired NCA location. More information on the National Coalition Academy can be found at http://www.cadca.org/trainingevents/training_coalitions/national-coalition-academy.

II. AWARD INFORMATION

Proposed budgets cannot exceed $75,000 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 award amounts are subject to the availability of funds.
To apply for a DFC Mentoring grant under this RFA, the Mentor coalition **must**:

1. have been in existence for at least five years (not to be interpreted as having been a DFC grantee for five years);
2. have an active DFC grant at the time of application; and
3. be in good standing (cannot be on high-risk).

Grantees will be awarded funds for one year, beginning on September 30, 2015. Funds for the second year are distributed as non-competing continuation awards.

III. ELIGIBILITY INFORMATION

1. ELIGIBLE APPLICANTS

Statutory Eligibility Requirements, written into the DFC Act, are inherent in the DFC Mentoring 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 12-Month 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 Mentoring applications will be jointly screened by ONDCP and SAMHSA to determine whether each applicant meets all the Statutory Eligibility Requirements for the DFC Mentoring Program 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 Appendix O of this RFA. Each year, DFC Mentoring grantees **must** demonstrate compliance with all of the following Statutory Eligibility Requirements to be considered for continued funding.

The intent of the Drug-Free Communities Mentoring Program is to fund activities in the United States and does not authorize the funding of organizations or activities outside the United States. 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 for the DFC Mentoring Program

Eligibility Requirement Item:	Evidence Required and Where to Document:
Requirement 1: *Mentor's 5 Years of Existence*	**Evidence Required:**
The Mentor coalition **must** have been in existence for at least five years. *(21 USC 1535 § 1035 (d)(1))*	Applicant **must** provide the date the Mentor coalition was established. **Where to Document:** **Attachment 5**: Mentor Coalition General Information, Item 3 (Refer to Appendix H)
Requirement 2: *Mentor in Good Standing*	**Evidence Required:**

Eligibility Requirement Item:	Evidence Required and Where to Document:
The Mentor coalition **must** be in compliance with all requirements of their existing DFC grant (i.e., DFC reporting and Grants Management requirements) for the previous year. A DFC grantee on high-risk status is **not** eligible to submit an application for a DFC Mentoring grant. *(21 USC 1535 § 1035 (a))*	Applicant **must** provide information documenting current DFC award. **Where to Document:** **Attachment 5**: Mentor Coalition General Information, Item 5 (Refer to Appendix H)
Requirement 3: *Mentor's Measurable Results*	**Evidence Required:**
The Mentor coalition **must** have achieved, through its own efforts, measurable results in the prevention of substance use among youth. **(21 USC 1535 § 1035 (d)(2))*	Applicant **must** report their coalition's successes and achievements that reflect measureable results. **Where to Document:** **Attachment 12**: Applicant **must** submit the **Community-Level Outcomes Section (***Section 6***)** of their most current DFC Progress Report retrievable from the Coalition Online Management and Evaluation Tool (COMET).
Requirement 4: *Mentor's Commitment*	**Evidence Required:**
The Mentor coalition **must** have at least one paid or volunteer staff person, as well as sector volunteers, willing to serve as mentors to the Mentee coalition in the prevention of youth substance use. *(21 USC 1535 § 1035 (d)(3))*	Applicant **must** provide information documenting staff and sector volunteer involvement in the Mentee coalition. **Where to Document:** **Attachment 7:** MOU between Mentor Coalition and each Mentee Coalition and; grantee/legal applicant. (Refer to Appendix J) **Attachment 8:** Resumes and Position Descriptions (Refer to Appendix K)
Requirement 5: *Mentee's Status*	**Evidence Required:**
The Mentee coalition is **not** currently and never has been funded through the DFC grant program.	Applicant **must** demonstrate that the Mentee coalition has no prior history of DFC funding. **Where to Document:** **Attachment 6:** Mentee Coalition General Information, Items 14 and 16 (Refer to Appendix I)

Eligibility Requirement Item:	Evidence Required and Where to Document:
Requirement 6: *Mentee's Willingness to Participate*	**Evidence Required**:
The Mentor coalition **must** demonstrate that there is a willingness on the part of the Mentee coalition and its community to actively participate in the mentoring process. *(21 USC 1535 § 1035 (d)(4))*	Applicant **must** submit a Memorandum of Understanding (MOU) between the Mentor coalition and each Mentee coalition, using the sample provided in Appendix J. The Mentor coalition and each Mentee coalition **must** attach a matching Coalition Involvement Agreement (CIA) from each person listed in their individual Sector Member Table. Sample CIAs are provided in Appendix E (Mentor CIA) and Appendix G (Mentee CIA). **Where to Document:** **Attachment 2**: Mentor CIAs (in the same order as the Mentor Sector Member Table lists sector representatives) **Attachment 4**: Mentee CIAs (in the same order as the Mentee Sector Member Table lists sector representatives). **Attachment 7:** Memorandum of Understanding (MOU) between Mentor and Mentee coalitions.
Requirement 7: *Mentoring Plan*	**Evidence Required:**
The Mentor coalition **must** submit a detailed Mentoring Plan for the mentoring activities to be supported by the grant. **(21 USC 1535 § 1035 (d)(5))*	Applicants **must** submit a 12-Month Mentoring Plan **Where to Document:** **Project Narrative:** Section A, Question 5.3.5
Requirement 8: *Substantial Support from Non-Federal Sources*	**Evidence Required:**
The Mentor coalition **must** demonstrate a minimum of a 1:1 match in non-federal funds not previously identified as match to their current DFC grant. (21 USC 1535 § 1035 (g)(1))	Applicant **must** show at least dollar-for-dollar (1:1) matching funds in their Budget and 12-Month Budget Narrative. **Where to Document:** SF-424, Section 18

Eligibility Requirement Item:	Evidence Required and Where to Document:
	SF-424A 12-Month Budget Narrative (Refer to Appendix A)
Requirement 9: *Federal Request*	**Evidence Required:**
The Mentor coalition may **not** request more than $75,000 in federal funds per year. *(21 USC 1535 § 1035 (g)(2))*	The budget **may not show a request for federal funds exceeding $75,000 per year.** **Where to Document:** SF-424, Section 18 SF-424A 12-Month Budget Narrative (Refer to Appendix A)

2. COST SHARING AND MATCH REQUIREMENTS

The DFC Mentoring Program authorizing legislation requires grantees to demonstrate that they have matching funds from non-federal sources equivalent to federal funds requested from the DFC Mentoring Program. Applicants **must** itemize the match separately in the budget and explain the match separately in the 12-Month Budget Narrative. A sample 12-Month Budget Narrative is provided in Appendix A of this RFA. Applicants are required to have 100 percent match (1:1) from non-federal sources. **The table below indicates the percentage of match required for DFC grantees in each year of the grant**.

Table 2: Percentage of Match

Year of Funding Requested	Matching Requirement
1	100%
2	100%

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 of this RFA**). 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 provides information on allowable costs, volunteer rates, and conflict of interest issues. This document is available http://www.samhsa.gov/grants/grants-management/policies-regulations/hhs-grants-policy-statement.

Federal funds, including those passed through a state or local government, **cannot** be used toward the required match. The **only** exception in the DFC Mentoring 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://www.samhsa.gov/grants/applying) to download the required documents needed to apply for the DFC Mentoring Program.

GRANTS.GOV

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

On the Grants.gov site (http://www.Grants.gov), select the Apply for Grants option from the Applicants Tab at 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 peer 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/applying). 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; and
- Certifications.

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 Appendices 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 first 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/get-a-duns-number.html 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 System for Award Management (SAM). **Registration in the System for Award Management (SAM) is mandatory for any applicant of the DFC Mentoring 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 12-Month 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.
- **Overview of the Mentor/Mentee Relationship and Mentee Community:** The Overview describes the key features of the community. It should be **no longer than 2 pages** in length (Please refer to V-5.1).
- **Project Narrative and Supporting Documentation**: The Project Narrative (Section A of this RFA) describes the efforts the Mentor coalition will undertake to support the development of the Mentee coalition. It consists of 6 questions and can be **no longer than 25 pages**.
- **12-Month Budget Narrative:** The 12-Month Budget Narrative (Section V-6 of this RFA) provides narrative detail about both the federal request and the non-federal match.
- **Attachments 1 through 12**: Please clearly label each attachment provided. Additional attachments will **not** receive a higher score.
- **Assurances:** Non-Construction Programs. Applicants **must** read the list of assurances provided on the SAMHSA website at http://www.samhsa.gov/grants/applying/forms-resources and **check the box marked 'I Agree'** before signing the face page (SF-424) of the application. Do not include the list of assurances with your application.
- **Certifications:** Applicants **must** read the list of certifications provided on the SAMHSA website and **check the box marked 'I Agree'** before signing the first 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.
- **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 N. 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 peer reviewed.

2. APPLICATION SUBMISSION REQUIREMENTS

Applications are due by **11:59 PM** (Eastern Time) on **April 14, 2015**.

All applications 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 HHS 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 L for additional information on these requirements as well as requirements for the Public Health Impact Statement.

4. FUNDING LIMITATIONS/RESTRICTIONS

The governing cost principles describing allowable and unallowable expenditures for federal grantees, including SAMHSA grantees, are provided in the following documents.

Table 3: Cost Principles

Applies to:	Cost Principle:
Educational Institutions	**2 CFR 200 /** **45 CFR Part 75** "UNIFORM ADMINISTRATIVE REQUIREMENTS, COST PRINCIPLES, AND AUDIT REQUIREMENTS FOR HHS AWARDS"
State, Local and Indian Tribal Governments	
Nonprofit Organizations	
Hospitals	

In addition, DFC Mentoring Program grant recipients **must** comply with the following funding restrictions:

- Food is **generally** unallowable. Exceptions within the DFC Mentoring Program could 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.

- DFC Mentoring 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 the program.

- DFC Mentoring grant funds may **not** be used to provide funding to community organizations through mini-grants, including one coalition funding another coalition.

- DFC Mentoring grant funds may **not** be utilized for the following: law enforcement equipment, drug search detection canines or related training, lighting, or community gardening efforts.

V. APPLICATION REVIEW INFORMATION

1. GENERAL INSTRUCTIONS

For FY 2015, there are **6 questions** in the Project Narrative (Section A) and only these questions may be used when applying for FY 2015 funding. **Failure to use the correct RFA will result in an application being screened out and not proceeding to peer review.**

2. APPLICATION REVIEW CRITERIA

The DFC Mentoring Program review process utilizes current and former 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. 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. 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, and city).

3. APPLICATION SCORING

Peer reviewers will tally the points each application 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. The decision criterion is the 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 eligibility requirements outlined in this RFA. Applications submitted by coalitions that meet all eligibility requirements will then be scored by a peer review panel according to the application evaluation criteria described above. All applications that proceed to peer review will be rated on a 100-point scale. The scoring criteria can be found in Appendix O of this RFA.

5. RESPONDING TO THE DFC MENTORING RFA

5.1 Overview of the Mentor/Mentee Relationship and Mentee Community (Not Scored)

In the Overview, applicants **must** provide a brief community context. This is the applicant's opportunity to "set the stage" for peer reviewers in terms of how the Mentor and Mentee coalitions have entered into a relationship for the purposes of developing a new coalition. **The Overview is not scored and does not count toward the 25-page limit. However, it can be no longer than 2 pages in length**. The **Overview of the Mentor/Mentee Relationship and Mentee Community** should be placed between the Table of Contents and the Project Narrative.

In the Overview, explain the process that will be used for clarifying roles and expectations that will ensure a full partnership (e.g., shared decision making, managing differences, and use of funds). Discuss how both groups have determined that the DFC Mentoring grant should be pursued and the collaborative approach used to develop this grant application. In addition, the Overview should provide context of the Mentee community and its readiness to move toward becoming DFC eligible.

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

In developing the Project Narrative, use the instructions outlined below, which have been tailored to the DFC Mentoring Program. **Applicants must use these instructions to apply for the DFC Mentoring 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.
- **Retype the bold question only** directly above each response. 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 question and inclusion of the bullets under each question. **Each bullet will be assessed when determining the score for each question**. Applicants should feel free to provide information beyond the bullets within each question if it expands the coalition's ability to more effectively address the question. If a coalition cannot answer a specific bullet, then the reason for this **must** be explained within the answer to the question.

5.3 Section A: Questions for the Project Narrative

The Mentor coalition may identify a community to be mentored that does not yet have a formal coalition. In this case, the Mentor coalition may substitute the term "Mentee community" for the term "Mentee coalition" when reading and responding to the questions found in the Project Narrative (Section A).

For the purpose of this grant application, the term "Mentee coalition" is used in the singular in order to simplify the questions found in the Project Narrative below. **In developing the application, if an applicant plans to mentor more than one coalition, all questions must be answered for each Mentee coalition within the 25-page limit.**

The following **6 questions** enable applicants to tell the story of their current and future efforts to assist the Mentee coalition in becoming eligible to apply for DFC funding on its own. 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. If an applicant does not have information to provide for a given bullet, indicate why in the response rather than ignoring the bullet. Applicants are not required to retype the bullets, but **must** answer them completely.

5.3.1 (15 points) | What are the Mentor coalition's strengths that will increase the likelihood that the Mentee coalition will become eligible to apply for DFC funding? Provide explanations of the following:

- History of the Mentor coalition's successes and achievements;
- Mentor coalition's record of providing training and/or technical assistance in the community (i.e., stakeholders, leaders, neighboring communities);
- Evidence that the Mentor coalition is best suited to function as a Mentor to the Mentee community (i.e., sector members' knowledge of the Mentee community);

- Projected involvement of the Mentor coalition's 12 sectors members in working directly with the Mentee coalition; and
- Factors that led the Mentor coalition to determine that the Mentee has the potential to become an effective DFC coalition.

In addition to the narrative, applicant **must** submit the **Community-Level Outcomes Section** *(Section 6)* of their most current DFC COMET Progress Report as **Attachment 12.** This section of the progress report reflects the Mentor's baseline and most recent data reports to include 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.

5.3.2 (20 points) | What is the Mentee coalition's developmental history? Provide explanations of the following:

- Mentee coalition's history and formation (i.e., specific events that led to formation, founding history);
- Efforts to mobilize, inform, and organize the Mentee coalition/community around the issue of youth substance use prevention, including efforts to engage stakeholders and DFC required 12 sectors;
- Mentee coalition's assessment of the community to determine what, if any barriers, will need to be addressed by the Mentee;
- Mentee coalition's ability to increase coalition and community capacity to implement youth substance use prevention strategies and activities; and
- Mentee coalition's efforts to ensure cultural competence, including adequate representation from diverse groups within the community to be served.

5.3.3 (10 points) | What efforts has the Mentee community undertaken to assess the extent of youth substance use? What plans does the Mentee coalition have to continue these efforts in the future? Provide explanations of the following:

- Past efforts to assess local youth substance use problems;
- Determination of data sources to ensure coalition's ability to properly assess local issues in an ongoing manner; and
- Processes that will be used by the coalition to prioritize current issues and problems to be addressed with future DFC and other funding.

5.3.4 (15 points) | What existing resources or conditions are present or lacking in the Mentee community to address youth substance use? Provide explanations of the following:

- Youth and adult volunteers, partners, organizations, programs and systems supporting youth substance use prevention;
- Other coalitions and organizations already working on public health and/or public safety issues that can support the Mentee coalition;
- Positive environmental conditions, policies and practices (e.g., outlet density, school policies, enforcement efforts); and
- Training and technical assistance for the coalition and community at-large.

5.3.5 (25 points) | What will the Mentor coalition do during the first 12 months to assist the Mentee coalition in becoming eligible to apply for DFC funding?

This question is answered by providing the Mentoring Plan, ensuring that it speaks to the Mentee coalition's development toward becoming DFC eligible. Do not provide additional narrative explanation. **This is not necessarily a plan to address youth substance use in the Mentee community, but instead a plan to move the Mentee coalition toward DFC eligibility.**

Use **Table 4: 12-Month Mentoring Plan** to cover a period from September 30, 2015 to September 29, 2016 that includes all training and technical assistance. Any activity geared toward the Mentee's ability to become DFC eligible should be included whether it is provided by the Mentor coalition/sector members or an outside entity.

Creating a Mentoring Plan:

- The Mentoring 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 **must** use Times New Roman 12-point font in the Mentoring Plan and **must** adhere to all instructions provided in **Appendix C**, Guidance for Electronic Submission of Applications.
- The Mentoring Plan **must** include the goal provided in Table 4. Applicants may add additional goals.
- The Mentoring Plan should be comprehensive to include all of the coalition's efforts. Applicants may include as many objectives, strategies, and activities (objectives **must** be measurable) as necessary to create a comprehensive Mentoring Plan.
- The objectives below are provided as examples. All objectives **must** be measureable, defined to include a **specific end product** and a **date by which the objective will be completed**. Sample measureable objective can be found in Appendix O.

12-MONTH MENTORING PLAN

Applicants **must** use Table 4 below to outline the 12-Month Mentoring Plan. Cells in the following tables are intentionally left blank.

GOAL 1: The primary goal of the DFC Mentoring grant is to assist newly forming coalitions in becoming eligible to apply for DFC funding on their own.

Objective 1: *Provide measureable objective.*
Strategy 1: *Provide specific strategy.*

Table 4: 12-Month Mentoring Plan

Activity	Who is responsible?	By when?

Objective 2: *Provide measureable objective.*
Strategy 1: *Provide specific strategy.*

Activity	Who is responsible?	By when?

Objective 3: *Provide measureable objective.*
Strategy 1: *Provide specific strategy.*

Activity	Who is responsible?	By when?

5.3.6 (15 points) | How will the Mentor and Mentee coalition collaborate to ensure effective implementation of the Mentoring Plan and disseminate the results to the community? Provide explanations of the following:

- Describe the frequency, mechanism (e.g., in-person, conference calls), and number of meetings;
- Describe the measures to be used to monitor progress and meet deadlines;
- Describe the process for identifying challenges in the Mentoring Plan and making revisions as needed; and
- Describe the plan for keeping the Mentee community, including coalition members, community and its leaders, informed of progress toward DFC eligibility.

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

6. SECTION B: 12-MONTH BUDGET NARRATIVE (NOT SCORED)

In this section, applicants **must** provide a 12-Month Budget Narrative to include budget details and justification for expenditures. The 12-Month 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 12-Month Budget Narrative.** The 12-Month Budget Narrative **must** be submitted as file BNF in Grants.gov (See Appendix C, Guidance for Electronic Submission).

7. SECTION C: REQUIRED ATTACHMENTS (NOT SCORED)

All attachment pages must be numbered. Applicants may hand-number pages if necessary. Although these attachments 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 submit all appendices as "attachments."

NOTE: Before you begin completing the attachments, review the **Pre-Submission Verification Checklist** in Appendix N, 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 – Mentor Sector Table: Use the template in Appendix D, Table 22, to provide the Mentor Sector Table. Each Mentor **must** provide the names of the **12 sector representatives** that will be involved in mentoring the Mentee coalition. If mentoring more than one coalition and if the individuals involved are different, applicants **must** submit a Mentor Sector Table for each Mentee coalition.

Attachment 2 – Mentor Coalition Involvement Agreements: Applicants may use the template provided in Appendix E, but may also use agreements already collected by the coalition as long as they are **no more than** 12 months old at the time of application. Table 23 **must** be included at the top of each CIA. All signatures **must** be handwritten and dated.

Attachment 3 – Mentee Sector Table: Use the template in Appendix F, Table 24. Each Mentee **must** provide the names of as many of the 12 sector representatives as possible at the time of application submission. If the sector representative can be named, but has not yet been secured, include that individual in the chart and remark that he/she has not yet been recruited. If more than one coalition is being mentored, applicants **must** submit a separate Mentee Sector Table for each Mentee coalition.

Attachment 4 - Mentee Coalition Involvement Agreements: At the time of application submission, the Mentee coalition is **not** required to have active representation from all of the required 12 sectors, as written in the DFC Act. For sectors listed in Attachment 3 as not yet recruited, a CIA is not required. The Mentee coalition may describe the individual/organization's key role/contribution to the coalition. If to be recruited, it may briefly describe the plan to recruit a member for this sector and what his/her role/contribution will likely be. If mentoring more than one coalition and if the individuals involved are different, applicants **must** submit CIAs for the additional Mentee coalition(s). Applicants may use the template provided in Appendix G, but may also use agreements already collected by the coalition as long as they are **not more than** 12 months old by the application deadline. Table 25 **must** be included at the top of each CIA. All signatures **must** be handwritten and dated.

Attachment 5 – Mentor Coalition General Information: Applicants **must** provide the completed chart per Table 26 in Appendix H.

Attachment 6 – Mentee Coalition General Information: Applicants **must** provide the completed chart in per Table 27 in Appendix I.

Attachment 7 – Memorandum of Understanding: Applicants must provide a separate Memorandum of Understanding (MOU) between the Mentor coalition and each Mentee coalition (if more than one). This agreement **must** outline the scope of work and expectations for both parties. The MOU should also include a statement that the Mentee coalition has contributed to the application being submitted and agrees with the proposed Mentoring Plan. The template in Appendix J may be used. All signatures **must** be handwritten and dated. MOUs **must not** be more than 12 months old at the time of application.

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. If a person has been selected but not yet hired, include a letter of commitment from that individual along with the 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. The key staff positions may be funded under this grant for either the Mentor or Mentee coalitions (or both), or through other Mentor coalition resources. Information on what should be included in resumes and position descriptions can be found in Appendix K.

Attachment 9 – Intergovernmental Review (E.O. 12372) Requirements *(Letter to the Single State Agency)*: If applicable, applicants must 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 Mentoring grant. Information related to this attachment is found in Appendix L, Intergovernmental Review Requirements.

Attachment 10 – Assurances, Certifications, Disclosures, and Checklists: Applicants **must** include assurances, certifications, project performance site location(s) form, checklist, and disclosures noted in Section IV-1.1 of this RFA.

Attachment 11 – Congressional Notification: All applicants must include a Congressional Notification. The Project Description section **must** not be more than 35 lines; therefore, the Congressional Notification **must not** exceed one page. This document should include a simple summary of your coalition's efforts. This information will be utilized to provide 48-hours of notice to your Congressional Members should you receive a DFC Mentoring award. Using the template provided in Appendix M, include specific information pertaining to your grant application.

Attachment 12 –Community-Level Outcomes Section *(Section 6)* **of most recent DFC COMET Progress Report:** Applicants **must** include a copy of Section 6: **Community-Level Outcomes** of their most recent COMET Progress report.

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.

Pre-Submission Verification Checklist – The final page of your application should be the checklist found in Appendix N, the Pre-Submission Verification Checklist. Be sure that you have included all documents listed in the Pre-Submission Verification Checklist before submitting your application.

VI. ADMINISTRATIVE INFORMATION

1. AWARD NOTICES AND APPLICATION SUMMARY STATEMENTS

By the end of **September 2015**, 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 2015**, 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 will contain the peer review score and summarized comments.

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/grants-management/notice-award-noa/standard-terms-conditions.

- 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 visit SAMHSA's website at: http://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions.

- 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:

PROGRESS AND FINANCIAL REPORTS

Each year, grantees are required to submit a program progress report and various financial reports. Full details regarding specific due dates are available at http://www.whitehouse.gov/ondcp/information-for-current-grantees.

PUBLICATIONS

If you are funded under this grant program, you are required to notify Government Project Officer (GPO) 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 requests that grantees:

- Provide the GPO 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
Phone: (240) 276-1270
Email: dfcnew@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
Phone: (240) 276-1422
Email: Virginia.simmons@samhsa.hhs.gov

Appendix A: Sample Budget

(Includes Budget Terminology and Sample 12-Month Budget Narrative)

Budget Preparation:

The 12-Month 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/grants-management/policies-regulations/financial-management-requirements to determine cost sharing expectations and restrictions on the types of costs that may appear in the budget.

Budget Terminology:

Allowable 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 may be allocated 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 Mentoring 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: http://www.psc.gov/financial/indirect-cost-negotiations.html. Effective with 45 CFR 75.414(f), any non-federal entity that has never received a negotiated indirect cost rate, except for those non-federal entities described in Appendix VII to part 75 (D)(1)(b) may elect to charge a de minimis rate of 10% of modified total direct costs (MTDC) which may be used indefinitely.

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: If an applicant has sufficient match to allow a budget request of the full $75,000, the applicant should round up the final budget figures to equal $75,000. **Applicants will not receive a higher score for requesting less than $75,000.** Applicants are also strongly encouraged to apply for the full $75,000 for the second year of funding in their budget forecast even if they are not able to apply for full funding in the first year due to insufficient match.

The amount requested in this original application for the second year establishes the maximum amount that the applicant can receive in that year if awarded.

Grantees are required to submit an annual budget request each year. The annual amount requested can be less than $75,000 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 $75,000 for the second year. **Avoid conflict of interest within proposed contractual costs. See the definition of Conflict of Interest and examples below:**

Conflict of Interest:	**Examples:**
Federal regulations prohibit the appearance and existence of conflict of interest situations for employees, officials, and agents of the organization. Reference – 45 CFR 75/ 2 CFR 200.318112	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). Nepotism - an employee is supervised by a family member under the federally sponsored project. 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. Grantees will be required to alert the DFC Administrator of any organizational conflicts of interest as well as noncompetitive

	practices among contractors that may restrict or eliminate competition.

SAMPLE 12-MONTH BUDGET NARRATIVE
(FOR COMPLETING SF-424A: SECTION FOR FIRST YEAR OF THE FUNDING CYCLE)

Please use the format below for submitting a 12-Month Budget Narrative for Section B.

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
Mentor Program Director	John Doe	$64,890	10%	$6,489
Mentor Project Coordinator	To be selected	$46,276	25%	$11,569
Mentee Project Coordinator	Sarah Smith	$35,000	25%	$8,750
			TOTAL	**$26,808**

BUDGET 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
Volunteer Coordinator	Ron Jones	$23,000	15%	$3,450
Clerical Support	Susan Johnson	$13.38/hr. x 100 hr.		$1,338
			TOTAL	**$4,788**

BUDGET 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): **$26,808**

NON-FEDERAL MATCH (enter in Section B column 2 line 6a of form SF-424A): $**4,788**

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%	$26,808	$2,051
Workers Compensation	2.5%	$23,564	$589
Insurance	10.5%	$23,564	$2,474
		TOTAL	**$5,114**

BUDGET NARRATIVE JUSTIFICATION: Enter a description of the fringe funds requested, how the rate was determined, and how their use will support the purpose and goals of this proposal. Fringe should reflect the rate for the agency.

Table 8: Non-Federal Match

Component	Rate	Wage	Cost
FICA	7.65%	$4,788	$366
Workers Compensation	2.5%	$4,788	$120
Insurance	10.5%	$4,788	$503
		TOTAL	**$989**

BUDGET 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): **$5,114**

NON-FEDERAL MATCH (enter in Section B column 2 line 6b of form SF-424A): **$989**

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 3 persons	$900
New Grantee Meeting	Washington, DC	Hotel	$200/night x 3 persons x 4 nights	$2,400
New Grantee Meeting	Washington, DC	Per Diem (meals)	$71/day x 3 persons x 4 days	$852
National Coalition Academy	Fort Indiantown Gap, PA (Tentative Site)	Air	$200/flight x 3 flights x 2 people	$1,200
National Coalition Academy	Fort Indiantown Gap, PA	Ground Transportation (rental car)	$200/week x 3 weeks	$600
Local travel		Mileage	999 miles x $0.50/mile	$500
			TOTAL	**$6,452**

BUDGET NARRATIVE JUSTIFICATION: Describe the purpose of travel and how costs are determined.

NOTE: The grant requires that the Mentor coalition staff person overseeing the DFC Mentoring grant and one Mentee coalition member attend the New Grantee Meeting in Washington, DC.

Mentee coalitions that are being mentored for the full two-year term are required to enroll in the National Coalition Academy (NCA) at some point during their Mentoring grant. Mentee coalitions only mentored for a one-year term are encouraged, but not required, to attend. The NCA is a three-week training program spread out over the course of several months. The local travel rate should be based on the agency's personally owned vehicle (POV) reimbursement rate, which should correspond with the GSA rate found at http://www.gsa.gov.

Table 10: Non-Federal Match

Purpose of Travel	Location	Item	Rate	Cost
Regional Training Conference	Chicago, IL	Airfare	$275/flight x 3 persons	$825

Purpose of Travel	Location	Item	Rate	Cost
Regional Training Conference	Chicago, IL	Hotel	$250/night x 3 persons x 2 nights	$1,500
Regional Training Conference	Chicago, IL	Per Diem (meals)	$71/day x 3 persons x 2 days	$426
Local Travel	Group meetings	Mileage	2,298 miles x $0.50/mile	$1,149
			TOTAL	**$3,900**

BUDGET 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. The local travel rate should be based on the agency's personally owned vehicle (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): **$6,452**

NON-FEDERAL MATCH (enter in Section B column 2 line 6c of form SF-424A): **$3,900**

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 nonexpendable personal property having a useful life of more than one year and an acquisition cost of $5,000 or more. If the applying agency defines "equipment" at a lower rate, then follow the applying agency's policy.

Table 11: Federal Request

Item(s)	Rate	Cost
None	$0	$0
	TOTAL	**$0**

BUDGET 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	$0
	TOTAL	**$0**

BUDGET 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 6d of form SF-424A):**$ 0**

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

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

Table 13: Federal Request

Item(s)	Rate	Cost
Presentation supplies	$30/presentation x 12	$360
Postage	$37/mo. x 12 mo.	$444
Meeting supplies	$10/meeting x 26 meetings	$260
Copies	10,000 copies x $0.10/copy	$1,000
	TOTAL	**$2,064**

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

Table 14: Non-Federal Match

Item(s)	Rate	Cost
Postage	$37/mo. x 12 mo. x 5 groups	$2,220
	TOTAL	**$2,220**

BUDGET 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 FUNDS: State source of match funds.
FEDERAL REQUEST (enter in Section B column 1 line 6e of form SF-424A):**$ 2,064**

NON-FEDERAL MATCH (enter in Section B column 2 line 6e of form SF-424A):**$ 2,220**

F. Contracts: 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.

COST FOR CONTRACTS MUST BE BROKEN DOWN IN DETAIL AND A BUDGET NARRATIVE JUSTIFICATION PROVIDED.

Table 15: Federal Request

Name	Service	Rate	Other	Cost
To be selected	Needs Assessment Training	$150/day	15 days	$2,250
	Travel	$0.50/mile	352 miles	$176
To be selected	Strategic Planning Facilitator	$50/hour	200 hours	$10,000
To be selected	Environmental Strategies Training	$250/day	18 days	$4,500
			TOTAL	**$16,926**

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

Table 16: Non-Federal Match

Name	Service	Rate	Other	Cost
Mentoring group	Training	$17.50/hr.	5 days x 8 hrs./day x 5 participants x $17.50/hr.	$3,500

Name	Service	Rate	Other	Cost
Individual time	Needs Assessment	$17.50/hr.	2hr./wk. x 52 wks. x 10 participants x $17.50/hr.	$18,200
Coalition Training	Needs Assessment training	$17.50/hr.	4 hr./mo. x 12 mo. x 5 participants x $17.50/hr.	$4,200
Community Meeting	Coordination	$17.50/hr.	4 hr./meeting x 12 meetings x 6 participants x $17.50/hr.	$5,040
To be named	Coalition Prevention 101 Training	$250/day	6 days	$1,500
			TOTAL	**$32,440**

BUDGET NARRATIVE JUSTIFICATION: Explain the need for each match contract agreement and how it will support the 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):**$16,926**

NON-FEDERAL MATCH (enter in Section B column 2 line 6f of form SF-424A):**$32,440**

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

H. <u>Other</u>: 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[1] arrangement, provide cost of ownership/use allowance calculations. Additionally, the lease is required and **<u>must</u>** be submitted for all projects allocating rent costs.

[1] "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)

Table 17: Federal Request

Item	Rate	Cost
Student Surveys	$1/survey x 10,000	$10,000
Coalition Brochures	$0.89/brochure x 6,024 brochures	$5,361
	TOTAL	**$15,361**

BUDGET NARRATIVE JUSTIFICATION: Explain the need for each item and how it will support the purpose and goals of this proposal.

Table 18: Non-Federal Match

Item	Rate	Cost
Space rental	Varies between $75/event to over $300/event	$11,500
Youth Program	6 adult leaders x 10 hrs./mo. x $17.50/hr. x 12 mo. CIA demonstrates breakout of services	$12,600
Internet Service	$40.00/month x 12 months	$ 480
Student surveys	$1/survey x 3,401 surveys	$3,401
Coalition Brochures	$0.89/brochure x 809 brochures	$720
Printing	$300/run x 5 runs	$1,500
	TOTAL	**$ 30,201**

BUDGET 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): **$15,361**

NON-FEDERAL MATCH (enter in Section B column 2 line 6h of form SF-424A): **$30,201**

TOTAL DIRECT COSTS:

FEDERAL REQUEST (enter in Section B column 1 line 6i of form SF-424A): **$72,725**

NON-FEDERAL MATCH (enter in Section B column 2 line 6i of form SF-424A): **$74,538**

TOTAL INDIRECT COSTS[2]:

FEDERAL REQUEST (enter in Section B column 1 line 6j of form SF-424A): **$2,275**

NON-FEDERAL MATCH (enter in Section B column 2 line 6j of form SF-424A): **$462**

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): **$75,000**

NON-FEDERAL MATCH (enter in Section B column 2 line 6k of form SF-424A): **$75,000**

Provide the total proposed period and federal funding as follows:

Table 19: Budget Summary

Category	Federal Request	Non-Federal Match	Total
Personnel	$26,808	$4,788	$28,352
Fringe Benefits	$5,114	$989	$5,855
Travel	$6,452	$3,900	$10,353
Equipment	0	0	0
Supplies	$2,064	$2,220	$4,084
Contractual	$16,926	$32,440	$49,366
Other	$15,361	$30,201	$49,254
Total Direct Costs	$72,725	$74,538	$147,264
Indirect Costs	$2,275	$462	$2,736
Total Project Costs	**$75,000**	**$75,000**	**$150,000**

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

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[2] **Indirect costs can be claimed only if the applicant has a negotiated indirect cost rate agreement. It is applied only to direct costs as allowed in the agreement. If claiming indirect costs, include a copy of the fully executed, negotiated, indirect cost agreement. For information on applying for the indirect rate go to: https://rates.psc.gov/fms/dca/map1.html**

CALCULATION OF FUTURE BUDGET PERIOD
BASED ON FIRST 12-MONTH BUDGET PERIOD

Input, review, and verify the accuracy of your second year budget estimate. Increases or decreases in the second year compared to the first **must** be explained and justified. Total federal share is not to exceed $75,000.

Table 20: Second Year Budget Estimate

Category	2nd project year Federal	2nd project year match
Personnel	$26,808	$4,788
Fringe Benefits	$5,114	$989
Travel	$6,452	$3,900
Equipment	0	$0
Supplies	$2,064	$4,000
Contractual	$16,926	$39,000
Other	$15,361	$21,861
Total Direct Costs	$72,725	$74,538
Indirect Costs	$2,275	$462
Total Project Costs	**$75,000**	**$75,000**

Provide reason(s) for anticipated changes from the first year budget.

NOTE: The total federal dollars (direct + indirect costs) requested for the second year 12 month budget period is entered on SF-424A, Section E: Column (b) = Year Two. 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 year of the 2-year funding cycle.

Appendix B: Formatting Requirements Checklist 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 Mentoring 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.

You **must** be registered in the 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.**

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.**

- Applications **must** be received by the application due date and time, as detailed in Section IV-2 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. See requirements for electronic submission of applications in Appendix C of this RFA.

- 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 help 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 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 12-Month 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 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.

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/web/grants/outreach/grantsgov-training.html. 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 RFA number (called the funding opportunity number) or by the Catalogue of Federal Domestic Assistance (CFDA) number. The RFA 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 2007/2010 products (e.g., Microsoft Word 2007/2010, Microsoft Excel 2007/2010, 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 2007/2010 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 RFA #) 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, 12-Month Budget Narrative, DFC Mentoring Attachments 1 – 6, and DFC Mentoring Attachments 7 – 12. **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 - 12-Month 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 Mentoring Attachments 1 – 6: 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 and save.

d) File Four – DFC Mentoring Attachments 7 – 12: 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 – 12) into two PDF files before uploading.

4. Other Grants.gov Requirements

New for FY 2015 – Allowable characters for file names

Characters	Special Characters		
Upper case A – Z	Parentheses ( )	Curly braces { }	Square brackets [ ]
Lower case a – z	Ampersand &	Tilde ~	Exclamation point !
Underscore _	Comma ,	Semicolon ;	Apostrophe ‘
Hyphen –	At sign @	Number sign #	Dollar sign $
Space	Percent sign %	Plus sign +	Equal sign =
Period .	Ampersand in XML **must** use the & format.		

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 will result in a larger file size, which 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

- 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 dfcnew@samhsa.hhs.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 paper application, it will be screened out and returned to you without review.

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, 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: Mentor Sector Table

As **Attachment 1**, use Table 21 to identify the current sector representatives in the Mentor coalition that will serve as mentors to the Mentee coalition. The Mentor coalition is required to have active representation from all 12 sectors in order to be compliant with their current DFC grant. Individuals listed in the Mentor Sector Table **must** serve as willing partners in helping the Mentee coalition.

Completing the Sector Member Table:

1. Remove all italicized instructions in the template.
2. Sector Member Name: Choose sector member that best fits each sector. Do not provide more than one name per sector. Neither a paid staff member nor the person signing the CIA can be a sector member.
3. Organization Name and Role: Identify organization member represents and 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.
4. Specific Contribution to Coalition: Provide tasks sector member performs for coalition.
5. Page Number for Matching CIA: Give page number for first page of the matching CIA.
6. An individual **must** not represent more than one of the 12 sectors.
7. For the youth sector, list the member's age.
8. If someone other than the individual listed in the "Member Name" column signs the CIA, the person listed in the "Member Name" column **must** be identified in the CIA as the sector representative. For example, if the Chief of Police signs the CIA instead of an officer who is listed in the Sector Member Table as the sector representative, he/she **must** identify by name the sector representative listed.

Table 21: Sector Descriptions

Sector	Sector Description
Youth	An individual 18 years of age or younger (**must** 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 **must** be a sworn Law Enforcement Officer.
Religious/Fraternal Organization	A representative of a faith-based organization. The

Sector	Sector Description
	representative's role **must** be of a leader, not solely a member.
Civic/Volunteer Group	A representative of an organization that provides civic or volunteer activities to the community.
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.

Table 22: Mentor Sector Table

Sector	**Member Name** *(first and last name)*	**Organization Name and Role in Organization** *(name of organization and role)*	**Specific Contribution to Coalition** *(tasks performed as part of coalition)*	**Page Number for Matching CIA** *(provide page number only)*
Youth (an individual 18 or younger, provide age)				
Parent				
Business				
Media				
School				
Youth-Serving Organization				
Law enforcement				
Religious or Fraternal Organization				
Civic or Volunteer Group				
Healthcare Professional				

Sector	**Member Name** *(first and last name)*	**Organization Name and Role in Organization** *(name of organization and role)*	**Specific Contribution to Coalition** *(tasks performed as part of coalition)*	**Page Number for Matching CIA** *(provide page number only)*
State, Local, or Tribal Governmental Agency with Expertise in the Field of Substance Abuse				
Other Organization Involved in Reducing Substance Abuse				

Appendix E: Mentor Coalition Involvement Agreements

As **Attachment 2**, Applicants (Mentor coalition) **must** include one Coalition Involvement Agreement (CIA) for each Mentor sector member listed in **Attachment 1**. The following page provides a sample CIA for sector members. **This document allows an applicant to indicate compliance with the required 12 sectors**. Applicants can tailor the agreement as needed, but **must include Table 23: Mentor CIA Information, identified below, at the top of each CIA.**

Table 23: Mentor CIA Information (must be at the top of every CIA)

Sector	Member Name	Organization Name
Insert name of one of the 12 sectors	*Insert Individual's Name as listed in the Sector Member Table, Attachment 1*	*Insert Organization Name*

The member listed on the CIA must match the name listed on the Sector Member Table provided as Attachment 2.

General Information:

- CIAs **must** be no 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. Each CIA **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: Mentor CIA Information

- Insert **Table 23** at the top of each CIA.
- Remove the italicized language and enter the correct information under each of the table components (i.e., Sector, Member Name, and Organization Name).
- Below are the three components 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 21 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.

SAMPLE COALITION INVOLVEMENT AGREEMENT (CIA)

Sector	Member Name	Organization Name
Insert name of one of the 12 sectors.	*Insert Individual's Name as listed in the Sector Member Table, Attachment 1*	*Insert Organization Name*

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 held responsible to:

1. Create and follow by-laws and policies
2. Formulate coalition goals and objectives
3. Oversee operations of activities, programs, and paid staff.
4. Continue to increase new membership of the coalition.
5. Create and follow a strategic Action Plan.
6. Create a credible and relevant sustainability plan which includes volunteer membership and resources, both financial and material.
7. Respect the rights of [Coalition Name] members to hold their own opinions and beliefs.

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

1. Be a community leader amongst the represented sector.
2. Ensure clear communication between the sector represented and the coalition.
3. Act as a positive role model for youth, families, and peers.
4. Support the coalition's mission.
5. Attend coalition meetings which are held on a ***[Frequency]*** basis.
6. Participate in at least one subcommittee.
7. Attend coalition sponsored trainings, town hall meetings, and community events.

8. Contribute to the strategic planning process.
9. Participate in sustaining the coalition's capacity, involvement, and energy.
10. Participate in the DFC Workstation, a communication vehicle used by the DFC federal partners to provide timely information to coalitions.
11. Prevent youth substance use through community level change strategies.
12. Provides the following services to be used as match, if applicable.

By signing this CIA, I commit to the efforts of ***[Coalition Name]*** until which time this relationship is no longer beneficial to the mission set forth by its membership.

_____	_____
Coalition Representative's Name (Print)	Sector Representative's Name (Print)
_____	_____
Coalition Representative's Signature	Sector Representative's Signature
_____ __/__/__	_____ __/__/__
Title Date	Title Date

Appendix F: Mentee Sector Table

As **Attachment 3**, insert **Table 24: Mentee Sector Table**, identify the current or intended sector representatives in the Mentee coalition. At the time of application, the Mentee coalition is **not** required to have active representation from all 12 sectors. Individuals listed in **Table 24: Mentee Sector Table** **must** serve as willing partners in helping the Mentee coalition. The table below **must** be utilized.

Table 24: Mentee Sector Table

Sector	**Sector Member Name** *(first and last name)*	**Organization Name and Role in Organization** *(full name of organization and individual's role in organization)*	**Specific Contribution to Coalition** *(demonstrate active participation in the coalition)*	**Page Number for the First Page of Matching CIA** *(provide CIAs in same order as the name are listed in this table)*
Youth (an individual 18 or younger)				
Parent				
Business				
Media				
School				
Youth-Serving Organization				
Law enforcement				
Religious or Fraternal Organization				
Civic or Volunteer Group				
Healthcare Professional				
State, Local, or Tribal Governmental Agency with Expertise in the Field of Substance Abuse				
Other Organization Involved in Reducing Substance Abuse				

Appendix G: Mentee Coalition Involvement Agreement (CIA)

As **Attachment 4**, the Mentee coalition **must** include one CIA for each Mentee Sector member listed in **Attachment 3**. At the time of application, the Mentee coalition is **not** required to have active representation from all 12 sectors. The following page provides a sample CIA for sector members. **This document allows an applicant to indicate compliance with as many of the required 12 sectors as possible at the time of this application.** Applicants can tailor the agreement as needed, but **must include the table below.**

Table 25: Mentee CIA Information (Must be at the top of every CIA)

Sector Name	Sector Member	Agency/Organization
Insert Sector Represented (e.g., Youth, Parent, Business, Media)	*Insert Individual's Name (as listed in the Sector Member Table, **Attachment 3**)*	*Insert Organization Name*

The member listed on the CIA must match the name listed on the Sector Member Table provided as Attachment 3.

General Information:

- CIAs **must** be no 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. Each CIA **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 25: Mentee CIA Information

- Insert **Table 25** at the top of each CIA.
- Remove the italicized language and enter the correct information under each of the table components (i.e., Sector, Member Name, and Organization Name).
- Below are the three components 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 21 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.

The following cannot serve as sector members: paid staff (current or proposed), the person signing the CIA on behalf of the coalition (e.g., coalition chair).

SAMPLE COALITION INVOLVEMENT AGREEMENT (CIA)

Sector Name	Sector Member	Agency/Organization
Insert Sector Represented (e.g., Youth, Parent, Business, Media)	Insert Individual's Name (**as listed in the Sector Member Table, Attachment 3**)	Insert Organization Name

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 held responsible to:

1. Create and follow by-laws and policies.
2. Formulate coalition goals and objectives.
3. Oversee operations of activities, programs, and paid staff.
4. Continue to increase new membership of the coalition.
5. Create and follow a strategic action plan.
6. Create a credible and relevant sustainability plan which includes volunteer membership and resources, both financial and material.
7. Respect the rights of *[Coalition Name]* members to hold their own opinions and beliefs.

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

1. Be a community leader amongst the represented sector.
2. Ensure clear communication between the sector represented and the coalition.
3. Act as a positive role model for youth, families, and peers.
4. Support the coalition's mission.
5. Attend coalition meetings which are held on a *[Frequency]* basis.
6. Participate in at least one subcommittee.
7. Attend coalition sponsored trainings, town hall meetings, and community events.
8. Contribute to the strategic planning process.
9. Participate in sustaining the coalition's capacity, involvement, and energy.

10. Participate in the DFC Workstation, a communication vehicle used by the DFC federal partners to provide timely information to coalitions.
11. Prevent youth substance use through community level change strategies.
12. Provides the following services to be used as match, if applicable:

By signing this CIA, I commit to the efforts of ***[Coalition Name]*** until which time this relationship is no longer beneficial to the mission set forth by its membership.

_____	_____
Coalition Representative's Name (Print)	Sector Representative's Name (Print)
_____	_____
Coalition Representative's Signature	Sector Representative's Signature
_____ __/__/__	_____ __/__/__
Title Date	Title Date

Appendix H: Mentor Coalition General Information Table

As **Attachment 5**, insert general information related to the Mentor coalition and its community. The table below **must** be utilized.

Table 26: Mentor Coalition General Information Table

Request for Information	Response
1. DFC Award Number (i.e. SPXXXXX)	
2. Coalition name	
3. Month and year Mentor coalition was established	
4. First year of DFC funding	
5. Indicate Yes or No if the coalition has a current DFC award? If yes, indicate the current DFC award year (e.g., Year Three, Year Four).	
6. Proposed Project Coordinator contact information (name, address, phone, fax, and e-mail).	
7. Geographic area served by coalition (include city, neighborhood, school district(s), etc.).	
8. List all zip codes for the geographic area served by coalition (use http://zip4.usps.com/zip4/welcome.jsp for assistance with identifying zip codes)	
9. Using zip codes, list U.S. Congressional District(s) served by coalition (*refer to http://www.house.gov to find Congressional Districts*).	
10. Indicate Yes or No if the coalition serves a tribal or Native American community. If yes, provide name of Tribe/community.	

Request for Information	Response
11. Indicate Yes or No if the coalition has at least one representative from the Bureau of Indian Affairs, Indian Health Services, or a tribal government agency with expertise in the field of substance abuse.	
12. Indicate whether the area(s) served by Mentor coalition is primarily **urban** or **rural**. Select only one. (See Appendix P for definitions).	
13. Indicate Yes or No, whether Mentor coalition serves an area that is economically disadvantaged (i.e., 20 percent or more of the children living in the target area live in a household below the poverty line, as defined by the U.S. Census Bureau).	
14. Indicate Yes or No, whether Mentor coalition (applicant) is on high-risk status.	

Appendix I: Mentee Coalition General Information Table

As **Attachment 6**, insert **Table 27: Mentee Coalition General Information Table**, provide general information related to the Mentee coalition and its community. The table below **must** be utilized. If the Mentor coalition chooses to mentor more than one coalition, the applicant **must** the table below **must** be completed separately for each proposed Mentee coalition.

Table 27: Mentee Coalition General Information Table

Request for Information	Response
1. Mentee coalition name	
2. Mentee coalition mailing address	
3. Date Mentee coalition was established	
4. Mentee project director (name, phone number & e-mail)	
5. Mentee coalition board chair/president contact information (name, phone number, and e-mail)	
6. Geographic area served by Mentee coalition (city, neighborhood, school district(s), etc.)	
7. List all of the zip codes for the geographic area served by the Mentee coalition (use http://zip4.usps.com/zip4/welcome.jsp for assistance with identifying zip codes)	
8. U.S. Congressional District(s) served by Mentee coalition	
9. Total population of the area served by Mentee coalition	
10. Does the Mentee coalition serve a tribal or Native American Community? Yes or No. If yes, indicate tribe Name.	
11. Does the Mentor coalition have at least one tribal or Native American Sector Representative? Yes or No. If yes, indicate which sector.	

Request for Information	Response
12. Indicate whether the area(s) served by Mentee coalition is primarily urban or rural. Select only one. (see Appendix P for definitions)	
13. Does the Mentee coalition serves an area that is economically disadvantaged (20 percent or more of the children living in the target area live in a household below the poverty line, as defined by the U.S. Census Bureau)? Indicate Yes or No.	
14. Is the Mentee coalition currently or has it ever been in receipt of a DFC grant? Indicate Yes or No.	
15. Is the Mentee coalition applying for a FY 2015 DFC grant? Indicate Yes or No. **Note:** If the Mentee receives a FY 2015 DCF grant, the DFC Mentoring application will be deemed ineligible.	
16. Has the Mentee been mentored under the DFC Mentoring grant in the past? Indicate Yes or No. If yes, indicate the number of years the coalition was mentored under this grant program. Also, provide the Mentoring grant award number.	

Appendix J: Memorandum of Understanding (MOU) between Mentor and Mentee Coalitions

As **Attachment 7,** the Mentor coalition is required to submit a separate MOU for each Mentee coalition. Below is a sample MOU that can be used between Mentor and Mentee coalitions. Applicants can tailor the agreement as needed.

Sample MOU between Mentor Coalition and each Mentee Coalition

This is a Memorandum of Understanding between ***[Mentor Coalition Name]*** and ***[Mentee Coalition Name]***. This MOU is an agreement to execute the DFC Mentoring Grant in the ***[Mentee Community Name]***.

Purpose: To maintain a formal partnership between the Mentor and the Mentee coalitions in the programmatic and fiscal management of the DFC Mentoring Grant.

Term: This MOU shall begin on _____ and extend through _____.

[Mentor Coalition Name] is responsible for:

1. Providing training and consultation in:
    a. Coalition membership development,
    b. Research based substance abuse prevention strategies including community level change strategies, and
    c. Effective implementation of all steps of the strategic prevention framework.
2. Jointly selecting and directing staff and volunteers, setting goals and objectives for contract employees, and negotiating and approving contracts.
3. Jointly selecting and formulating goals and objectives in compliance with DFC Terms and Conditions.
4. Jointly overseeing operation of the coalition's activities, programs and paid staff.
5. Jointly creating, approving, and assuring budget compliance with DFC Mentoring grant requirements.
6. Compiling financial reports on a mutually agreed upon schedule.
7. Providing banking services and performing bookkeeping, preparing quarterly and annual financial reports. Wages and payroll taxes due, along with approved invoices, shall be paid from [***Mentor Coalition Name***] funds.
8. Reimbursing [***Mentee Coalition Name***] for any indirect or direct expenses incurred with prior approval of [***Mentor Coalition Name***].

[Mentee Coalition Name] will be responsible for:

1. Increasing new membership of the coalition and community readiness.
2. Creating and following coalition's by-laws and policies.
3. Formulating coalition goals and objectives.
4. Assessing youth substance use trends and establishing baseline data.
5. Developing a comprehensive and sustainable community prevention plan.
6. Overseeing operations of activities, programs and if applicable, paid staff.
7. Establishing policy for its own programs.

EQUAL OPPORTUNITY

[Mentor Coalition Name] and ***[Mentee Coalition Name]*** 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.

Mentor Coalition Representative's Name (Print)	Mentee Coalition Representative's Name (Print)
Representative's Signature	Representative's Signature
_____ __/__/__	_____ __/__/__
Title Date	Title Date

Appendix K: 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 L: Intergovernmental Review (E.O. 12372) Requirements

Regarding Attachment 9; this grant program is covered under Executive Order (EO) 12372, as implemented through Department of Health and Human Services (HHS) 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 can be downloaded from the Office of Management and Budget (OMB) website at 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-15-002. Change the zip code to 20850 if you are using another delivery service.

In addition, if you are a community-based, non-governmental service provider and you are not transmitting your application through the state, you **must** submit a Public Health System Impact Statement (PHSIS)[3] 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 organizations within their jurisdictions. If you are a state, local government, 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

[3] 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).

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/applying/forms-resources. A listing of the SSAs for mental health can be found on SAMHSA's website at http://www.samhsa.gov/grants/applying/forms-resources. 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 9**, "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-15-002**. 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 M: Sample Congressional Notification

As Attachment 11, applicants <u>must</u> follow the exact format below and include the completed Congressional Notification. *The Project Description **<u>must</u> not** be more than 35 lines; therefore, the entire document **<u>must</u>** 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 #SP0_____
Mentor Coalition Name:
Mentor Coalition Community:
Mentor Coalition Contact Name:
Mentor Coalition Contact Address:
Mentor Coalition Contact E-Mail:
Mentor Coalition Phone Number:

Grantee Name:
Grantee Contact Name:
Grantee Contact E-Mail Address:
Grantee Contact Phone Number:

Mentee Coalition(s) Name(s):

[State]
[Mentor Coalition Name]
Serving Congressional District(s): [__]

Project Description

The [Mentor Coalition] was awarded a FY 2015 Drug-Free Communities Mentoring Program in the amount of $ [Amount] by the White House Office of National Drug Control Policy (ONDCP), in partnership with the Substance Abuse and Mental Health Services Administration (SAMHSA). The coalition will develop capacity, train, and mentor [Mentee coalition(s) name(s)] and assist them in applying for future DFC Support Program funding.

The goal of the Mentoring grant is to assist newly forming coalitions in becoming eligible to apply for DFC funding on their own. It will achieve this goal by implementing the following objectives: (1) Strengthen Mentee coalition's organizational structure; (2) Increase Mentee coalition's leadership and community readiness to address youth substance use problems in the Mentee community; and (3) Assist the Mentee coalition in working through a strategic planning process that will result in a comprehensive community prevention plan.

[Mentor Coalition] will achieve the objectives by implementing these strategies [provide a one-sentence description of each strategy that the Mentor coalition will implement]:

1)

2)

3)

Appendix N: Pre-Submission Verification Checklist

Use the form below **Table 28: Pre-Submission Verification Checklist** to ensure that the application meets all submission requirements. Place an "X" beside each completed item or, if applicable, provide the page number where each item can be found. Include the completed verification as the last page of the application.

Table 28: Pre-Submission Verification Checklist

Items to Complete	"X" or Page Number
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 on which the page numbering starts at page 1?	
Did you include the Overview of the Mentor/Mentee Relationship and Mentee Community (no more than 2 pages)?	
Is your Project Narrative no longer than 25 pages?	
Does your Project Narrative address all 6 questions?	
Did you include the Mentoring Plan in Question 5.3.5?	
Did you include a one-year 12-Month Budget Narrative and a Second Year Budget Estimate?	
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 matching fund requirements (12-Month Budget Narrative, SF-424 and SF-424A)?	
Did you meet all eligibility requirements (see Table 1 of this RFA)?	
In **Attachment 1**, did you include the Mentor Sector Table (see Appendix D)?	

Items to Complete	"X" or Page Number
In **Attachment 2**, did you include the Mentor Coalition CIAs (see Appendix E)?	
In **Attachment 3**, did you include the Mentee Sector Member Table (see Appendix F)?	
In **Attachment 4**, did you include the Mentee Coalition CIAs (see Appendix G)?	
In **Attachment 5**, did you include the Mentor Coalition General Information Table (see Appendix H)?	
In **Attachment 6**, did you include the Mentee Coalition General Information Table (see Appendix I)?	
In **Attachment 7**, did you include a separate MOU between the Mentor coalition and each Mentee coalition (see Appendix J)?	
In **Attachment 8**, did you include the required resumes and job descriptions (see Appendix K)?	
In **Attachment 9**, did you include a copy of the Single State Agency Letter regarding Intergovernmental Review (E.O. 12372) Requirements (see Appendix L)?	
In **Attachment 10**, did you include all required forms, certifications, disclosures, and assurances?	
In **Attachment 11**, did you include the Congressional Notification (see Appendix M)?	
In **Attachment 12**, did you include the **Community-Level Outcomes Section** *(Section 6)* of your most current DFC COMET Progress Report?	
Did you include the Checklist found in the Grant Application Package as the next-to-last page of the application?	
Did you include the Pre-Submission Verification as the last document (see Appendix N)?	

Appendix O: Scoring Criteria

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 according to the evaluation criteria described below.

Peer reviewers will score **each bullet** for questions **1-4, 6** using the following definitions of each descriptor:

Outstanding: The applicant organization explicitly addresses the bullet by providing comprehensive descriptions, thorough details, and examples. Relevant examples and data are included to support the information presented. The applicant organization demonstrates a strong understanding of the topic and the level of detail reinforces each response clearly and how the project will be implemented.

Very Good: The applicant organization provides significant descriptions and relevant details in addressing the bullet but the response is not fully comprehensive. The applicant organization demonstrates a sound understanding of the topic and includes pertinent examples. It is possible to specify what makes the response better than acceptable but not up to the standards of outstanding.

Acceptable: The applicant organization provides a basic response to the bullet but does not include enough detail or pertinent examples. Key descriptions, details, and examples are limited. The applicant organization does not effectively translate the requirements of the RFA into practice.

Marginal: The applicant organization provides minimal details and insufficient descriptions that do not completely answer the bullet. Limited information is presented or the applicant merely repeats information included in the RFA. The applicant may answer part of the bullet but miss a key point or there are major gaps in the information presented.

Unacceptable: The applicant organization does not explicitly address the bullet. The applicant organization states the question, but does not elaborate on the response. The applicant organization skips or otherwise ignores the question or includes irrelevant information that does not answer the question. As a result, the answer is completely deficient in addressing the bullet.

For **Question 5,** peer reviewers will provide an **overall rating** for the 12-Month Mentoring Plan using the following definitions of each descriptor:

Outstanding: It fully addresses the **one** DFC Mentoring goal. The Mentoring Plan includes objectives that center on how the Mentee coalition will move towards becoming DFC eligible. The strategies and activities included effectively address each objective. **The Mentoring Plan fully meets all four of the following requirements:** (1) The template provided in Table 4 is used; (2) The goal identified in Table 4 is included; (3) **All** of the objectives are measurable (an end product is identified and a specific completion date is included) and (4) The plan is comprehensive.

Very Good: The DFC Mentoring goal is addressed but it is not fully comprehensive. The Mentoring Plan includes objectives that center on how the Mentee coalition will move toward becoming DFC eligible. The strategies and activities effectively address each objective. **The Mentoring Plan fully meets all four of the following requirements:** (1) The template provided in Table 4 is used; (2) The goal identified in Table 4 is included; (3) **All** of the objectives are measurable (an end product is identified and a specific completion date is included) and (4) The plan is feasible.

Acceptable: The DFC Mentoring goal is satisfactorily addressed but it is not comprehensive; and does not clearly outline how the Mentee coalition will move forward toward becoming DFC eligible. It is not clear that the strategies and activities will allow the objectives to be met. **Not all** of the objectives are measurable.

Marginal: The DFC Mentoring goal is not satisfactorily addressed and does not clearly outline how the Mentee coalition will move toward becoming DFC eligible. Insufficient strategies and activities are included that will not allow the objectives to be met. The objectives are **not** measurable.

Unacceptable: The applicant organization skips or otherwise fails to address the criteria for the Mentoring Plan. The required template is **not** used. **None** of the objectives are measurable.

Example of a measurable objective: By 9/29/16 (specific date) the Mentor coalition will conduct at least three (3) trainings (end product) for the 12 sector members and identified leaders of the Mentee coalition.

Point scale ranges are provided below:

Question 3 will be scored using the following 10 point scale:

Outstanding point range:	Very Good point range:	Acceptable point range:	Marginal point range:	Unacceptable point range:
10-9	8	7	6	5-0

Questions 1, 4 & 6 will be scored using the following 15 point scale:

Outstanding point range:	Very Good point range:	Acceptable point range:	Marginal point range:	Unacceptable point range:
15-14	13-12	11	10-9	8-0

Question 2 will be scored using the following 20 point scale:

Outstanding point range:	Very Good point range:	Acceptable point range:	Marginal point range:	Unacceptable point range:
20-18	17-16	15-14	13-12	11-0

Question 5 (Mentoring Plan) will be scored using the following 25 point scale:

Outstanding point range:	Very Good point range:	Acceptable point range:	Marginal point range:	Unacceptable point range:
25-23	22-20	19-18	17-15	14-0

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 who 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 the12 required sectors.

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

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 percent as measured by the rate of failed compliance checks (currently 25 percent).

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.